

Patient Name : Ms.AQSA	Visit No : CHA250034520
Age/Gender : 20 Y/F	Registration ON : 26/Feb/2025 09: 37AM
<b>Lab No : 10131816</b>	Sample Collected ON : 26/Feb/2025 09: 42AM
Referred By : Dr.ATUL CHAND RASTOGI	Sample Received ON : 26/Feb/2025 09: 57AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 26/Feb/2025 10: 49AM
Doctor Advice : CT HEAD PLAIN,CALCIUM,VIT B12,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>SERUM CALCIUM</b>				
CALCIUM	10.2	mg/dl	8.8 - 10.2	dapta / arsenazo III

<b>VITAMIN B12</b>				
VITAMIN B12	<b>158</b>	pg/mL		CLIA

180 - 814 Normal  
145 - 180 Intermediate  
145.0 Deficient pg/ml

**Summary :-**

Nutritional & macrocytic anemias can be caused by a deficiency of vitamin B12. This deficiency can result from diets devoid of meat & bacterial products, from alcoholism or from structural / functional damage to digestive or absorptive processes. Malabsorption is the major cause of this deficiency.

**CHARAK**

[Checked By]

Print.Date/Time: 26-02-2025 12:40:26

\*Patient Identity Has Not Been Verified. Not For Medicolegal



*Sharma*

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD  
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

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<b>Lab No : 10131816</b>	Sample Collected ON : 26/Feb/2025 09:42AM
Referred By : Dr.ATUL CHAND RASTOGI	Sample Received ON : 26/Feb/2025 09:59AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 26/Feb/2025 12:04PM
Doctor Advice : CT HEAD PLAIN,CALCIUM,VIT B12,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC (COMPLETE BLOOD COUNT)</b>				
Hb	13.3	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.40	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	41.0	%	36 - 45	Pulse height detection
MCV	94.0	fL	80 - 96	calculated
MCH	30.5	pg	27 - 33	Calculated
MCHC	32.4	g/dL	30 - 36	Calculated
RDW	12.9	%	11 - 15	RBC histogram derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	4410	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	63	%	40 - 75	Flowcytometry
LYMPHOCYTES	34	%	25 - 45	Flowcytometry
EOSINOPHIL	0	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	194,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	194000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	2,778	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,499	/cmm	1000-3000	Calculated
Absolute Monocytes Count	132	/cmm	200-1000	Calculated
Mentzer Index	21			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic. Platelets are adequate. No immature cells or parasite seen.

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



[Checked By]



*Sham*

DR. NISHANT SHARMA PATHOLOGIST    DR. SHADAB PATHOLOGIST    Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

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**CT STUDY OF HEAD**

**Infratentorial**

- Cerebellopontine angle and prepontine cisterns are seen normally.
- Fourth ventricle is normal in size and midline in location.
- Cerebellar parenchyma and brain stem appears to be normal.

**Supratentorial**

- Bilateral cerebral parenchyma shows normal gray and white matter differentiation.
- Third and both lateral ventricles are normal in size.
- Basal cisterns are clear.
- No midline shift is seen.

**IMPRESSION:**

- NO EVIDENCE SUGGESTIVE OF ANY FOCAL PARENCHYMAL DISEASE OR ANY SPACE OCCUPYING LESION IS IDENTIFIED.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

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

