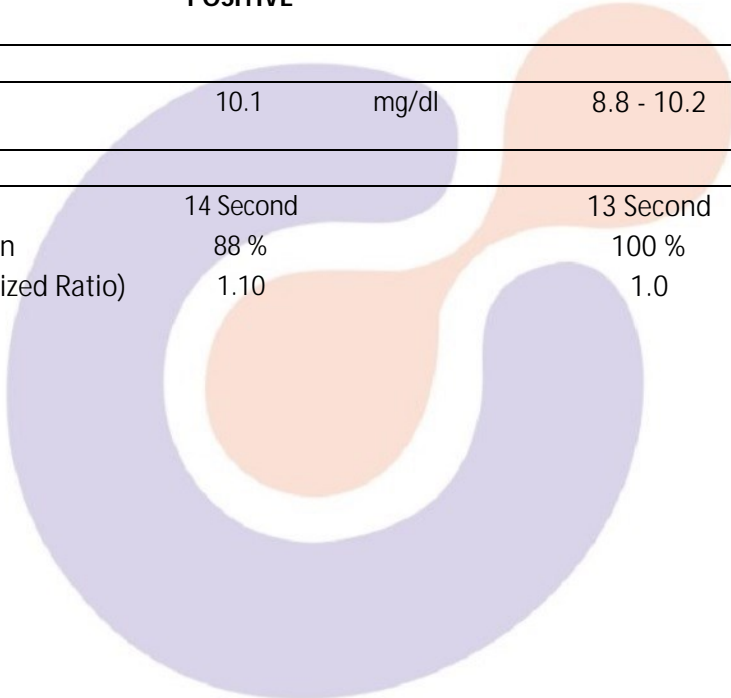


Patient Name : Mr.MOHD MOID	Visit No : CHA250047025
Age/Gender : 50 Y/M	Registration ON : 17/Mar/2025 12:32PM
<b>Lab No : 10144320</b>	Sample Collected ON : 17/Mar/2025 12:34PM
Referred By : SELF	Sample Received ON : 17/Mar/2025 01:01PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 17/Mar/2025 04:22PM
Doctor Advice : DIGITAL 1,HCV,HBSAg,HIV,BLOOD GROUP,PT/PC/INR,LFT,CALCIUM,NA+K+,CREATININE,UREA,RANDOM,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP</b>				
Blood Group	"A"			
Rh (Anti -D)	POSITIVE			
<b>SERUM CALCIUM</b>				
CALCIUM	10.1	mg/dl	8.8 - 10.2	dapta / arsenazo III
<b>PT/PC/INR</b>				
PROTHROMBIN TIME	14 Second		13 Second	Clotting Assay
Prothrombin concentration	88 %		100 %	
INR (International Normalized Ratio)	1.10		1.0	



**CHARAK**

[Checked By]



Print.Date/Time: 17-03-2025 16:58:56

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

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

Patient Name : Mr.MOHD MOID	Visit No : CHA250047025
Age/Gender : 50 Y/M	Registration ON : 17/Mar/2025 12:32PM
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEPATITIS B SURFACE ANTIGEN (HBsAg)</b>				
<b>Sample Type : SERUM</b>				

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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*Dr. Aditi D Agarwal*  
DR. ADITI D AGARWAL  
PATHOLOGIST

Patient Name	: Mr.MOHD MOID	Visit No	: CHA250047025
Age/Gender	: 50 Y/M	Registration ON	: 17/Mar/2025 12:32PM
Lab No	: 10144320	Sample Collected ON	: 17/Mar/2025 12:34PM
Referred By	: SELF	Sample Received ON	: 17/Mar/2025 01:01PM
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 04:22PM
Doctor Advice	: DIGITAL 1,HCV,HBSAg,HIV,BLOOD GROUP,PT/PC/INR,LFT,CALCIUM,NA+K+,CREATININE,UREA,RANDOM,CBC (WHOLE BLOOD)		



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HIV</b>				
HIV-SEROLOGY	NON REACTIVE		<1.0 : NON REACTIVE >1.0 : REACTIVE	

