

Registered Office:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana.

: 24854646

ICMR Reg .No. SAPALAPVLHT (Covid -19)

Ph:- 040-40125441, Email:- info@sagepathlabs.com

REPORT Website:- www.sagepathlabs.com

Name : Mrs. KALA BHASHINI Sample ID

 Age/Gender
 : 61 Years/Female
 Reg. No
 : 0312310200011

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 20-Oct-2023 11:50 AM
Primary Sample : Whole Blood Received On : 20-Oct-2023 01:00 PM

Sample Tested In : Serum Reported On : 20-Oct-2023 02:13 PM

Client Address : Kimtee colony , Gokul Nagar, Tarnaka Report Status : Final Report

CLINICAL BIOCHEMISTRY

VCARE FEVER PROFILE-2

Test Name Results Units Ref. Range Method

C-Reactive protein-(CRP) 9.46 mg/L Upto:6.0 Immunoturbidimetry

Interpretation:

C-reactive protein (CRP) is produced by the liver. The level of CRP rises when there is inflammation throughout the body. It is one of a group of proteins called acute phase reactants that go up in response to inflammation. The levels of acute phase reactants increase in response to certain inflammatory proteins called cytokines. These proteins are produced by white blood cells during inflammation.

A positive test means you have inflammation in the body. This may be due to a variety of conditions, including:

- Connective tissue disease
- Heart attack
- Infection
- Inflammatory bowel disease (IBD)
- Lupus
- Pneumonia
- Rheumatoid arthritis

<u>Excellence in Health Care</u>







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Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 20-Oct-2023 11:50 AM
Primary Sample : Whole Blood Received On : 20-Oct-2023 01:00 PM

Sample Tested In : Whole Blood EDTA Reported On : 20-Oct-2023 04:29 PM

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HAEMATOLOGY

VCARE FEVER PROFILE-2

Test Name Results Units Ref. Range Method

MALARIA ANTIGEN (VIVAX & FALCIPARUM)

Plasmodium Vivax AntigenNegativeNegativeImmuno ChromatographyPlasmodium FalciparumNegativeNegativeImmuno Chromatography

Note:

- In the gametogony stage, P.Falciparum may not secreted. Such carriers may show falsely negative result.
- This test is used to indicate therapeutic response. Positive test results 5 10 days post treatment indicate the posibility of a resistant strain of malaria.

Comments :

Malaria is protozoan parasitic infection, prevalent in the Tropical & Subtropical areas of the world. Four species of plasmodium paraties are responsible for malaria infections in human viz. P.Falciparum, p.Vivax, P.Ovale & P.malariae. Falciparum infections are associated with Cerebral malaria and drug resistance where as vivex infection is associated with high rate of infectivity and relapse. Differentiation between P.Falciparum and P.Vivex is utmost importance for better patient management and speedy recovery.

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Referred by : Dr. SELF

Referring Customer : V CARE MEDICAL DIAGNOSTICS

Primary Sample : Whole Blood Sample Tested In : Whole Blood EDTA

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka

: 24854648 Sample ID

Reg. No : 0312310200011 SPP Code : SPL-CV-172

Collected On : 20-Oct-2023 11:50 AM

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HAEMATOLOGY

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Test Name	Results	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb)	11.0	g/dL	12-15	Cynmeth Method
RBC Count	3.31	10^12/L	4.5-5.5	Cell Impedence
Haematocrit (HCT)	32.0	%	40-50	Calculated
MCV	97	fl	81-101	Calculated
MCH	32.0	pg	27-32	Calculated
MCHC	34.3	g/dL	32.5-34.5	Calculated
RDW-CV	15.8	%	11.6-14.0	Calculated
Platelet Count (PLT)	173	10^9/L	150-410	Cell Impedance
Total WBC Count	1.1	10^9/L	4.0-10.0	Impedance
Neutrophils	63	%	40-70	Cell Impedence
Absolute Neutrophils Count	0.69	10^9/L	2.0-7.0	Impedence
Lymphocytes	34	%	20-40	Cell Impedence
Absolute Lymphocyte Count	0.37	10^9/L	1.0-3.0	Impedence
Monocytes	02	%	2-10	Microscopy
Absolute Monocyte Count	0.02	10^9/L	0.2-1.0	Calculated
Eosinophils	01	%	1-6	Microscopy
Absolute Eosinophils Count	0.01	10^9/L	0.02-0.5	Calculated
Basophils	0	%	1-2	Microscopy
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated
<u>Morphology</u>				
WBC	Mild Leucopenia			
RBC	Normocytic normochromic blood picture			
Platelets	Adequate.			Microscopy

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited







Swarnabala-M DR.SWARNA BALA MD PATHOLOGY



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HAEMATOLOGY

VCARE FEVER PROFILE-2

Test Name Results Units Ref. Range Method

Erythrocyte Sedimentation Rate (ESR) 10 14 or less Westergren method

Comments: ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.

