

REPORT

Name	: Mr. DEVANSH	Sample ID	: 24864259
Age/Gender	: 3 Years/Male	Reg. No	: 0312404230060
Referred by	: Dr. C ABHINAV (M.D.(Pediatrician & Neonatolog	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Apr-2024 09:54 PM
Primary Sample	: Whole Blood	Received On	: 23-Apr-2024 10:42 PM
Sample Tested In	: Serum	Reported On	: 23-Apr-2024 11:24 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
C-Reactive protein-(CRP)	10.96	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



Dr. Vaishnavi
DR.VAISHNAVI
MD BIOCHEMISTRY

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HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	8.7	g/dL	11-14.5	Cynmeth Method
Haematocrit (HCT)	28.0	%	34-40	Calculated
RBC Count	4.77	10 ¹² /L	4.0-5.2	Cell Impedence
MCV	59	fl	77-87	Calculated
MCH	18.2	pg	24-30	Calculated
MCHC	30.9	g/dL	31-37	Calculated
RDW-CV	16.8	%	11.6-14.0	Calculated
Platelet Count (PLT)	204	10 ⁹ /L	200-490	Cell Impedence
Total WBC Count	5.6	10 ⁹ /L	5.0-15.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	30	%	23-52	Cell Impedence
Lymphocytes	58	%	40-69	Cell Impedence
Monocytes	09	%	1-9	Microscopy
Eosinophils	03	%	0-7	Microscopy
Basophils	0	%	0-2	Microscopy
Absolute Neutrophils Count	1.68	10 ⁹ /L	1.3-8.8	Impedence
Absolute Lymphocyte Count	3.25	10 ⁹ /L	2.2-11.7	Impedence
Absolute Monocyte Count	0.5	10 ⁹ /L	0.6-1.5	Calculated
Absolute Eosinophils Count	0.17	10 ⁹ /L	0.0-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Anisocytosis with Microcytic hypochromic anemia			PAPs Staining



Swannabala - M
DR.SWARNA BALA
MD PATHOLOGY

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HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
<u>MALARIA ANTIGEN (VIVAX & FALCIPARUM)</u>				
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 possibility 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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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DR.SWARNA BALA
MD PATHOLOGY

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IMMUNOLOGY & SEROLOGY

Test Name	Results	Units	Ref. Range	Method
Salmonella typhi IgM (TYPHI DOT)	Negative		Negative	Immunochromatography

Comments:

- TYPHIDOT Rapid IgG & IgM is a screening test based on indirect solid phase immunochromatographic assay for qualitative detection and differentiation of specific IgM and IgG antibodies against specific Salmonella typhi antigen in human whole blood, serum or plasma.
- It detects specific IgM and IgG antibodies against the outer membrane protein (OMP) of the Salmonella typhi and can separately identifies IgM and IgG antibodies.
- The typhidot test becomes positive for specific IgM within 2–3 days of infection therefore a positive IgM test denotes a recent infection where as a positive IgG test denotes a remote or past infection.
- Negative results do not preclude the possibility of an early infection of Salmonella typhi.
- Several studies have pointed out that the specificity and sensitivity of this test is low thus a single test should not be relied upon for diagnosis of salmonella infection.
- All results should be further evaluated by more specific tests such as blood culture for confirmation

Correlate Clinically.

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*** End Of Report ***



DR. RUTURAJ MANIKLAL KOLHAPURE
MD, MICROBIOLOGIST