Charak dhar DIAGNOSTICS Pvt. Ltd.

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	: MasterMOHD HASHIM	Visit No	: CHA250046973
Age/Gender	: 7 Y/M	Registration ON	: 17/Mar/2025 12:01PM
Lab No	**: 10144268**	Sample Collected ON	: 17/Mar/2025 12:08PM
Referred By	: Dr.KGMU	Sample Received ON	: 17/Mar/2025 12:11PM
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 04:19PM
Doctor Advice	: CRP (Quantitative),ESR,CBC (WHOLE BLOOD),MRI joint(per parts)		

PR.

Test Name	Result	Unit	Bio. Ref. Range	Method
ESR				
Erythrocyte Sedimentation Rate ESR	**25.00**		3- 13	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.

CRP-QUANTITATIVE				
CRP-QUANTITATIVE TEST	**285.1**	MG/L	0.10 - 2.80	

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

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

All reports to be clinically corelated

[Checked By]

Print.Date/Time: 17-03-2025 16:58:20
*Patient Identity Has Not Been Verified. Not For Medicolegal

DR. NISHANT SHARMA PATHOLOGIST
DR. SHADAB PATHOLOGIST
DR. ADITI D AGARWAL PATHOLOGIST

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Lab No	**: 10144268**	Sample Collected ON	: 17/Mar/2025 12:08PM
Referred By	: Dr.KGMU	Sample Received ON	: 17/Mar/2025 12:46PM
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 02:33PM
Doctor Advice	: CRP (Quantitative),ESR,CBC (WHOLE BLOOD),MRI joint(per parts)		

PR.

Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	11.0	g/dl	11 - 15	Non Cyanide
R.B.C. COUNT	4.20	mil/cmm	3.8 - 5.2	Electrical Impedence
PCV	33.5	%	31 - 43	Pulse hieght detection
MCV	80.5	fL	78 - 81	calculated
MCH	26.4	pg	26 - 28	Calculated
MCHC	**32.8**	g/dL	33 - 35	Calculated
RDW	12.7	%	11 - 15	RBC histogram derivation
RETIC	0.6 %	%	0.3 - 1	Microscopy
TOTAL LEUCOCYTES COUNT	10840	/cmm	5000 - 15000	Flocytrometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	68	%	40 - 70	Flowcytrometry
LYMPHOCYTES	26	%	25 - 55	Flowcytrometry
EOSINOPHIL	2	%	1 - 6	Flowcytrometry
MONOCYTE	4	%	0 - 8	Flowcytrometry
BASOPHIL	**0**	%	00 - 01	Flowcytrometry
PLATELET COUNT	391,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	391000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	**7,371**	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,818	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	217	/cmm	20-500	Calculated
Absolute Monocytes Count	434	/cmm	200-1000	Calculated
Mentzer Index	19			
Peripheral Blood Picture	:			

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

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

MC-2491

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DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)