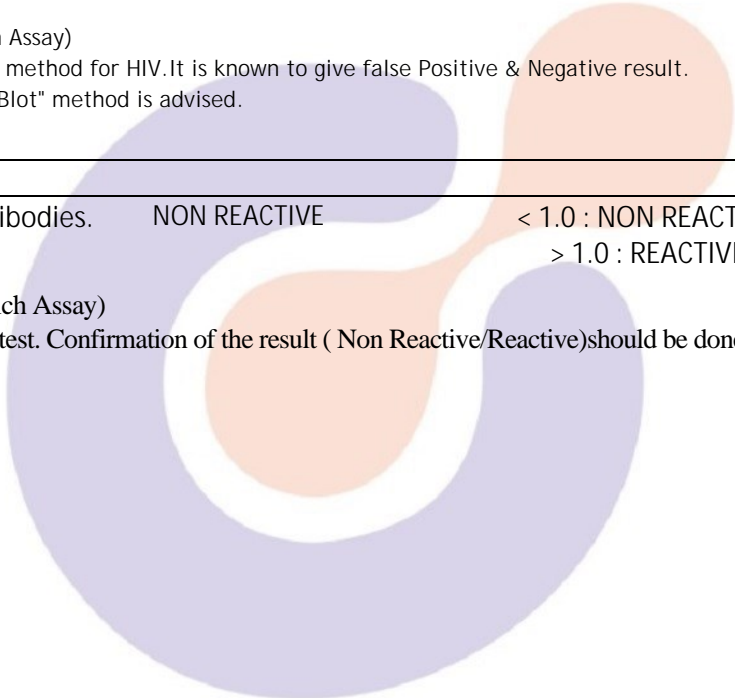
Done by: Vitros ECI ( Sandwich Assay)

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.

<b>HCV</b>				
Anti-Hepatitis C Virus Antibodies.	NON REACTIVE		< 1.0 : NON REACTIVE > 1.0 : REACTIVE	Sandwich Assay

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.



**CHARAK**



[Checked By]

Print.Date/Time: 17-03-2025 16:58:58

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

DR. NISHANT SHARMA  
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*Aditi D Agarwal*  
DR. ADITI D AGARWAL  
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Patient Name : Mr.MOHD MOID	Visit No : CHA250047025
Age/Gender : 50 Y/M	Registration ON : 17/Mar/2025 12:32PM
Lab No : 10144320	Sample Collected ON : 17/Mar/2025 12:34PM
Referred By : SELF	Sample Received ON : 17/Mar/2025 01:52PM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 17/Mar/2025 03:39PM
Doctor Advice : DIGITAL 1,HCV,HBSAg,HIV,BLOOD GROUP,PT/PC/INR,LFT,CALCIUM,NA+K+,CREATININE,UREA,RANDOM,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC (COMPLETE BLOOD COUNT)</b>				
Hb	13.8	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.80	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	42.5	%	36 - 45	Pulse height detection
MCV	88.7	fL	80 - 96	calculated
MCH	28.8	pg	27 - 33	Calculated
MCHC	32.5	g/dL	30 - 36	Calculated
RDW	14.7	%	11 - 15	RBC histogram derivation
RETIC	0.7 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	<b>10390</b>	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	63	%	40 - 75	Flowcytometry
LYMPHOCYTES	28	%	25 - 45	Flowcytometry
EOSINOPHIL	4	%	1 - 6	Flowcytometry
MONOCYTE	4	%	2 - 10	Flowcytometry
BASOPHIL	<b>1</b>	%	00 - 01	Flowcytometry
PLATELET COUNT	193,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	193000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	6,546	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	2,909	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	416	/cmm	20-500	Calculated
Absolute Monocytes Count	416	/cmm	200-1000	Calculated
Absolute Basophils Count	103.9	/cmm	20-100	Calculated
Mentzer Index	18			
Peripheral Blood Picture	:			

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



[Checked By]



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Referred By : SELF Sample Received ON : 17/Mar/2025 01:01PM  
Refer Lab/Hosp : CHARAK NA Report Generated ON : 17/Mar/2025 02:57PM  
Doctor Advice : DIGITAL 1,HCV,HBSAg,HIV,BLOOD GROUP,PT/PC/INR,LFT,CALCIUM,NA+K+,CREATININE,UREA,RANDOM,CBC (WHOLE BLOOD)



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD SUGAR RANDOM</b>				
BLOOD SUGAR RANDOM	115.9	mg/dl	70 - 170	Hexokinase
<b>NA+K+</b>				
SODIUM Serum	138.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.2	MEq/L	3.5 - 5.5	ISE Direct
<b>BLOOD UREA</b>				
BLOOD UREA	19.10	mg/dl	15 - 45	Urease, UV, Serum
<b>SERUM CREATININE</b>				
CREATININE	0.80	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
<b>LIVER FUNCTION TEST</b>				
TOTAL BILIRUBIN	0.83	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED ( D. Bilirubin)	0.13	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED ( I.D. Bilirubin)	0.70	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	<b>136.80</b>	U/L	30 - 120	PNPP, AMP Buffer
SGPT	<b>57.0</b>	U/L	5 - 40	UV without P5P
SGOT	33.0	U/L	5 - 40	UV without P5P

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

CHARAK



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*Sham*

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PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)