

Lab Address: - # Plot No. 564, 1st floor, Buddhanagar, Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana. ICMR Reg .No. SAPALAPVLHT (Covid -19)

REPORT

Name : Mr. PRASOON GAIROLA

Age/Gender : 43 Years/Male

Referred by : Dr. SELF

Referring Customer : V CARE MEDICAL DIAGNOSTICS

Primary Sample : Whole Blood Sample Tested In : Plasma-NaF(R)

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Sample ID : A0013028

Reg. No : 0312401230027

SPP Code : SPL-CV-172

Collected On

: 23-Jan-2024 04:42 PM

: 23-Jan-2024 09:46 PM

Reported On : 23-Jan-2024 10:14 PM

Report Status : Final Report

Received On

CLINICAL BIOCHEMISTRY

GLUCOSE RANDOM (RBS)

Test Name Results Units Ref. Range Method

Glucose Random (RBS) 81 mg/dL 70-140 Hexokinase (HK)

Interpretation of Plasma Glucose based on ADA guidelines 2018

| | 3 | 2hrsPlasma Glucose(mg/dL) | HbA1c(%) | RBS(mg/dL) |
|-------------|---------|------------------------------|----------|----------------------|
| Prediabetes | 100-125 | 140-199 | 5.7-6.4 | NA |
| Diabetes | > = 126 | >= 200 | | >=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.

*** End Of Report ***

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REPORT

Name : Mr. PRASOON GAIROLA Sample ID : A0013030

Age/Gender : 43 Years/Male Reg. No : 0312401230027

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

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 23-Jan-2024 04:42 PM Primary Sample : Whole Blood Received On : 23-Jan-2024 09:43 PM

Sample Tested In : Serum Reported On : 23-Jan-2024 11:43 PM

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

IMMUNOLOGY & SEROLOGY

VIRAL SCREENING

| Test Name Resul | ts Units | Ref. Range | Method |
|-----------------|----------|------------|--------|
|-----------------|----------|------------|--------|

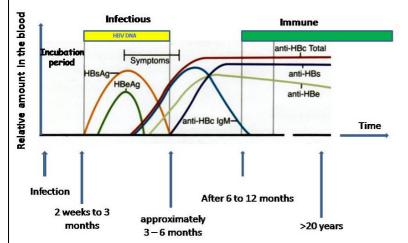
Hepatitis B Surface Antigen (HBsAg)0.34
S/Co
<1.00 :Negative
>1.00 :Positive

Interpretation:

- Negative result implies that antibodies to HBsAg have not been detected in the sample. This means the patient has either not been exposed to HBsAg infection
 or the sample has been tested during the "window phase" i.e. before the development of detectable levels of antibodies. Hence a Non-Reactive result does not
 exclude the possibility of exposure or infection with HBsAg.
- Positive result implies that antibodies to HBsAg have been detected in the sample.

Hepatitis B Virus (HBV) is a member of the Hepadna virus family causing infections of the liver with extremely variable clinical features. Hepatitis B is transmitted primarily by body fluids especially serum and also spread effectively sexually and from mother to baby. In most individuals HBV hepatitis is self limiting, but 1-2% normal adolescents and adults develop Chronic Hepatitis. Frequency of chronic HBV infection is 5-10% in immunocompromised patients and 80% in neonates. The initial serological marker of acute infection is HBsAg which typically appears 2-3 months after infection and disappears 12-20 weeks after onset of symptoms. Persistence of HBsAg for more than six months indicates development of carrier state or Chronic liver disease.

HBV antigens and antibodies in the blood



Note:

1. All Reactive results are tested additionally by Specific antibody Neutralization assay . For further confirmation Molecular assays are recommended For diagnostic purposes, results should be used in conjunction with clinical history and other hepatitis markers for Acute or Chronic infection

*** End Of Report ***

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DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST





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VIRAL SCREENING

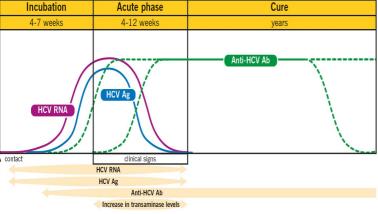
| VIRAL SCREENING | | | | | |
|----------------------------|---------|-------|-------------------|--------|--|
| Test Name | Results | Units | Ref. Range | Method | |
| Hepatitis C Virus Antibody | 0.20 | S/Co | < 1.00 : Negative | ELISA | |

Interpretation:

- 1. Negative result implies that antibodies to HCV have not been detected in the sample. This means the patient has either not been exposed to HCV infection or the sample has been tested during the "window phase" i.e. before the development of detectable levels of antibodies. Hence a Non-Reactive result does not exclude the possibility of exposure or infection with HCV.
- 2. Positive result implies that antibodies to HCV have been detected in the sample.

Comments :-

Hepatitis C (HCV) is an RNA virus of Flavivirus group transmitted via blood transfusions, transplantation, injection drug users, accidental needle punctures in healthcare workers, dialysis patients and rarely from mother to infant. 10% of new cases show sexual transmission. As compared to HAV & HBV, chronic infection with HCV occurs in 85% of infected individuals. In high risk populations, the predictive value of Anti HCV for HCV infection is > 99% whereas in low risk populations it is only 25%.



Note:

- 1. False positive results are seen in Autoimmune diseases, Rheumatoid factor, Hypergammaglobulinemia, Paraproteinemia, passive antibody transfer, Anti- idiotypes & Anti superoxide dismutase
- 2. False negative results are seen in early Acute infection, Immunosuppression & Immuno-incompetence
- 3. HCV RNA PCR recommended in all Reactive results to differentiate between past and present infection

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| Test Name | Results | Units | Ref. Range | Method |
|---------------------|---------|-------|--|--------|
| HIV (1& 2) Antibody | 0.29 | S/Co | < 1.00 : Negative > 1.00 : Positive | ELISA |

Correlate Clinically.

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*** End Of Report ***



Excellence In Health Care







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