

Patient Name : Ms. GOHAR SULTANA	Visit No : CHA250035296
Age/Gender : 59 Y O M O D /F	Registration ON : 27/Feb/2025 10:54AM
Lab No : 10132592	Sample Collected ON : 27/Feb/2025 10:56AM
Referred By : Dr.DAVENDRA SINGH **	Sample Received ON : 27/Feb/2025 11:10AM
Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 27/Feb/2025 12:59PM
Doctor Advice : BOTH HAND AP /LAT,KIDNEY FUNCTION TEST - I,RF FACTOR,CALCIUM,ANTI CCP TITRE,CREATININE,CRP (Quantitative),SGPT,SGOT,ESR,CBC+ESR	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC+ESR (COMPLETE BLOOD COUNT)				
Erythrocyte Sedimentation Rate ESR	30.00		0 - 20	Westergreen



CHARAK

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Sharma

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

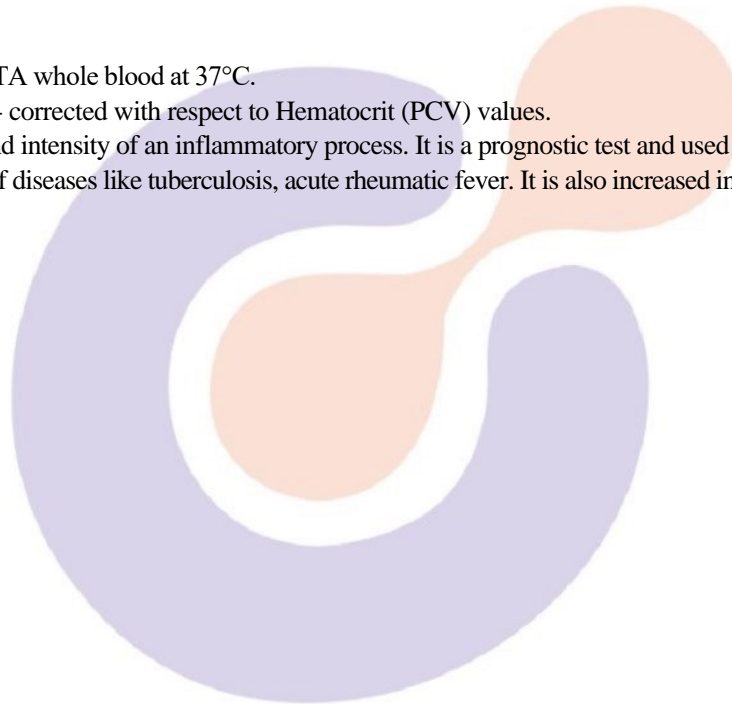
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Test Name	Result	Unit	Bio. Ref. Range	Method
ESR				
Erythrocyte Sedimentation Rate ESR	38.00		0 - 20	Westergreen

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.



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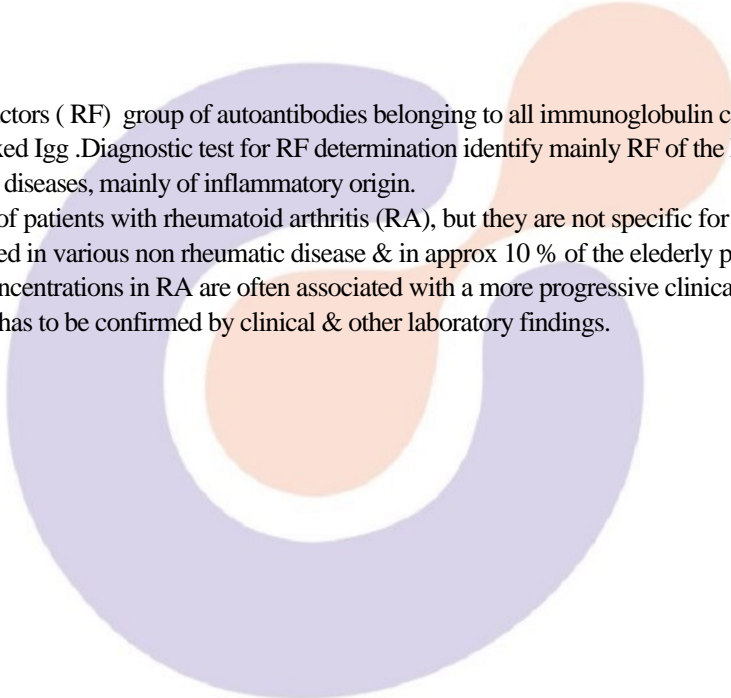
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Referred By : Dr.DAVENDRA SINGH **	Sample Received ON : 27/Feb/2025 11:18AM
Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 27/Feb/2025 12:13PM
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Test Name	Result	Unit	Bio. Ref. Range	Method
RF FACTOR				
RHEUMATOID FACTOR	5.18	IU/ml	0 - 14	

