

REPORT

Name	: Mrs. THAKUR GAGANDEEP KAUR	Sample ID	: 24481626, 24863605
Age/Gender	: 31 Years/Female	Reg. No	: 0312309190045
Referred by	: Dr. INDHIRA RANI	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Sep-2023 05:43 PM
Primary Sample	:	Received On	: 19-Sep-2023 09:49 PM
Sample Tested In	: Citrated Plasma, Capillary Tub	Reported On	: 20-Sep-2023 08:37 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Activated Partial Thromboplastin Time (APTT/PTTK)				
Patient Value	39.70	sec	26-40	Photo Optical Clot Detection
Control Value	33.00	Sec		Agglutination
Comments: APTT measures intrinsic and common pathways of the coagulation cascade. Prolonged APTT may be caused by heparin and other anticoagulants, factor deficiencies or inhibitors such as lupus anticoagulants				

Bleeding Time & Clotting Time

Bleeding Time (BT)	3:10	Minutes	2 - 5	Capillary Method
Clotting Time (CT)	5:30	Minutes	3 - 7	Capillary Method

*** End Of Report ***



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Referred by	: Dr. INDHIRA RANI	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Sep-2023 05:43 PM
Primary Sample	: Whole Blood	Received On	: 19-Sep-2023 09:49 PM
Sample Tested In	: Citrated Plasma	Reported On	: 19-Sep-2023 11:48 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
PROTHROMBIN TIME (P TIME)				
PT-Patient Value	14.8	Secs	10-15	Photo Optical Clot Detection
PT-Mean Control Value	13.00	Seconds		
PT Ratio	1.14			
PT INR	1.20		0.9-1.2	

Interpretation :

Prothrombin time measures the extrinsic coagulation pathway which consists of activated Factor VII (VIIa), Tissue factor and Proteins of the common pathway (Factors X, V, II & Fibrinogen). This assay is used to control long term oral anticoagulant therapy, evaluation of liver function & to evaluate coagulation disorders specially factors involved in the extrinsic pathway like Factors V, VII, X, Prothrombin & Fibrinogen.

Note

1. INR is the parameter of choice in monitoring adequacy of oral anticoagulant therapy. Appropriate therapeutic range varies with the disease and treatment intensity
2. Prolonged INR suggests potential bleeding disorder / bleeding complications
3. Results should be clinically correlated
4. Test conducted on Citrated plasma

*** End Of Report ***



Swarnabala . M
DR.SWARNA BALA
MD PATHOLOGY

*TESTS CONDUCTED @ CENTRAL LAB, HYDERABAD

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Name	: Mrs. THAKUR GAGANDEEP KAUR	Sample ID	: 24481623
Age/Gender	: 31 Years/Female	Reg. No	: 0312309190045
Referred by	: Dr. INDHIRA RANI	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Sep-2023 05:43 PM
Primary Sample	: Whole Blood	Received On	: 19-Sep-2023 09:49 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 19-Sep-2023 11:09 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	11.5	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	36.0	%	40-50	Calculated
RBC Count	4.68	10 ¹² /L	4.5-5.5	Cell Impedence
MCV	77	fl	81-101	Calculated
MCH	24.5	pg	27-32	Calculated
MCHC	31.9	g/dL	32.5-34.5	Calculated
RDW-CV	15.8	%	11.6-14.0	Calculated
Platelet Count (PLT)	217	10 ⁹ /L	150-410	Cell Impedence
Total WBC Count	10.0	10 ⁹ /L	4.0-10.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	70	%	40-70	Cell Impedence
Lymphocytes	20	%	20-40	Cell Impedence
Monocytes	06	%	2-10	Microscopy
Eosinophils	04	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	7	10 ⁹ /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2	10 ⁹ /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.6	10 ⁹ /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.4	10 ⁹ /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic blood picture.			PAPs Staining



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DR.SWARNABALA
MD PATHOLOGY

REPORT

Name	: Mrs. THAKUR GAGANDEEP KAUR	Sample ID	: 24481625
Age/Gender	: 31 Years/Female	Reg. No	: 0312309190045
Referred by	: Dr. INDHIRA RANI	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Sep-2023 05:43 PM
Primary Sample	: Whole Blood	Received On	: 19-Sep-2023 09:49 PM
Sample Tested In	: Plasma-NaF(R)	Reported On	: 19-Sep-2023 10:34 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

GLUCOSE RANDOM (RBS)

Test Name	Results	Units	Ref. Range	Method
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Glucose Random (RBS)	95	mg/dL	70-140	Hexokinase (HK)
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Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	Fasting Plasma Glucose(mg/dL)	2hrs Plasma Glucose(mg/dL)	HbA1c(%)	RBS(mg/dL)
Prediabetes	100-125	140-199	5.7-6.4	NA
Diabetes	> = 126	> = 200	> = 6.5	>=200(with symptoms)

Reference: Diabetes care 2018:41(suppl.1):S13-S27

- The random blood glucose if it is above 200 mg/dL and the patient has increased thirst, polyuria, and polyphagia, suggests diabetes mellitus.
- As a rule, two-hour glucose samples will reach the fasting level or it will be in the normal range.

Correlate Clinically.

Result rechecked and verified for abnormal cases
Laboratory is NABL Accredited

*** End Of Report ***



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