

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

REPC	DRT	
: Mrs. G SHARADA	Sample ID	: A0590942
: 47 Years/Female	Reg. No	: 0312408170029
: Dr. ALEKHYA SWAMY	SPP Code	: SPL-CV-172
: V CARE MEDICAL DIAGNOSTICS	Collected On	: 17-Aug-2024 08:18 PM
: Whole Blood	Received On	: 17-Aug-2024 10:39 PM
: Serum	Reported On	: 17-Aug-2024 11:50 PM
: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report
	 : Mrs. G SHARADA : 47 Years/Female : Dr. ALEKHYA SWAMY : V CARE MEDICAL DIAGNOSTICS : Whole Blood : Serum 	: 47 Years/FemaleReg. No: Dr. ALEKHYA SWAMYSPP Code: V CARE MEDICAL DIAGNOSTICSCollected On: Whole BloodReceived On: SerumReported On

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

C-Reactive protein-(CRP)	15.44	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

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REPORT				
Name	: Mrs. G SHARADA	Sample ID	: A0590944	
Age/Gender	: 47 Years/Female	Reg. No	: 0312408170029	
Referred by	: Dr. ALEKHYA SWAMY	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 17-Aug-2024 08:18 PM	
Primary Sample	: Whole Blood	Received On	: 17-Aug-2024 10:26 PM	
Sample Tested In	: Whole Blood EDTA	Reported On	: 17-Aug-2024 11:02 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

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

MALARIA ANTIGEN (VIVAX & FALCIPARUM	<u>1)</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 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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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Name	: Mrs. G SHARADA	Sample I	D
Age/Gender	: 47 Years/Female	Reg. No	
Referred by	: Dr. ALEKHYA SWAMY	SPP Cod	e
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected	d
Primary Sample	: Whole Blood	Received) k
Sample Tested In	: Whole Blood EDTA	Reported	b
Client Address	: Kimtee colony ,Gokul Nagar,Tarna	ka Report S	sta

: A0590944 D : 0312408170029 : SPL-CV-172 ć : 17-Aug-2024 08:18 PM On On : 17-Aug-2024 10:26 PM : 17-Aug-2024 10:40 PM On : Final Report tatus

HAEMATOLOGY					
VCARE FEVER PROFILE-2					
Test Name	Results	Units	Ref. Range	Method	
COMPLETE BLOOD COUNT (CBC)					
Haemoglobin (Hb)	10.3	g/dL	12-15	Cynmeth Method	
RBC Count	5.03	10^12/L	3.8-4.8	Cell Impedence	
Haematocrit (HCT)	32.4	%	40-50	Calculated	
MCV	64	fl	81-101	Calculated	
МСН	20.6	pg	27-32	Calculated	
МСНС	31.9	g/dL	32.5-34.5	Calculated	
RDW-CV	15.6	%	11.6-14.0	Calculated	
Platelet Count (PLT)	253	10^9/L	150-410	Cell Impedance	
Total WBC Count	4.9	10^9/L	4.0-10.0	Impedance	
Neutrophils	70	%	40-70	Cell Impedence	
Absolute Neutrophils Count	3.43	10^9/L	2.0-7.0	Impedence	
Lymphocytes	20	%	20-40	Cell Impedence	
Absolute Lymphocyte Count	0.98	10^9/L	1.0-3.0	Impedence	
Monocytes	07	%	2-10	Microscopy	
Absolute Monocyte Count	0.34	10^9/L	0.2-1.0	Calculated	
Eosinophils	03	%	1-6	Microscopy	
Absolute Eosinophils Count	0.15	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	
Atypical cells / Blasts	00	%			
<u>Morphology</u>					
WBC	Within Norr	mal Limits			
RBC	Anisocytos	is With Microcy	tic Hypochromic		
Platelets	Adequate.			Microscopy	
Result rechecked and verified for abnor					
Laboratore in NADI Agonadiand	*** End	Of Report **	*		
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Erythrocyte Sedimentation Rate (ESR)

Sagepath Labs Pvt. Ltd.

