

Patient Name : Ms. SHABI FATIMA	Visit No : CHA250044730
Age/Gender : 24 Y/F	Registration ON : 12/Mar/2025 03:24PM
Lab No : 10142025	Sample Collected ON : 12/Mar/2025 03:29PM
Referred By : Dr. MANISH TANDON	Sample Received ON : 12/Mar/2025 03:29PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 12/Mar/2025 06:19PM
Doctor Advice : USG WHOLE ABDOMEN, MF, MF BY CARD, WIDAL, MP, MP BY CARD, HBSAg, HCV, HIV, RANDOM, NA+K+, CREATININE, LFT, CBC (WHOLE BLOOD), URINE COM. EXMAMINATION, URINE C/S	



Test Name	Result	Unit	Bio. Ref. Range	Method
MALARIAL PARASITE (MP)				
MALARIAL PARASITE (MP)	Negative		NEGATIVE	
MICROFILARIA (MF)				
MICROFILARIA (MF)	Negative		NEGATIVE	
MF BY CARD				
MICROFILARIA ANTIBODY (MF)	Negative		NEGATIVE	by card
MP BY CARD				
Plasmodium vivax	Negative			
Plasmodium falciparum antigen	Negative		Negative	
WIDAL				
Sample Type : Serum				
SALMONELLA TYPHI O	1/40			
SALMONELLA TYPHI H	1/40			
NOTE:	Negative			

CHARAK

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DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADABKHAN
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)

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Test Name	Result	Unit	Bio. Ref. Range	Method
HEPATITIS B SURFACE ANTIGEN (HBsAg)				
Sample Type : Serum				

HEPATITIS B SURFACE ANTIGEN	NON REACTIVE		<1 - Non Reactive >1 - Reactive	CMIA
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Note: This is only a Screening test. Confirmation of the result (Non Reactive/Reactive)should be done by performing a PCR based test.

COMMENTS:

-HBsAg is the first serological marker after infection with Hepatitis B Virus appearing one to ten weeks after exposure and two to eight weeks before the onset of clinical symptoms. HBsAg persists during the acute phase and clears late in the convalescence phase. Failure to clear HBsAg within six months indicates a chronic HBsAg carrier state. HBsAg assays are used to identify the persons infected with HBV and to prevent transmission of the virus by blood and blood products as well as to monitor the status of infected individuals in combination with other hepatitis B serological markers.
-Borderline cases must be confirmed with confirmatory neutralizing assay.

LIMITATIONS:

-Results should be used in conjunction with patient history and other hepatitis markers for diagnosis of acute and chronic infections.
-Specimens from patients who have received preparations of mouse monoclonal antibodies for diagnosis or therapy may contain human anti-mouse antibodies (HAMA) which may produce anomalous values when tested with assay kits that employs mouse monoclonal antibodies.
-Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with in vitro immunoassays. Patients routinely exposed to animals or animal serum products can be prone to this interference and anomalous results may be observed.
-Cross reactivity for specimens from individual with medical conditions (Pregnancy, HIV etc) has been observed.
-HBsAg mutations may result in a false negative result in some HBsAg assays.
-If HBsAg results are inconsistent with clinical evidence, additional testing is suggested to confirm the result.

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Test Name	Result	Unit	Bio. Ref. Range	Method
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HIV

HIV-SEROLOGY	NON REACTIVE		<1.0 : NON REACTIVE >1.0 : REACTIVE	
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Done by: Vitros ECI (Sandwich Assay)

Note:-Elisa test is a screening method for HIV.It is known to give false Positive & Negative result.
Hence confirmation:"Western Blot" method is advised.

HCV

Anti-Hepatitis C Virus Antibodies.	NON REACTIVE		< 1.0 : NON REACTIVE > 1.0 : REACTIVE	Sandwich Assay
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Done by: Vitros ECI (Sandwich Assay)

Note:This is only a Screening test. Confirmation of the result (Non Reactive/Reactive)should be done by performing a PCR based test.

URINE EXAMINATION REPORT

Colour-U	DARK YELLOW		Light Yellow	
Appearance (Urine)	CLEAR		Clear	
Specific Gravity	1.015		1.005 - 1.025	
pH-Urine	Acidic (6.5)		4.5 - 8.0	
PROTEIN	Absent	mg/dl	ABSENT	Dipstick
Glucose	Absent			
Ketones	Present (80 mg/dl)		Absent	
Bilirubin-U	Absent		Absent	
Blood-U	Absent		Absent	
Urobilinogen-U	0.20	EU/dL	0.2 - 1.0	
Leukocytes-U	Absent		Absent	
NITRITE	Absent		Absent	
MICROSCOPIC EXAMINATION				
Pus cells / hpf	2-4	/hpf	< 5/hpf	
Epithelial Cells	8-12	/hpf	0 - 5	
RBC / hpf	Nil		< 3/hpf	

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Lab No : 10142025	Sample Collected ON : 12/Mar/2025 03:29PM
Referred By : Dr.MANISH TANDON	Sample Received ON : 12/Mar/2025 03:39PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 12/Mar/2025 05:13PM
Doctor Advice : USG WHOLE ABDOMEN,MF,MF BY CARD,WIDAL,MP,MP BY CARD,HBSAg,HCV,HIV,RANDOM,NA+K+,CREATININE,LFT,CBC (WHOLE BLOOD),URINE COM. EXMAMINATION,URINE C/S	



Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	12.9	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.60	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	39.5	%	36 - 45	Pulse hieght detection
MCV	86.8	fL	80 - 96	calculated
MCH	28.4	pg	27 - 33	Calculated
MCHC	32.7	g/dL	30 - 36	Calculated
RDW	13.9	%	11 - 15	RBC histogram derivation
RETIC	1.0 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	5090	/cmm	4000 - 10000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	42	%	40 - 75	Flowcytometry
LYMPHOCYTES	54	%	25 - 45	Flowcytometry
EOSINOPHIL	1	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	175,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	175000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	2,138	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,749	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	51	/cmm	20-500	Calculated
Absolute Monocytes Count	153	/cmm	200-1000	Calculated
Mentzer Index	19			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic. WBCs show relative lymphocytosis. Platelets are adequate. No parasite seen.



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Referred By : Dr. MANISH TANDON	Sample Received ON : 12/Mar/2025 03:41PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 12/Mar/2025 08:32PM
Doctor Advice : USG WHOLE ABDOMEN,MF,MF BY CARD,WIDAL,MP,MP BY CARD,HBSAg,HCV,HIV,RANDOM,NA+K+,CREATININE,LFT,CBC (WHOLE BLOOD),URINE COM. EXMAMINATION,URINE C/S	



Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD SUGAR RANDOM				
BLOOD SUGAR RANDOM	82.1	mg/dl	70 - 170	Hexokinase

NA+K+				
SODIUM Serum	136.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.4	MEq/L	3.5 - 5.5	ISE Direct

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

LIVER FUNCTION TEST				
TOTAL BILIRUBIN	3.40	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	2.70	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.70	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	225.00	U/L	30 - 120	PNPP, AMP Buffer
SGPT	3,867.0	U/L	5 - 40	UV without P5P
SGOT	5,328.0	U/L	5 - 40	UV without P5P

NOTE – Findings checked twice. Please correlate clinically._

*** End Of Report ***

CHARAK



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MC-2491

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