

Patient Name : Mr. ANWAR AHMAD	Visit No : CHA250035557
Age/Gender : 45 Y/M	Registration ON : 27/Feb/2025 02: 44PM
<b>Lab No : 10132853</b>	Sample Collected ON : 27/Feb/2025 02: 46PM
Referred By : Dr. MOHD RIZWANUL HAQUE	Sample Received ON : 27/Feb/2025 03: 03PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 27/Feb/2025 05: 24PM
Doctor Advice : SERUM IGE, TROPONIN-I (SERUM), BUN, CREATININE, ESR, CBC (WHOLE BLOOD), DIGITAL 1	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>ESR</b>				
Erythrocyte Sedimentation Rate ESR	14.00		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.

<b>BLOOD UREA NITROGEN</b>				
Blood Urea Nitrogen (BUN)	18.88	mg/dL	7-21	calculated

<b>SERUM IGE</b>				
SERUM IGE	<b>1730</b>		0.10 - 100	CLIA

**Age group** Value (IU/ml)

Neonates	0.1 - 1.5
Infants in first year of life	0.1 - 15.0
Children aged 1-5 Years	0.1 - 60.0
Children aged 6-9 Years	0.1 - 90.0
Children aged 10-15 Years	0.1 - 200.0
Adults	0.1 - 100.0



[Checked By]

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DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADABKHAN  
PATHOLOGIST

Dr. SYED SAIF AHMAD  
MD (MICROBIOLOGY)

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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>TROPONIN-I (SERUM)</b>				
TROPONIN-I (SERUM)	0.019		cut off value : 0.120	

**NOTE: -**

Troponin I (TnI) is a protein normally found in muscle tissue that, in conjunction with Troponin T and Troponin C, regulates the calcium dependent interaction of actin and myosin.1 Three isotypes of TnI have been identified: one associated with fast-twitch skeletal muscle, one with slow-twitch skeletal muscle and one with cardiac muscle.The cardiac form has an additional 31 amino acid residues at the N terminus and is the only troponin isoform present in the myocardium.Clinical studies have demonstrated that cardiac Troponin I (cTnI) is detectable in the bloodstream 4–6 hours after an acute myocardial infarct (AMI) and remains elevated for several days thereafter Thus, cTnI elevation covers the diagnostic windows of both creatine kinase-MB (CK-MB) and lactate dehydrogenase.3 Further studies have indicated that cTnI has a higher clinical specificity for myocardial injury than does CK-MB. Done by: Vitros ECI ( Johnson & Johnson)

Other conditions resulting in myocardial cell damage can contribute to elevated cTnI levels. Published studies have documented that these conditions include, but are not limited to, sepsis, congestive heart failure, hypertension with left ventricular hypertrophy, hemodynamic compromise, myocarditis, mechanical injury including cardiac surgery, defibrillation and cardiac toxins such as anthracyclines. Factors such as these should be considered when interpreting results from any cTnI test method.

**CHARAK**

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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC (COMPLETE BLOOD COUNT)</b>				
Hb	<b>10.8</b>	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.20	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	<b>34.6</b>	%	36 - 45	Pulse height detection
MCV	82.4	fL	80 - 96	calculated
MCH	<b>25.7</b>	pg	27 - 33	Calculated
MCHC	31.2	g/dL	30 - 36	Calculated
RDW	<b>15.4</b>	%	11 - 15	RBC histogram derivation
RETIC	0.5 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	8180	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	59	%	40 - 75	Flowcytometry
LYMPHOCYTES	34	%	25 - 45	Flowcytometry
EOSINOPHIL	4	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	<b>0</b>	%	00 - 01	Flowcytometry
PLATELET COUNT	164,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	164000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	4,826	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,781	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	327	/cmm	20-500	Calculated
Absolute Monocytes Count	245	/cmm	200-1000	Calculated
Mentzer Index	20			
Peripheral Blood Picture	:			

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



[Checked By]



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DR. SHADAB  
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*Aditi D Agarwal*  
DR. ADITI D AGARWAL  
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>SERUM CREATININE</b>				
CREATININE	1.10	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic

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



CHARAK



MC-2491

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*Dr. Aditi D. Agarwal*  
DR. 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 bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

**IMPRESSION:**

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

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Report typed by GAUSIYA

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