*** End Of Report ***

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Sample Tested In : Serum Reported On : 20-Oct-2023 02:13 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

CLINICAL BIOCHEMISTRY

VCARE FEVER PROFILE-2

Test Name	Results	Units	Ref. Range	Method
Liver Function Test (LFT)				
Bilirubin(Total)	0.3	mg/dL	0.2-1.2	Diazo
Bilirubin (Direct)	0.1	mg/dL	0.0 - 0.2	Diazo
Bilirubin (Indirect)	0.2	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	19	U/L	5-48	IFCC with out (P-5-P)
Alanine Aminotransferase (ALT/SGPT)	10	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	113	U/L	40-150	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	25	U/L	5-55	IFCC
Protein - Total	6.5	g/dL	6.4-8.2	Biuret
Albumin	3.9	g/dL	3.4-5.0	Bromocresol purple (BCP)
Globulin	2.6	g/dL	2.0-4.2	Calculated
A:G Ratio	1.5	%	0.8-2.0	Calculated

- Alanine Aminotransferase(ALT) is an enzyme found in liver and kidneys cells. ALT helps create energy for liver cells. Damaged liver cells release ALT into the bloodstream, which can elevate ALT levels in the blood.
- Aspartate Aminotransferase (AST) is an enzyme in the liver and muscles that helps metabolizes amino acids. Similarly to ALT, elevated AST levels may be a sign of liver damage or liver disease.
- Alkaline phosphate (ALP) is an enzyme present in the blood. ALP contributes to numerous vital bodily functions, such as supplying nutrients to the liver, promoting bone growth, and metabolizing fat in the intestines.
- Gamma-glutamyl Transpeptidase (GGTP) is an enzyme that occurs primarily in the liver, but it is also present in the kidneys, pancreas, gallbladder, and spleen. Higher than normal concentrations of GGTP in the blood may indicate alcohol-related liver damage. Elevated GGTP levels can also increase the risk of developing certain types of cancer.
- Bilirubin is a waste product that forms when the liver breaks down red blood cells. Bilirubin exits the body as bile in stool. High levels of bilirubin can cause jaundice - a condition in which the skin and whites of the eyes turn yellow- and may indicate liver damage.
- Albumin is a protein that the liver produces. The liver releases albumin into the bloodstream, where it helps fight infections and transport vitamins, hormones, and enzymes throughout the body. Liver damage can cause abnormally low albumin levels.











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REPORT Website:- www.sagepathlabs.com

Name : Mrs. KALA BHASHINI Sample ID : 24854613

Age/Gender : 61 Years/Female Reg. No : 0312310200011
Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 20-Oct-2023 11:50 AM

Primary Sample : Received On : 20-Oct-2023 01:00 PM Sample Tested In : Urine Reported On : 20-Oct-2023 03:53 PM

Client Address : Kimtee colony , Gokul Nagar, Tarnaka Report Status : Final Report

CLINICAL PATHOLOGY

VCARE FEVER PROFILE-2

Test Name Results Units Ref. Range Method

Complete Urine Analysis (CUE)

Physical Examination

Colour Pale Yellow Straw to light amber

Appearance Clear Clear

Chemical Examination

Glucose Negative Negative Strip Reflectance Protein Strip Reflectance Absent Negative Bilirubin (Bile) Negative Negative Strip Reflectance Urobilinogen Negative Negative Ehrlichs reagent Ketone Bodies Negative Negative Strip Reflectance Specific Gravity 1.025 1.000 - 1.030 Strip Reflectance Negative Blood Negative Strip Reflectance 6.5 5.0 - 8.5Reaction (pH) Reagent strip Reflectance -

Reaction (pH) 5.0 - 8.5 Reagent strip Reflectance Double indicator Principle

Nitrites Negative Negative Strip Reflectance

Leukocyte esterase Negative Negative Reagent Strip Reflectance

Microscopic Examination (Microscopy)

PUS(WBC) Cells 03-04 /hpf 00-05 Microscopy R.B.C. Nil /hpf Nil Microscopic 02-03 00-05 **Epithelial Cells** /hpf Microscopic Casts Absent Absent Microscopic Crystals Absent Absent Microscopic Nil Nil **Bacteria**

Budding Yeast Cells Nil Absent Microscopy

Others - Microscopic

*** End Of Report ***

Urine analysis is one of the most useful laboratory tests as it identifies a wide range of medical conditions including renal damage, urinary tract infections diabetes, hypertension and drug

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Comments :





Swarnabala - M DR.SWARNA BALA MD PATHOLOGY



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Sample Tested In : Serum Reported On : 20-Oct-2023 05:39 PM

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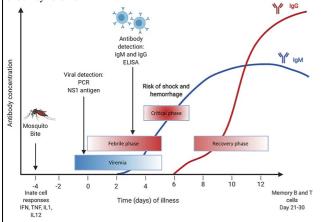
IMMUNOLOGY & SEROLOGY

VCARE FEVER PROFILE-2

Test Name	Results	Units	Ref. Range	Method	
Widal Test (Slide Test)					
Salmonella typhi O Antigen	<1:20		1:80 & Above Significant		
Salmonella typhi H Antigen	<1:20		1:80 & Above Significant		
Salmonella paratyphi AH Antigen	<1:20		1:80 & Above Significant		
Salmonella paratyphi BH Antigen	<1:20	1:80 & Above Significant			
Dengue Profile-Elisa					
Dengue IgG Antibody	0.32	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA	
Dengue IgM Antibody	0.42	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA	
Dengue NS1 Antigen	5.26	S/Co	< 0.8~ : Negative 0.8-1.1 : Equivocal > 1.1~ : Positive	ELISA	

Interpretation

Dengue viruses belong to the family Flaviviridae and have 4 subtypes (1-4). Dengue virus is transmitted by the mosquito Aedes aegypti and Aedes albopictus, widely distributed in Tropical and Subtropical areas of the world. Dengue is considered to be the most important arthropod borne viral disease due to the human morbidity and mortality it causes. The disease may be subclinical, self limiting, febrile or may progress to a severe form of Dengue hemorrhagic fever or Dengue shock syndrome.



Note: 1. Recommended test is NS1 Antigen by ELISA in the first 5 days of fever. After 7-10 days of fever, the recommended test is Dengue fever antibodies IgG & IgM by ELISA

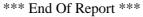
2. Cross reactivity is seen in the Flavivirus group between Dengue virus, Murray Valley encephalitis, Japanese encephalitis, Yellow fever & West Nile viruses











Correlate Clinically.

Result rechecked and verified for abnormal cases Laboratory is NABL Accredited