

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

CMO Reg. No. RMEE 2445133 NABLReg. No.MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr.SUNIL YADAV

Age/Gender : 33 Y/M Lab No

Doctor Advice

: 10141180 Referred By : Dr.MANISH TANDON Refer Lab/Hosp

: CHARAK NA Report Generated ON . PT/PC/INR,LFT,CREATININE,CRP (Quantitative),ESR,CBC (WHOLE BLOOD)

Registration ON : 11/Mar/2025 01:21PM

Sample Collected ON : 11/Mar/2025 01:23PM

> : 11/Mar/2025 01:33PM : 11/Mar/2025 03:05PM

Visit No

: CHA250043885

**Test Name** Bio. Ref. Range Method Unit Result ESR

**Erythrocyte Sedimentation Rate ESR** 

14.00

0 - 15

Sample Received ON

Westergreen

## Note:

PR.

- 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.

## **CRP-QUANTITATIVE**

CRP-OUANTITATIVE TEST

48.4

MG/L

0.1 - 6

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

Risk Level <1.0 Low 1.0-3.0 Average High >3.0

CHARAK

All reports to be clinically corelated

PT/PC/INR

PROTHROMBIN TIME Protrhromin concentration

INR (International Normalized Ratio)

13 Second 100 % 1.00

13 Second

Clotting Assay

100 % 1.0

DR. NISHANT SHARMA DR. SHADAB **PATHOLOGIST PATHOLOGIST**  DR ADITI D AGARWAI **PATHOLOGIST** 

[Checked By]

Print.Date/Time: 11-03-2025 \*Patient Identity Has Not Been Verified. Not For Medicolega

Page 1 of 4



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Age/Gender : 33 Y/M Registration ON : 11/Mar/2025 01:21PM Lab No : 10141180 Sample Collected ON : 11/Mar/2025 01:23PM Referred By : Dr.MANISH TANDON : 11/Mar/2025 01:50PM Sample Received ON Refer Lab/Hosp : CHARAK NA Report Generated ON : 11/Mar/2025 03:05PM

. PT/PC/INR,LFT,CREATININE,CRP (Quantitative),ESR,CBC (WHOLE BLOOD) Doctor Advice

|--|--|

Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	14.4	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.70	mil/cmm	3.8 - 4.8	Electrical
				Impedence
PCV	43.8	%	36 - 45	Pulse hieght
				detection
MCV	93.8	fL	80 - 96	calculated
MCH	30.8	pg	27 - 33	Calculated
MCHC	32.9	g/dL	30 - 36	Calculated
RDW	12.6	%	11 - 15	RBC histogram
				derivation
RETIC	0.6 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	7750	/cmm	4000 - 10000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	62	%	40 - 75	Flowcytrometry
LYMPHOCYTES	30	%	25 - 45	Flowcytrometry
EOSINOPHIL	4	%	1 - 6	Flowcytrometry
MONOCYTE	4	%	2 - 10	Flowcytrometry
BASOPHIL	0	%	00 - 01	Flowcytrometry
PLATELET COUNT	525,000	/cmm	150000 - 450000	Elect Imped
PLATELET COUNT (MANUAL)	525000	/cmm	150000 - 450000	Microscopy.
Absolute Neutrophils Count	4,805	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,325	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	310	/cmm	20-500	Calculated
Absolute Monocytes Count	310	/cmm	200-1000	Calculated
Mentzer Index	20			
Peripheral Blood Picture	:			

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









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. PT/PC/INR,LFT,CREATININE,CRP (Quantitative),ESR,CBC (WHOLE BLOOD) Doctor Advice

Test Name	Result	Unit	Bio. Ref. Range	Method
SERUM CREATININE				
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate- kinetic
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.48	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED ( D. Bilirubin)	0.17	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.31	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	146.40	U/L	30 - 120	PNPP, AMP Buffer
SGPT	45.0	U/L	5 - 40	UV without P5P
SGOT	42.0	U/L	5 - 40	UV without P5P

\*\*\* End Of Report









**PATHOLOGIST**