

Patient Name : Mr.RAJ KUMAR SINGH	Visit No : CHA250042800
Age/Gender : 62 Y/M	Registration ON : 10/Mar/2025 10:15AM
Lab No : 10140095	Sample Collected ON : 10/Mar/2025 10:16AM
Referred By : Dr.NIRUPAM PRAKASH	Sample Received ON : 10/Mar/2025 10:28AM
Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 10/Mar/2025 01:29PM
Doctor Advice : CBC+ESR,PSA-TOTAL,KIDNEY FUNCTION TEST - I,URINE C/S,URINE COM. EXMAMINATION	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC+ESR (COMPLETE BLOOD COUNT)				
Erythrocyte Sedimentation Rate ESR	38.00		0 - 20	Westergreen



CHARAK

[Checked By]

Print.Date/Time: 10-03-2025 14:39:01

*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Aditi D Agarwal
DR. ADITI D AGARWAL
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Test Name	Result	Unit	Bio. Ref. Range	Method
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URINE EXAMINATION REPORT

Colour-U	DARK YELLOW		Light Yellow	
Appearance (Urine)	CLEAR		Clear	
Specific Gravity	1.015		1.005 - 1.025	
pH-Urine	Acidic (6.0)		4.5 - 8.0	
PROTEIN	10 mg/dl	mg/dl	ABSENT	Dipstick
Glucose	Absent			
Ketones	Absent		Absent	
Bilirubin-U	Absent		Absent	
Blood-U	PRESENT		Absent	
Urobilinogen-U	0.20	EU/dL	0.2 - 1.0	
Leukocytes-U	Absent		Absent	
NITRITE	Absent		Absent	
MICROSCOPIC EXAMINATION				
Pus cells / hpf	Occasional	/hpf	< 5/hpf	
Epithelial Cells	Occasional	/hpf	0 - 5	
RBC / hpf	Occasional		< 3/hpf	

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Test Name	Result	Unit	Bio. Ref. Range	Method
CBC+ESR (COMPLETE BLOOD COUNT)				
Hb	14.3	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	3.90	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	41.3	%	36 - 45	Pulse hieght detection
MCV	106.4	fL	80 - 96	calculated
MCH	36.9	pg	27 - 33	Calculated
MCHC	34.6	g/dL	30 - 36	Calculated
RDW	15.2	%	11 - 15	RBC histogram derivation
RETIC	0.7 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	6380	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	51	%	40 - 75	Flowcytometry
LYMPHOCYTE	44	%	20-40	Flowcytometry
EOSINOPHIL	3	%	1 - 6	Flowcytometry
MONOCYTE	2	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	114,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	130,000	/cmm	150000 - 450000	Microscopy .
Mentzer Index	27			
Peripheral Blood Picture	:			

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
KIDNEY FUNCTION TEST - I				
Sample Type : SERUM				
BLOOD UREA	18.60	mg/dl	15 - 45	Urease, UV, Serum
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
SODIUM Serum	140.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.1	MEq/L	3.5 - 5.5	ISE Direct
PSA-TOTAL				
PROSTATE SPECIFIC ANTIGEN	0.40	ng/mL	0.2-4.0	CLIA

COMMENT : 1. Prostate specific antigen (PSA) is useful for diagnosis of disseminated CA prostate & its sequential measurement is the most sensitive measure of monitoring treatment of disseminated CA prostate with its shorter half life (half life of 2.2 days only) it is superior to prostatic acid phosphatase(PAP). PSA is elevated in nearly all patients with stage D carcinoma whereas PAP is elevated in only 45 % of patient. Mild PSA elevation are also reported in some patients of BHP.

2. Blood samples should be obtained before prostate biopsy or prostatectomy or prostatic massage or digital pre rectal examination as it may result intrasient levation of PSA value for few days.

NOTE :- PSA values obtained in different types of PSA assay methods cannot be used interchangeably as the PSA value in a given sample varies with assays from different manufactures due to difference in assay methodology and reagent specificity. If in the course of monitoring a patient the assay method used for determination is changed, additional sequential testing should be carried out to confirm baseline value.

DONE BY;
Enhanced Chemiluminescence "VITROS ECI"

*** End Of Report ***



[Checked By]



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DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)