

Patient Name : Ms.TANU	Visit No : CHA250042242
Age/Gender : 24 Y/F	Registration ON : 09/Mar/2025 08:59AM
Lab No : 10139537	Sample Collected ON : 09/Mar/2025 09:03AM
Referred By : Dr.VINIT ASTHANA	Sample Received ON : 09/Mar/2025 09:28AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 09/Mar/2025 11:12AM
Doctor Advice : TYPHOID IGG& IGM,LFT,CBC (WHOLE BLOOD),USG WHOLE ABDOMEN	



Test Name	Result	Unit	Bio. Ref. Range	Method
TYPHOID IGG& IGM				
TYPHOID IgG	POSITIVE		NEGATIVE	
TYPHOID IGM	POSITIVE		NEGATIVE	



[Checked By]

Print.Date/Time: 09-03-2025 12:05:08

*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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Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	12.5	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	3.70	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	38.3	%	36 - 45	Pulse hieght detection
MCV	103.2	fL	80 - 96	calculated
MCH	33.7	pg	27 - 33	Calculated
MCHC	32.6	g/dL	30 - 36	Calculated
RDW	15.2	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	9000	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	63	%	40 - 75	Flowcytometry
LYMPHOCYTES	23	%	25 - 45	Flowcytometry
EOSINOPHIL	11	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	200,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	200000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	5,670	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,070	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	990	/cmm	20-500	Calculated
Absolute Monocytes Count	270	/cmm	200-1000	Calculated
Mentzer Index	28			
Peripheral Blood Picture	:			

Red blood cells show cytopenia++ macrocytes with anisocytosis+.WBCs show mild eosinophilia. Platelets are adequate. No immature cells or parasite seen.



[Checked By]



Sham

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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	1.29	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.27	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	1.02	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	74.80	U/L	30 - 120	PNPP, AMP Buffer
SGPT	22.0	U/L	5 - 40	UV without P5P
SGOT	27.0	U/L	5 - 40	UV without P5P

*** End Of Report ***



CHARAK



[Checked By]



Sham

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ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver** is **mildly enlarged in size (~151mm)** and shows homogenous echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- **Gall bladder** is normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are not thickened.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. **A tiny concretion is seen at mid pole of left kidney measuring approx 2.4mm.** No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 94 x 41 mm in size. Left kidney measures 102 x 39 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is inadequate distended (patient is unable wait for full bladder on persistence request).
- **Uterus** is *grossly normal in size*, measures 68 x 35 x 32 mm .
- **Cervix** is normal.
- **Both ovaries** are *grossly normal*
- No adnexal mass lesion is seen.
- No free fluid is seen in Cul-de-Sac.

OPINION:

- **MILD HEPATOMEGALY.**
- **TINY LEFT RENAL CONCRETION.**

ADV; REPEAT USG FOR LOWER ABDOMEN WITH FULL BLADDER [FREE OF COST]

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed By: Gausiya

*** End Of Report ***

