

Registered Office:- # Plot No. 564, 1st floor, Buddhanagar, Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana. ICMR Reg. No. SAPALAPVLHT (Covid -19) Website:- www.sagepathlabs.com

REPORT ·

Name	: Dr. C ABHINAV	Sample ID	: 24754254
Age/Gender	: 37 Years/Male	Reg. No	: 0312312200022
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Dec-2023 10:35 AM
Primary Sample	: Whole Blood	Received On	: 20-Dec-2023 12:55 PM
Sample Tested In	: Serum	Reported On	: 20-Dec-2023 02:49 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

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CLINICAL BIOCHEMISTRY						
	VCARE FEVER PROFILE-2					
Test Name	Results	Units	Ref. Range	Method		

C-Reactive protein-(CRP)	38.96	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

Excellence In Health Care







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Primary Sample	: Whole Blood	Received On	: 20-Dec-2023 12:55 PM	
Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Dec-2023 01:28 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

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HAEMATOLOGY					
	VCARE FEVER PROFILE-2				
Test Name Results Units Ref. Range Method					
MALARIA ANTIGEN (VIVAX & FALCIPARLIM)					

MALANIA ANTIGEN (VIVAX & FALCIFAROM)					
Plasmodium Vivax Antigen	Negative	Negative	Immuno Chromatography		
Plasmodium Falciparum	Negative	Negative	Immuno 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 associateed 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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> : 24754251 : 0312312200022

: SPL-CV-172

: Final Report

: 20-Dec-2023 10:35 AM

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REPORT ·

Sample ID

Collected On

Received On

Reported On

Report Status

Reg. No SPP Code

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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	
Primary Sample	: Whole Blood	
Sample Tested In	: Whole Blood EDTA	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	

	HA	EMATOLOG	GY		
	VCARE	FEVER PRO	OFILE-2		
Test Name	Results	Units	Ref. Range	Method	
COMPLETE BLOOD COUNT (CBC)			10 I-		
Haemoglobin (Hb)	14.5	g/dL	13-17	Cynmeth Method	
RBC Count	5.10	10^12/L	4.5-5.5	Cell Impedence	
Haematocrit (HCT)	42.5	%	40-50	Calculated	
MCV	84	fl	81-101	Calculated	
МСН	28.4	pg	27-32	Calculated	
МСНС	34.1	g/dL	32.5-34.5	Calculated	
RDW-CV	13.4	%	11.6-14.0	Calculated	
Platelet Count (PLT)	155	10^9/L	150-410	Cell Impedance	
Total WBC Count	2.9	10^9/L	4.0-10.0	Impedance	
Neutrophils	70	%	40-70	Cell Impedence	
Absolute Neutrophils Count	2.03	10^9/L	2.0-7.0	Impedence	
Lymphocytes	20	%	20-40	Cell Impedence	
Absolute Lymphocyte Count	0.58	10^9/L	1.0-3.0	Impedence	
Monocytes	06	%	2-10	Microscopy	
Absolute Monocyte Count	0.17	10^9/L	0.2-1.0	Calculated	
Eosinophils	04	%	1-6	Microscopy	
Absolute Eosinophils Count	0.12	10^9/L	0.02-0.5	Calculated	
Basophils	00	%	1-2	Microscopy	
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated	
<u>Morphology</u>					
WBC	Mild Leuco	penia			
RBC	Normocytic	normochromic	blood picture.		
Platelets	Adequate.			Microscopy	
Result rechecked and verified for abnormal cases					

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Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Dec-2023 02:29 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

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HAEMATOLOGY					
VCARE FEVER PROFILE-2					
Test Name	Results	Units	Ref. Range	Method	

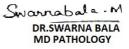
Erythrocyte Sedimentation Rate	(ESR)	7	10 or less
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Westergren method

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.









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REPORT

	REPURI		
Name	: Dr. C ABHINAV	Sample ID	: 24754249
Age/Gender	: 37 Years/Male	Reg. No	: 0312312200022
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Dec-2023 10:35 AM
Primary Sample	: Whole Blood	Received On	: 20-Dec-2023 12:55 PM
Sample Tested In	: Plasma-NaF(R)	Reported On	: 20-Dec-2023 02:49 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY VCARE FEVER PROFILE-2

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Test Name		Results	Units	R	ef. Range	Method
Glucose Ra	indom (RBS)	101	mg/dL	7(0-140	Hexokinase (HK)
Interpretation	of Plasma Glucose based on ADA g	uidelines 2018				
Innunuele	FastingPlasma Glucose(mg/dL)	2hrsPlasma 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)	
<u>L</u>	Reference: I	Diabetes care 2018:41	(suppl.1):	S13-S27	0	

• 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.

