

Patient Name : Mr.ANZAR ALAM	Visit No : CHA250033549
Age/Gender : 49 Y/M	Registration ON : 24/Feb/2025 08:08PM
Lab No : 10130845	Sample Collected ON : 24/Feb/2025 08:12PM
Referred By : Dr.SYED IRFAN QADEER **	Sample Received ON : 24/Feb/2025 08:38PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 25/Feb/2025 10:23AM
Doctor Advice : RANDOM,HBA1C (EDTA),ESR,CBC (WHOLE BLOOD),CHEST PA	



Test Name	Result	Unit	Bio. Ref. Range	Method
ESR				
Erythrocyte Sedimentation Rate ESR	25.00		0 - 15	Westergreen

Note:

1. Test conducted on EDTA whole blood at 37°C.
2. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.
3. It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever. It is also increased in multiple myeloma, hypothyroidism.

HBA1C				
Glycosylated Hemoglobin (HbA1c)	8.9	%	4 - 5.7	HPLC (EDTA)

NOTE:-

Glycosylated Hemoglobin Test (HbA1c) is performed in this laboratory by the Gold Standard Reference method, ie: HPLC Technology (High performance Liquid Chromatography D10) from Bio-Rad Laboratories, USA.

EXPECTED (RESULT) RANGE :

Bio system	Degree of normal
4.0 - 5.7 %	Normal Value (OR) Non Diabetic
5.8 - 6.4 %	Pre Diabetic Stage
> 6.5 %	Diabetic (or) Diabetic stage
6.5 - 7.0 %	Well Controlled Diabet
7.1 - 8.0 %	Unsatisfactory Control
> 8.0 %	Poor Control and needs treatment



[Checked By]

Print.Date/Time: 25-02-2025 17:33:49

*Patient Identity Has Not Been Verified. Not For Medicolegal

DR. NISHANT SHARMA DR. SHADAB DR. ADITI D AGARWAL
PATHOLOGIST PATHOLOGIST PATHOLOGIST

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Referred By : Dr.SYED IRFAN QADEER **	Sample Received ON : 24/Feb/2025 11:12PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 25/Feb/2025 11:03AM
Doctor Advice : RANDOM,HBA1C (EDTA),ESR,CBC (WHOLE BLOOD),CHEST PA	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	10.5	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.40	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	33.4	%	36 - 45	Pulse hieght detection
MCV	75.1	fL	80 - 96	calculated
MCH	23.6	pg	27 - 33	Calculated
MCHC	31.4	g/dL	30 - 36	Calculated
RDW	17.6	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	13450	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	64	%	40 - 75	Flowcytometry
LYMPHOCYTES	28	%	25 - 45	Flowcytometry
EOSINOPHIL	4	%	1 - 6	Flowcytometry
MONOCYTE	4	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	206,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	206000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	8,608	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	3,766	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	538	/cmm	20-500	Calculated
Absolute Monocytes Count	538	/cmm	200-1000	Calculated
Mentzer Index	17			
Peripheral Blood Picture	:			

Red blood cells are microcytic hypochormic with anisocytosis+. WBCs show leucocytosis. Platelets are adequate. No parasite seen.



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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD SUGAR RANDOM				
BLOOD SUGAR RANDOM	165.5	mg/dl	70 - 170	Hexokinase

*** End Of Report ***



Aditi D Agarwal

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SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Bilateral hilar shadows are normal.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Soft tissue and body cage are seen normally.
- Both domes of diaphragm are sharply defined.

OPINION

- **NO ACTIVE LUNG PARENCHYMAL LESION IS DISCERNIBLE.**

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya

*** End Of Report ***