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Westergren method

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Name	: Mrs. G SHARADA	Sample ID	: A0590944		
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Referred by	: Dr. ALEKHYA SWAMY	SPP Code	: SPL-CV-172		
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 17-Aug-2024 08:18 PM		
Primary Sample	: Whole Blood	Received On	: 17-Aug-2024 10:26 PM		
Sample Tested In	: Whole Blood EDTA	Reported On	: 17-Aug-2024 11:23 PM		
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report		

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

mm/hr

10 or less

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					
Name	: Mrs. G SHARADA	Sample ID	: A0590941		
Age/Gender	: 47 Years/Female	Reg. No	: 0312408170029		
Referred by	: Dr. ALEKHYA SWAMY	SPP Code	: SPL-CV-172		
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 17-Aug-2024 08:18 PM		
Primary Sample	: Whole Blood	Received On	: 17-Aug-2024 10:26 PM		
Sample Tested In	: Plasma-NaF(R)	Reported On	: 17-Aug-2024 11:28 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 **Glucose Random (RBS)** 97 mg/dL 70-140 Hexokinase (HK) Interpretation of Plasma Glucose based on ADA guidelines 2018 FastingPlasma 2hrsPlasma Diagnosis HbA1c(%) RBS(mg/dL) Glucose(mg/dL) Glucose(mg/dL) 100-125 Prediabetes 140-199 5.7-6.4 NA >=200(with Diabetes > = 200 symptoms) > = 126 > = 6.5 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.





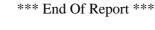
BIOCHEMISTRY



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

			REPORT		
Name Age/Gender Referred by Referring Customer Primary Sample Sample Tested In Client Address	: Mrs. G SHARADA : 47 Years/Female : Dr. ALEKHYA SWAMY : V CARE MEDICAL DIA : : Urine : Kimtee colony ,Goku	, AGNOSTICS		Sample ID Reg. No SPP Code Collected On Received On Reported On Report Status	: A0643622 : 0312408170029 : SPL-CV-172 : 17-Aug-2024 08:18 PM : 17-Aug-2024 10:39 PM : 17-Aug-2024 10:55 PM : Final Report
		CLINIC	AL PATH	OLOGY	
		VCARE I	FEVER PF	ROFILE-2	
Test Name		Results	Units	Ref. Range	Method
Complete Urine A Physical Examinatio Colour Appearance	<u>n</u>	Pale Yellow Clear		Straw to light ambe Clear	۶r
Chemical Examination	<u>on</u>	Nagativa		Nogotivo	Strip Deflectores
Glucose		Negative		Negative	Strip Reflectance
Protein		Absent		Negative	Strip Reflectance
Bilirubin (Bile)		Negative		Negative	Strip Reflectance
Urobilinogen		Negative		Negative	Ehrlichs reagent
Ketone Bodies		Negative		Negative	Strip Reflectance
Specific Gravity		1.010		1.000 - 1.030	Strip Reflectance
Blood		Negative 5.5		Negative 5.0 - 8.5	Strip Reflectance
Reaction (pH)					Reagent Strip Reflectance
Nitrites		Negative		Negative	Strip Reflectance
Leukocyte esterase	otion (Microcomy)	Negative		Negative	Reagent Strip Reflectance
Microscopic Examin PUS(WBC) Cells	ation (Microscopy)	02-03	/hpf	00-05	Microscopy
R.B.C.		Nil	/hpf	Nil	Microscopic
Epithelial Cells		01-02	/hpf /hpf	00-05	Microscopic
Casts		Absent	, ipi	Absent	Microscopic
Crystals		Absent		Absent	Microscopic
Bacteria		Nil		Nil	Microscopic
Budding Yeast Cells		Nil		Absent	Microscopy
Dadding reast Cells		1.40		7.00011	Microscopy

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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 17-Aug-2024 08:18 PM
Primary Sample	: Whole Blood	Received On	: 17-Aug-2024 10:39 PM
Sample Tested In	: Serum	Reported On	: 18-Aug-2024 12:34 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

IMMUNOLOGY & SEROLOGY					
VCARE FEVER PROFILE-2					
Test Name Results Units Ref. Range Method					
Widal Test (Slide Test)					
Salmonella typhi O Antigen	1:80		1:80 & Above Signif	icant	
Salmonella typhi H Antigen	<1:20		1:80 & Above Signif	icant	
Salmonella paratyphi AH Antigen	<1:20		1:80 & Above Signif	icant	
Salmonella paratyphi BH Antigen <1:20 1:80 & Above Significant			icant		

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DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST



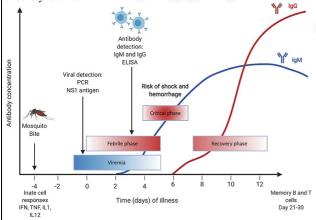
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Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

VCARE FEVER PROFILE-2				
Test Name	Results	Units	Ref. Range	Method
Dengue Profile-Elisa				
Dengue IgG Antibody	0.30	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue IgM Antibody	0.18	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue NS1 Antigen	0.25	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





*** End Of Report ***



DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST Correlate Clinically.

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