

REPORT

Name	: Master. DEVANSH	Sample ID	: A0933727
Age/Gender	: 11 Months 15 Days/Male	Reg. No	: 0312408270065
Referred by	: Dr. C N REDDY (M.B.B.S.,D.C.H)	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 27-Aug-2024 08:34 PM
Primary Sample	: Whole Blood	Received On	: 27-Aug-2024 11:28 PM
Sample Tested In	: Serum	Reported On	: 28-Aug-2024 12:20 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)	11.8	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

Result rechecked and verified for abnormal cases

*** End Of Report ***



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

REPORT

Name	: Master. DEVANSH	Sample ID	: A0933730
Age/Gender	: 11 Months 15 Days/Male	Reg. No	: 0312408270065
Referred by	: Dr. C N REDDY (M.B.B.S.,D.C.H)	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 27-Aug-2024 08:34 PM
Primary Sample	: Whole Blood	Received On	: 27-Aug-2024 11:28 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 28-Aug-2024 12:06 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)	10.3	g/dL	11.1-14.1	Cynmeth Method
Haematocrit (HCT)	35.0	%	30-38	Calculated
RBC Count	5.10	10 ¹² /L	3.9-5.1	Cell Impedence
MCV	72	fl	72-84	Calculated
MCH	18.7	pg	25-29	Calculated
MCHC	32.6	g/dL	32-36	Calculated
RDW-CV	15.2	%	11.6-14.0	Calculated
Platelet Count (PLT)	200	10 ⁹ /L	200-550	Cell Impedence
Total WBC Count	9.0	10 ⁹ /L	6.0-16.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	35	%	21-42	Cell Impedence
Lymphocytes	60	%	51-71	Cell Impedence
Monocytes	03	%	1-9	Microscopy
Eosinophils	02	%	0-7	Microscopy
Basophils	00	%	0-2	Microscopy
Absolute Neutrophils Count	3.15	10 ⁹ /L	1.3-7.4	Impedence
Absolute Lymphocyte Count	5.4	10 ⁹ /L	3.1-12.4	Impedence
Absolute Monocyte Count	0.27	10 ⁹ /L	0.1-1.6	Calculated
Absolute Eosinophils Count	0.18	10 ⁹ /L	0.0-1.2	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-1.2	Calculated
Morphology	Anisocytosis With Normocytic Normochromic			PAPs Staining



Swannabala - M
DR.SWARNA BALA
MD PATHOLOGY

REPORT

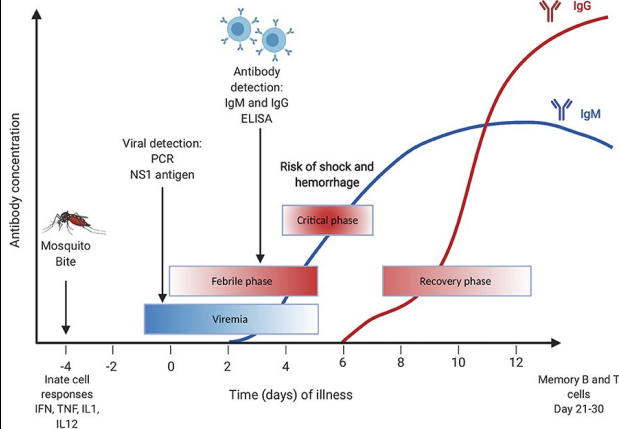
Name	: Master. DEVANSH	Sample ID	: A0933727
Age/Gender	: 11 Months 15 Days/Male	Reg. No	: 0312408270065
Referred by	: Dr. C N REDDY (M.B.B.S.,D.C.H)	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 27-Aug-2024 08:34 PM
Primary Sample	: Whole Blood	Received On	: 27-Aug-2024 11:28 PM
Sample Tested In	: Serum	Reported On	: 28-Aug-2024 01:22 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

IMMUNOLOGY & SEROLOGY

Test Name	Results	Units	Ref. Range	Method
Dengue Profile-Elisa				
Dengue IgG Antibody	2.30	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue IgM Antibody	0.35	S/CO	< 0.8 : Negative 0.8-1.1 : Equivocal ≥ 1.1 : Positive	ELISA
Dengue NS1 Antigen	0.32	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

Correlate Clinically.

Result rechecked and verified for abnormal cases

Laboratory is NABL Accredited

*** End Of Report ***



DR. RUTURAJ MANIKLAL KOLHAPURE
MD, MICROBIOLOGIST