

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

Phone: 0522-4062223, 9305548277, 8400888844 9415577933. 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

CMO Reg. No. RMEE 2445133 NABLReg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Ms.NAZUK BEGUM

Age/Gender : 67 Y/F

PR.

Lab No : 10130753

Referred By : Dr.NIRUPAM PRAKASH Refer Lab/Hosp : CGHS (BILLING)

CRP (Quantitative),CBC+ESR Doctor Advice :

Visit No : CHA250033457

Registration ON : 24/Feb/2025 05:05PM

Sample Collected ON : 24/Feb/2025 05:11PM

Sample Received ON : 24/Feb/2025 05:28PM

Report Generated ON : 24/Feb/2025 06:55PM



Test Name	Result	Unit	Bio. Ref. Range	Method
CRP-QUANTITATIVE				
CRP-QUANTITATIVE TEST	0.1	MG/L	0.1 - 6	

Method: Immunoturbidimetric

( Method: Immunoturbidimetric on photometry system)

SUMMARY: C - reactive protien (CRP) is the best known among the acute phase protiens, a group of protien whose concentration increases in blood as a response to inflammatory disorders.CRP is normally present in low concentration in blood of healthy individuals (< 1mg/L). It is elevated up to 500 mg/L in acute inflammatory processes associated with bacterial infections, post operative conditions tissue damage already after 6 hours reaching a peak at 48 hours.. The measurment of CRP represents a useful aboratory test for detection of acute infection as well as for monitoring inflammtory proceses also in acute rheumatic & gastrointestinal disease. In recent studies it has been shows that in apparrently healthy subjects there is a direct orrelation between CRP concentrations & the risk of developing oronary heart disease (CHD).

hsCRP cut off for risk assessment as per CDC/AHA

Level Risk <1.0 Low 1 0-3 0 Average >3.0 High

All reports to be clinically corelated

CHARAK





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Visit No : CHA250033457

Registration ON : 24/Feb/2025 05:05PM

Sample Collected ON : 24/Feb/2025 05:11PM

Sample Received ON : 24/Feb/2025 05:29PM

Report Generated ON : 24/Feb/2025 06:51PM



Test Name	Result	Unit	Bio. Ref. Range	Method			
CBC+ESR (COMPLETE BLOOD COUNT)							
Hb	10.7	g/dl	12 - 15	Non Cyanide			
R.B.C. COUNT	3.70	mil/cmm	3.8 - 4.8	Electrical			
				Impedence			
PCV	34.3	%	36 - 45	Pulse hieght			
				detection			
MCV	92.0	fL	80 - 96	calculated			
MCH	28.7	pg	27 - 33	Calculated			
MCHC	31.2	g/dL	30 - 36	Calculated			
RDW	17.8	%	11 - 15	RBC histogram			
				derivation			
RETIC	1.0 %	%	0.5 - 2.5	Microscopy			
TOTAL LEUCOCYTES COUNT	2740	/cmm	4000 - 10000	Flocytrometry			
DIFFERENTIAL LEUCOCYTE COUNT							
NEUTROPHIL	61	%	40 - 75	Flowcytrometry			
LYMPHOCYTE	30	%	20-40	Flowcytrometry			
EOSINOPHIL	3	%	1 - 6	Flowcytrometry			
MONOCYTE	6	%	2 - 10	Flowcytrometry			
BASOPHIL	0	%	00 - 01	Flowcytrometry			
PLATELET COUNT	8,000	/cmm	150000 - 450000	Elect Imped			
PLATELET COUNT (MANUAL)	12000	/cmm	150000 - 450000	Microscopy.			
Mentzer Index	25	40	A 1.7	· -			
Peripheral Blood Picture	CH						

Red blood cells are normocytic normochromic with anisocytosis+.WBCs show leucopenia. Platelets are markedly reduced. No parasite seen.

Recheck with fresh EDTA sample if not clinically correlating.

\*\*\* End Of Report \*\*\*





**PATHOLOGIST**