

REPORT

Name	: Baby. AARADHYA GANNA	Sample ID	: 24864307
Age/Gender	: 6 Years/Female	Reg. No	: 0312404240068
Referred by	: Dr. SAI KISHAN	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 24-Apr-2024 09: 27 PM
Primary Sample	: Whole Blood	Received On	: 24-Apr-2024 10: 47 PM
Sample Tested In	: Serum	Reported On	: 25-Apr-2024 09: 48 AM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
C-Reactive protein-(CRP)	9.60	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

Creatine PhosphoKinase (CPK)

321

U/L

26-140

IFCC

Interpretation:

- Creatine phosphokinase (CPK) is an enzyme in the body. It is found mainly in the heart, brain, and skeletal muscle.
- When the total CPK level is very high, it most often means there has been injury or stress to muscle tissue, the heart, or the brain. Muscle tissue injury is most likely. When a muscle is damaged, CPK leaks into the bloodstream. Finding which specific form of CPK is high helps determine which tissue has been damaged.
- The level is normal in neurogenic muscular diseases like myasthenia gravis, multiple sclerosis, poliomyelitis, and Parkinson's disease.



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

REPORT

Name	: Baby. AARADHYA GANNA	Sample ID	: 24864308
Age/Gender	: 6 Years/Female	Reg. No	: 0312404240068
Referred by	: Dr. SAI KISHAN	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 24-Apr-2024 09: 27 PM
Primary Sample	: Whole Blood	Received On	: 24-Apr-2024 10: 45 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 25-Apr-2024 12:02 AM
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)	13.2	g/dL	11-14.5	Cynmeth Method
Haematocrit (HCT)	38.1	%	34-40	Calculated
RBC Count	4.96	10 ¹² /L	4.5-5.5	Cell Impedence
MCV	77	fl	77-95	Calculated
MCH	26.6	pg	24-30	Calculated
MCHC	34.6	g/dL	31-37	Calculated
RDW-CV	12.7	%	11.6-14.0	Calculated
Platelet Count (PLT)	485	10 ⁹ /L	170-450	Cell Impedence
Total WBC Count	8.1	10 ⁹ /L	5.0-15.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	40	%	32-61	Cell Impedence
Lymphocytes	52	%	32-60	Cell Impedence
Monocytes	07	%	1-9	Microscopy
Eosinophils	01	%	0-7	Microscopy
Basophils	0	%	0-2	Microscopy
Absolute Neutrophils Count	3.24	10 ⁹ /L	1.6-9.5	Impedence
Absolute Lymphocyte Count	4.21	10 ⁹ /L	1.6-9.3	Impedence
Absolute Monocyte Count	0.57	10 ⁹ /L	0.5-1.4	Calculated
Absolute Eosinophils Count	0.08	10 ⁹ /L	0.0-1.1	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic with Thrombocytosis			PAPs Staining

Correlate Clinically.

Result rechecked and verified for abnormal cases

Laboratory is NABL Accredited

*** End Of Report ***



Swannabala - M
DR.SWARNA BALA
MD PATHOLOGY