

Patient Name : Ms.UMME MARIYAM	Visit No : CHA250045305
Age/Gender : 18 Y/F	Registration ON : 13/Mar/2025 03:09PM
<b>Lab No : 10142600</b>	Sample Collected ON : 13/Mar/2025 03:10PM
Referred By : Dr.KGMU	Sample Received ON : 13/Mar/2025 03:16PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 13/Mar/2025 07:57PM
Doctor Advice : HIV,ESR,RETI. COUNT,GBP	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>ESR</b>				
Erythrocyte Sedimentation Rate ESR	<b>40.00</b>		0 - 15	Westergreen

**Note:**

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.

<b>HIV</b>		
HIV-SEROLOGY	NON REACTIVE	<1.0 : NON REACTIVE >1.0 : REACTIVE

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.

**CHARAK**

[Checked By]

Print.Date/Time: 13-03-2025 20:30:08

\*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADABKHAN  
PATHOLOGIST

Dr. SYED SAIF AHMAD  
MD (MICROBIOLOGY)

Patient Name : Ms.UMME MARIYAM	Visit No : CHA250045305
Age/Gender : 18 Y/F	Registration ON : 13/Mar/2025 03:09PM
Lab No : 10142600	Sample Collected ON : 13/Mar/2025 03:10PM
Referred By : Dr.KGMU	Sample Received ON : 13/Mar/2025 03:20PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 13/Mar/2025 04:52PM
Doctor Advice : HIV,ESR,RETI. COUNT,GBP	



Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

**GENERAL BLOOD PICTURE (GBP)**

Peripheral Blood Picture :  
Red blood cells show cytopenia, normocytic normochromic with microcytic hypochromic, anisocytosis+. WBCs show leucopenia. Platelets are markedly reduced. No parasite seen.

**RETICULOCYTE COUNT**

RETIC	1.2 %	%	0.5 - 2.5	Microscopy
-------	-------	---	-----------	------------

**INTERPRETATION:**  
- A high reticulocyte count can be caused by excess bleeding, hemolytic anemia, move to high altitude or certain types of anemias.  
- A low reticulocyte count can be caused by aplastic anemia, iron deficiency anemia, exposure to radiation, a long term chronic infection or by certain medicines that damage the bone marrow.

**LIMITATIONS:**  
Results can be affected by:  
- Medicines used for Parkinson's disease, rheumatoid arthritis, fever, malaria and cancer chemotherapy, Sulfonamide antibiotics  
- Radiation therapy  
- Pregnancy  
- Recent blood transfusion

\*\*\* End Of Report \*\*\*



[Checked By]



DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADABKHAN  
PATHOLOGIST

Dr. SYED SAIF AHMAD  
MD (MICROBIOLOGY)