

Patient Name : Mr.RAM KUMAR GUPTA	Visit No : CHA250046917
Age/Gender : 65 Y/M	Registration ON : 17/Mar/2025 11:25AM
<b>Lab No : 10144212</b>	Sample Collected ON : 17/Mar/2025 11:27AM
Referred By : Dr.AN BALI ***	Sample Received ON : 17/Mar/2025 11:36AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 17/Mar/2025 04:18PM
Doctor Advice : CRP (Quantitative),CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CRP-QUANTITATIVE</b>				
CRP-QUANTITATIVE TEST	2.1	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 apparently 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

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

All reports to be clinically corelated

**CHARAK**



[Checked By]

Print.Date/Time: 17-03-2025 17:00:58

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

DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADAB  
PATHOLOGIST

*Dr. Aditi D Agarwal*  
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<b>Lab No : 10144212</b>	Sample Collected ON : 17/Mar/2025 11:27AM
Referred By : Dr.AN BALI ***	Sample Received ON : 17/Mar/2025 12:44PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 17/Mar/2025 02:18PM
Doctor Advice : CRP (Quantitative),CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC (COMPLETE BLOOD COUNT)</b>				
Hb	13.4	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	<b>5.50</b>	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	43.8	%	36 - 45	Pulse hieght detection
MCV	<b>79.1</b>	fL	80 - 96	calculated
MCH	<b>24.2</b>	pg	27 - 33	Calculated
MCHC	30.6	g/dL	30 - 36	Calculated
RDW	14.8	%	11 - 15	RBC histogram derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	8450	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	<b>78</b>	%	40 - 75	Flowcytometry
LYMPHOCYTES	<b>17</b>	%	25 - 45	Flowcytometry
EOSINOPHIL	1	%	1 - 6	Flowcytometry
MONOCYTE	4	%	2 - 10	Flowcytometry
BASOPHIL	<b>0</b>	%	00 - 01	Flowcytometry
PLATELET COUNT	168,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	168000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	6,591	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,436	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	84	/cmm	20-500	Calculated
Absolute Monocytes Count	338	/cmm	200-1000	Calculated
Mentzer Index	14			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic i with microcytic hypochromic. Platelets are adequate. No immature cells or parasite seen.

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



[Checked By]



*Sham*

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD  
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)