

REPORT

Name	: Dr. V VEENA	Sample ID	: A0933533
Age/Gender	: 38 Years/Female	Reg. No	: 0312408230030
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Aug-2024 11:41 AM
Primary Sample	: Whole Blood	Received On	: 23-Aug-2024 01:09 PM
Sample Tested In	: Serum	Reported On	: 23-Aug-2024 06:19 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
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C-Reactive protein-(CRP)	2.5	mg/L	Upto:6.0	Immunoturbidimetry
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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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Primary Sample	: Whole Blood	Received On	: 23-Aug-2024 01:09 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 23-Aug-2024 03:44 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

ADVANCE FEVER PROFILE-ELISA

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 parasites are responsible for malaria infections in human viz. P.Falciparum, p.Vivax, P.Ovale & P.malariae. Falciparum infections are associated 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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Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

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Sample Tested In	: Whole Blood EDTA	Reported On	: 23-Aug-2024 04:19 PM
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HAEMATOLOGY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb)	11.4	g/dL	12-15	Cynmeth Method
RBC Count	4.57	10 ¹² /L	3.8-4.8	Cell Impedance
Haematocrit (HCT)	39.0	%	40-50	Calculated
MCV	86	fl	81-101	Calculated
MCH	24.9	pg	27-32	Calculated
MCHC	29.1	g/dL	32.5-34.5	Calculated
RDW-CV	13.5	%	11.6-14.0	Calculated
Platelet Count (PLT)	155	10 ⁹ /L	150-410	Cell Impedance
Total WBC Count	3.2	10 ⁹ /L	4.0-10.0	Impedance
Neutrophils	65	%	40-70	Cell Impedance
Absolute Neutrophils Count	2.08	10 ⁹ /L	2.0-7.0	Impedance
Lymphocytes	28	%	20-40	Cell Impedance
Absolute Lymphocyte Count	0.9	10 ⁹ /L	1.0-3.0	Impedance
Monocytes	05	%	2-10	Microscopy
Absolute Monocyte Count	0.16	10 ⁹ /L	0.2-1.0	Calculated
Eosinophils	02	%	1-6	Microscopy
Absolute Eosinophils Count	0.06	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
Morphology				
WBC	Mild Leucopenia			
RBC	Normocytic normochromic			
Platelets	Adequate.			Microscopy

Result rechecked and verified for abnormal cases

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HAEMATOLOGY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
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Erythrocyte Sedimentation Rate (ESR)	19	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.



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Sample Tested In	: Serum	Reported On	: 23-Aug-2024 01:52 PM
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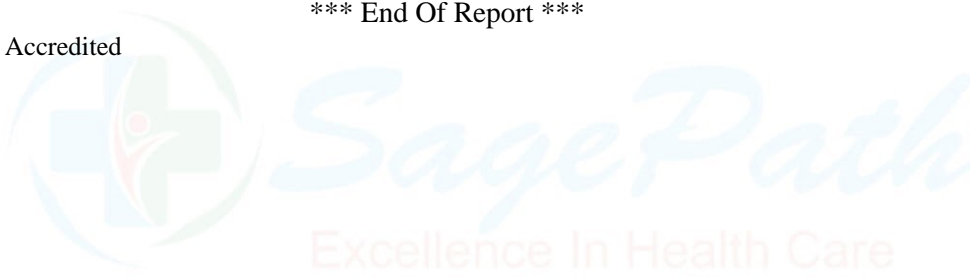
IMMUNOLOGY & SEROLOGY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
Widal Test (Slide Test)				
Salmonella typhi O Antigen	1:160		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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IMMUNOLOGY & SEROLOGY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
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Chikungunya IgG	Negative		Negative	Immunochromatography
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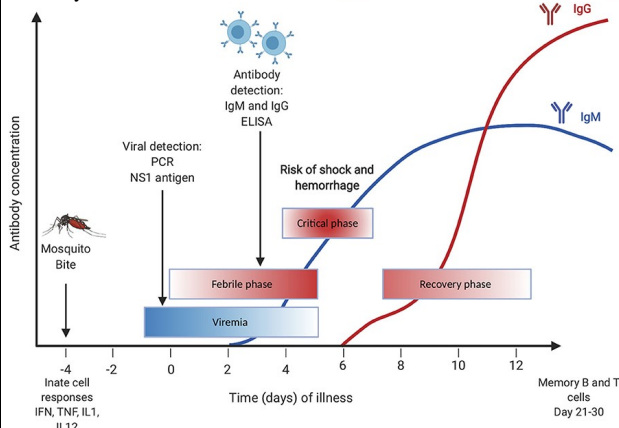
IMMUNOLOGY & SEROLOGY

ADVANCE FEVER PROFILE-ELISA

Test Name	Results	Units	Ref. Range	Method
Chikungunya IgM	Negative		Negative	Immunochromatography
Dengue Profile-Elisa				
Dengue IgG Antibody	0.23	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue IgM Antibody	0.32	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue NS1 Antigen	0.26	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



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Correlate Clinically.

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