SUMMARY : Rheumatoid factors (RF) group of autoantibodies belonging to all immunoglobulin classes directed against the FC fragment of altered or complexed Igg .Diagnostic test for RF determination identify mainly RF of the IgM class which are detectable in several rheumatic diseases, mainly of inflammatory origin.

RF occur in approx 70 -80 % of patients with rheumatoid arthritis (RA), but they are not specific for RA as elevated concentrations are also observed in various non rheumatic disease & in approx 10 % of the elderly population without clinical symptoms of RA. High RF concentrations in RA are often associated with a more progressive clinical course of the disease .However,a positive RF value has to be confirmed by clinical & other laboratory findings.



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Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 27/Feb/2025 12:28PM
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Test Name	Result	Unit	Bio. Ref. Range	Method
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CRP-QUANTITATIVE

CRP-QUANTITATIVE TEST	8.25	MG/L	0.1 - 6	
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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

SERUM CALCIUM

CALCIUM	9.0	mg/dl	8.8 - 10.2	dapta / arsenazo III
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ANTI CCP TITRE

Anti CCP TITRE	8.00	U/ML	7 - 17	
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Test Name	Result	Unit	Bio. Ref. Range	Method
CBC+ESR (COMPLETE BLOOD COUNT)				
Hb	10.3	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	3.90	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	35.2	%	36 - 45	Pulse hieght detection
MCV	90.3	fL	80 - 96	calculated
MCH	26.4	pg	27 - 33	Calculated
MCHC	29.3	g/dL	30 - 36	Calculated
RDW	15	%	11 - 15	RBC histogram derivation
RETIC	1.0 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	16750	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	77	%	40 - 75	Flowcytometry
LYMPHOCYTE	18	%	20-40	Flowcytometry
EOSINOPHIL	2	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	204,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	204000	/cmm	150000 - 450000	Microscopy .
Mentzer Index	23			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic. WBCs show neutrophilic leucocytosis. Platelets are adequate. No parasite seen.



[Checked By]



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Test Name	Result	Unit	Bio. Ref. Range	Method
SERUM CREATININE				
CREATININE	0.90	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
SGPT				
SGPT	20.5	U/L	5 - 40	UV without P5P
SGOT				
SGOT	16.8	U/L	5 - 40	UV without P5P
KIDNEY FUNCTION TEST - I				
Sample Type : SERUM				
BLOOD UREA	44.50	mg/dl	15 - 45	Urease, UV, Serum
CREATININE	0.90	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
SODIUM Serum	138.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.4	MEq/L	3.5 - 5.5	ISE Direct

*** End Of Report ***

CHARAK



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SKIAGRAM BOTH HANDS AP AND LATERAL

- Bone density is reduced.
- No bony traumatic pathology is seen.
- Joint spaces are maintained.
- No bony destruction is seen.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed By: ANUP

*** End Of Report ***

