

Patient Name : Mrs.MANJU	Visit No : CHA250039831
Age/Gender : 50 Y/F	Registration ON : 05/Mar/2025 01: 22PM
Lab No : 10137126	Sample Collected ON : 05/Mar/2025 01: 24PM
Referred By : Dr.MITA AGARAL **	Sample Received ON : 05/Mar/2025 01: 38PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 05/Mar/2025 03: 15PM
Doctor Advice : SGPT,ALK PHOS,CREATININE,UREA,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	12.8	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	3.80	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	38.6	%	36 - 45	Pulse hieght detection
MCV	102.4	fL	80 - 96	calculated
MCH	34.0	pg	27 - 33	Calculated
MCHC	33.2	g/dL	30 - 36	Calculated
RDW	15.6	%	11 - 15	RBC histogram derivation
RETIC	0.6 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	9970	/cmm	4000 - 10000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	76	%	40 - 75	Flowcytometry
LYMPHOCYTES	19	%	25 - 45	Flowcytometry
EOSINOPHIL	2	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	181,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	181000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	7,577	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,894	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	199	/cmm	20-500	Calculated
Absolute Monocytes Count	299	/cmm	200-1000	Calculated
Mentzer Index	27			
Peripheral Blood Picture	:			

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



[Checked By]



DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Agarwal
DR. ADITI D AGARWAL
PATHOLOGIST

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Referred By : Dr.MITA AGARAL **	Sample Received ON : 05/Mar/2025 01: 37PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 05/Mar/2025 02: 29PM
Doctor Advice : SGPT,ALK PHOS,CREATININE,UREA,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD UREA				
BLOOD UREA	21.40	mg/dl	15 - 45	Urease, UV, Serum

SERUM CREATININE				
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic

ALK PHOS				
ALK PHOS	86.80	U/L	30 - 120	PNPP, AMP Buffer

INTERPRETATION:

- Alkaline phosphatase is an enzyme found in your bloodstream. ALP helps break down proteins in the body and exists in different forms, depending on where it originates. Liver is one of the main sources of ALP, but some is also made in bones, intestines, pancreas, and kidneys. In pregnant women, ALP is made in the placenta.
- Higher than normal levels of ALP in blood may indicate a problem with liver or gallbladder. This could include hepatitis (liver inflammation), cirrhosis (liver scarring), liver cancer, gallstones, or a blockage in bile ducts. High levels may also indicate an issue related to the bones such as rickets, Paget's disease, bone cancer, or an overactive parathyroid gland. In rare cases, high ALP levels can indicate heart failure, kidney cancer, other cancer, mononucleosis, or bacterial infection. Having lower than normal ALP levels in blood is rare, but can indicate malnutrition, which could be caused by celiac disease or a deficiency in certain vitamins and minerals.

SGPT				
SGPT	13.0	U/L	5 - 40	UV without P5P

*** End Of Report ***



[Checked By]



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