

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

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

E-mail: charak1984@gmail.com

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

Patient Name : Mr.RAJ KUMAR YADAV

Age/Gender : 66 Y/M Lab No : 10141239

Referred By : Dr.JITENDRA PRASAD

Refer Lab/Hosp : CGHS (BILLING)

Doctor Advice :

Visit No : CHA250043944

Registration ON : 11/Mar/2025 02:07PM

Sample Collected ON : 11/Mar/2025 02:09PM

Sample Received ON : 11/Mar/2025 02:17PM

Report Generated ON : 11/Mar/2025 03:21PM

URINE C/S,URINE COM. EXMAMINATION,CBC+ESR,CHEST PA,TYPHOID IGM



rest ivame	Result	Unit	Bio. Rei. Range	Ivietnou	ļ
TYPHOID IGM					

PR.

TYPHOID IGM POSITIVE NEGATIVE









PR.

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

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

E-mail: charak1984@gmail.com

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

Visit No Patient Name : Mr.RAJ KUMAR YADAV : CHA250043944

Age/Gender Registration ON : 66 Y/M : 11/Mar/2025 02:07PM Lab No Sample Collected ON : 10141239 : 11/Mar/2025 02:09PM Referred By Sample Received ON : Dr.JITENDRA PRASAD : 11/Mar/2025 02:09PM Refer Lab/Hosp Report Generated ON : CGHS (BILLING) : 11/Mar/2025 04:37PM

URINE C/S,URINE COM. EXMAMINATION,CBC+ESR,CHEST PA,TYPHOID IGM Doctor Advice :



Result	Unit	Bio. Ref. Range	Method
YELLOW		Light Yellow	
CLEAR		Clear	
1.015		1.005 - 1.025	
Acidic (6.0)		4.5 - 8.0	
20 gm/dl	mg/dl	ABSENT	Dipstick
Absent			
Absent		Absent	
Absent		Absent	
PRESENT		Absent	
0.20	EU/dL	0.2 - 1.0	
Absent		Absent	
Absent		Absent	
Occasional	/hpf	< 5/hpf	
Occasional	/hpf	0 - 5	
8-10		< 3/hpf	
	YELLOW CLEAR 1.015 Acidic (6.0) 20 gm/dl Absent Absent Absent PRESENT 0.20 Absent Absent Cocasional Occasional	YELLOW CLEAR 1.015 Acidic (6.0) 20 gm/dl mg/dl Absent Absent Absent PRESENT 0.20 EU/dL Absent Absent Occasional /hpf Occasional /hpf	YELLOW CLEAR Clear 1.015 1.005 - 1.025 Acidic (6.0) 20 gm/dl mg/dl ABSENT Absent Absent Absent Absent PRESENT 0.20 EU/dL Absent Absent Absent Absent Absent Absent Absent Occasional Absent

CHARAK

PATHOLOGIST







PR.

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

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

E-mail: charak1984@gmail.com

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

Patient Name : Mr.RAJ KUMAR YADAV Visit No : CHA250043944

Age/Gender Registration ON : 66 Y/M : 11/Mar/2025 02:07PM Lab No Sample Collected ON : 10141239 : 11/Mar/2025 02:09PM Referred By : Dr.JITENDRA PRASAD Sample Received ON : 11/Mar/2025 02:18PM Refer Lab/Hosp : CGHS (BILLING) Report Generated ON : 11/Mar/2025 04:38PM

URINE C/S,URINE COM. EXMAMINATION,CBC+ESR,CHEST PA,TYPHOID IGM Doctor Advice :



Test Name	Result	Unit	Bio. Ref. Range	Method		
CBC+ESR (COMPLETE BLOOD COUNT)						
Hb	11.9	g/dl	12 - 15	Non Cyanide		
R.B.C. COUNT	4.00	mil/cmm	3.8 - 4.8	Electrical		
				Impedence		
PCV	36.2	%	36 - 45	Pulse hieght		
				detection		
MCV	91.4	fL	80 - 96	calculated		
MCH	30.1	pg	27 - 33	Calculated		
MCHC	32.9	g/dL	30 - 36	Calculated		
RDW	16	%	11 - 15	RBC histogram		
				derivation		
RETIC	0.6 %	%	0.5 - 2.5	Microscopy		
TOTAL LEUCOCYTES COUNT	6360	/cmm	4000 - 10000	Flocytrometry		
DIFFERENTIAL LEUCOCYTE COUNT						
NEUTROPHIL	75	%	40 - 75	Flowcytrometry		
LYMPHOCYTE	16	%	20-40	Flowcytrometry		
EOSINOPHIL	4	%	1 - 6	Flowcytrometry		
MONOCYTE	5	%	2 - 10	Flowcytrometry		
BASOPHIL	0	%	00 - 01	Flowcytrometry		
PLATELET COUNT	62,000	/cmm	150000 - 450000	Elect Imped		
PLATELET COUNT (MANUAL)	75000	/cmm	150000 - 450000	Microscopy.		
Mentzer Index	23	A D	1/			
Peripheral Blood Picture	CH					

Red blood cells are normocytic normochromic. Platelets are reduced with gaint form. No immature cells or parasite seen.

*** End Of Report ***







Page 3 of 3