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Primary Sample	: Whole Blood	Received On	: 20-Dec-2023 12:55 PM
Sample Tested In	: Serum	Reported On	: 20-Dec-2023 04:29 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

DSE INFOSYSTEMS PVT. LTD.

CLINICAL BIOCHEMISTRY					
VCARE FEVER PROFILE-2					
Test Name	Results	Units	Ref. Range	Method	
Liver Function Test (LFT)					
Bilirubin(Total)	0.5	mg/dL	0.3-1.2	Diazo	
Bilirubin (Direct)	0.1	mg/dL	0.0 - 0.5	Diazo	
Bilirubin (Indirect)	0.4	mg/dL	0.2-1.0	Calculated	
Aspartate Aminotransferase (AST/SGOT)	65	U/L	5-40	IFCC with out (P-5-P)	
Alanine Aminotransferase (ALT/SGPT)	39	U/L	0-55	IFCC with out (P-5-P)	
Alkaline Phosphatase(ALP)	90	U/L	40-150	Kinetic PNPP-AMP	
Gamma Glutamyl Transpeptidase (GGTP)	34	U/L	15-85	IFCC	
Protein - Total	6.9	g/dL	6.4-8.2	Biuret	
Albumin	4.2	g/dL	3.4-5.0	Bromocresol purple (BCP)	
Globulin	2.7	g/dL	2.0-4.2	Calculated	
A:G Ratio	1.56	%	0.8-2.0	Calculated	
SGOT/SGPT Ratio	1.67				

- 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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I	Primary Sample	:	Received On	: 20-Dec-2023 12:55 PM
I	Sample Tested In	: Urine	Reported On	: 20-Dec-2023 03:09 PM
I	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report
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CLINICAL PATHOLOGY				
	VCARE F	EVER PROP	FILE-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	Absent		Negative	Strip Reflectance
Bilirubin (Bile)	Negative		Negative	Strip Reflectance
Urobilinogen	Negative		Negative	Ehrlichs reagent
Ketone Bodies	Positive		Negative	Strip Reflectance
Specific Gravity	1.020		1.000 - 1.030	Strip Reflectance
Blood	Negative		Negative	Strip Reflectance
Reaction (pH)	6.0 XCel		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	02-04	/hpf	00-05	Microscopy
R.B.C.	Nil	/hpf	Nil	Microscopic
Epithelial Cells	01-02	/hpf	00-05	Microscopic
Casts	Absent		Absent	Microscopic
Crystals	Absent		Absent	Microscopic
Bacteria	Nil		Nil	
Budding Yeast Cells	Nil		Absent	Microscopy
Others	-			Microscopic

Result rechecked and verified for abnormal cases

*** End Of Report ***







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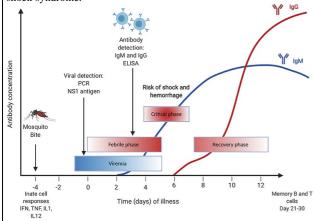
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IMMUNOLOGY & SEROLOGY					
VCARE FEVER PROFILE-2					
Test Name	Results	Units	Ref. Range	Method	
<u>Widal Test (Slide Test)</u>					
Salmonella typhi O Antigen	1:80		1:80 & Above Significat	nt	
Salmonella typhi H Antigen	<1:20		1:80 & Above Significat	nt	
Salmonella paratyphi AH Antigen	<1:20		1:80 & Above Significat	nt	
Salmonella paratyphi BH Antigen	<1:20		1:80 & Above Significat	nt	
Dengue Profile-Elisa					
Dengue IgG Antibody	0.23	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA	
Dengue IgM Antibody	0.45	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA	
Dengue NS1 Antigen	3.28 Exce	S/Co	< 0.8~ : Negative 0.8-1.1 : Equivocal > 1.1~ : Positive	ELISA	

Interpretation:

TDOSE INFOSYSTEMS PVT. LTD.

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





DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST

Correlate Clinically.

Result rechecked and verified for abnormal cases Laboratory is NABL Accredited