

**REPORT**

Name	: Mr. JAGANATH	Sample ID	: A0590950
Age/Gender	: 23 Years/Male	Reg. No	: 0312408190029
Referred by	: Dr. KRISHNA RAO	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Aug-2024 08:01 AM
Primary Sample	: Whole Blood	Received On	: 19-Aug-2024 10:34 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 19-Aug-2024 11:47 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

**HAEMATOLOGY**

**VCARE FEVER PROFILE-1**

Test Name	Results	Units	Ref. Range	Method
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**MALARIA ANTIGEN (VIVAX & FALCIPARUM)**

<b>Plasmodium Vivax Antigen</b>	Negative		Negative	Immuno Chromatography
<b>Plasmodium Falciparum</b>	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.

\*\*\* End Of Report \*\*\*

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Swannabala - M  
DR.SWARNA BALA  
MD PATHOLOGY

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Primary Sample	: Whole Blood	Received On	: 19-Aug-2024 10:34 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 19-Aug-2024 11:04 PM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

**HAEMATOLOGY**

**VCARE FEVER PROFILE-1**

Test Name	Results	Units	Ref. Range	Method
<b>COMPLETE BLOOD COUNT (CBC)</b>				
Haemoglobin (Hb)	14.2	g/dL	13-17	Cynmeth Method
RBC Count	4.97	10 <sup>12</sup> /L	4.5-5.5	Cell Impedance
Haematocrit (HCT)	41.7	%	40-50	Calculated
MCV	84	fl	81-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	34.1	g/dL	32.5-34.5	Calculated
RDW-CV	12.1	%	11.6-14.0	Calculated
Platelet Count (PLT)	232	10 <sup>9</sup> /L	150-410	Cell Impedance
Total WBC Count	4.9	10 <sup>9</sup> /L	4.0-10.0	Impedance
Neutrophils	60	%	40-70	Cell Impedance
Absolute Neutrophils Count	2.94	10 <sup>9</sup> /L	2.0-7.0	Impedance
Lymphocytes	30	%	20-40	Cell Impedance
Absolute Lymphocyte Count	1.47	10 <sup>9</sup> /L	1.0-3.0	Impedance
Monocytes	06	%	2-10	Microscopy
Absolute Monocyte Count	0.29	10 <sup>9</sup> /L	0.2-1.0	Calculated
Eosinophils	04	%	1-6	Microscopy
Absolute Eosinophils Count	0.2	10 <sup>9</sup> /L	0.02-0.5	Calculated
Basophils	00	%	1-2	Microscopy
Absolute Basophil ICount	0.00	10 <sup>9</sup> /L	0.0-0.3	Calculated
Atypical cells / Blasts	00	%		
<b>Morphology</b>				
WBC	Within Normal Limits			
RBC	Normocytic normochromic			
Platelets	Adequate.			Microscopy

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Primary Sample	: Whole Blood	Received On	: 19-Aug-2024 10:34 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 19-Aug-2024 11:46 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

**HAEMATOLOGY**

**VCARE FEVER PROFILE-1**

Test Name	Results	Units	Ref. Range	Method
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<b>Erythrocyte Sedimentation Rate (ESR)</b>	8	mm/hr	10 or less	Westergren method
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**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.



Swannabala - M  
DR.SWARNA BALA  
MD PATHOLOGY

**REPORT**

Name	: Mr. JAGANATH	Sample ID	: A0590951, A0590949
Age/Gender	: 23 Years/Male	Reg. No	: 0312408190029
Referred by	: Dr. KRISHNA RAO	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 19-Aug-2024 08:01 AM
Primary Sample	: Whole Blood	Received On	: 19-Aug-2024 10:34 PM
Sample Tested In	: Plasma-NaF(R), Serum	Reported On	: 19-Aug-2024 11:07 PM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Ref. Range	Method
<b>Glucose Random (RBS)</b>	90	mg/dL	70-140	Hexokinase (HK)

Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	Fasting Plasma Glucose(mg/dL)	2hrs Plasma 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)

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.

<b>Creatinine -Serum</b>	0.73	mg/dL	0.70-1.30	Jaffes Kinetic
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**Interpretation:**

- This test is done to see how well your kidneys are working. Creatinine is a chemical waste product of creatine. Creatine is a chemical made by the body and is used to supply energy mainly to muscles.
- **A higher than normal level may be due to:**
- Renal diseases and insufficiency with decreased glomerular filtration, urinary tract obstruction, reduced renal blood flow including congestive heart failure, shock, and dehydration; rhabdomyolysis can cause elevated serum creatinine.
- **A lower than normal level may be due to:**
- Small stature, debilitation, decreased muscle mass; some complex cases of severe hepatic disease can cause low serum creatinine levels. In advanced liver disease, low creatinine may result from decreased hepatic production of creatinine and inadequate dietary protein as well as reduced muscle mass.

\*\*\* End Of Report \*\*\*

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*Dr. Vaishnavi*  
**DR. VAISHNAVI**  
**MD BIOCHEMISTRY**

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Primary Sample	: Whole Blood	Received On	: 19-Aug-2024 10:34 PM
Sample Tested In	: Serum	Reported On	: 20-Aug-2024 01:19 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

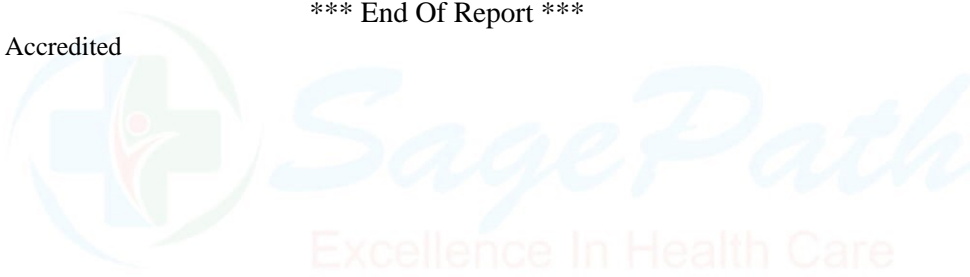
**IMMUNOLOGY & SEROLOGY**

**VCARE FEVER PROFILE-1**

Test Name	Results	Units	Ref. Range	Method
<b>Widal Test (Slide Test)</b>				
Salmonella typhi O Antigen	<1:20		1:80 & Above Significant	
Salmonella typhi H Antigen	<1:20		1:80 & Above Significant	
Salmonella paratyphi AH Antigen	<1:20		1:80 & Above Significant	
Salmonella paratyphi BH Antigen	<1:20		1:80 & Above Significant	

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**DR. RUTURAJ MANIKLAL KOLHAPURE**  
MD, MICROBIOLOGIST

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Sample Tested In	: Serum	Reported On	: 20-Aug-2024 02:01 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

**IMMUNOLOGY & SEROLOGY**

**VCARE FEVER PROFILE-1**

Test Name	Results	Units	Ref. Range	Method
<b>Dengue NS1 Antigen</b>	0.36	S/Co	< 0.8~ : Negative 0.8-1.1 : Equivocal > 1.1~ : Positive	ELISA

Correlate Clinically.

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\*\*\* End Of Report \*\*\*



  
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