

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

## REPORT

 Name
 : Mr. DATTU
 Sample ID
 : A0933756

 Age/Gender
 : 40 Years/Male
 Reg. No
 : 0312408280047

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 28-Aug-2024 09:43 PM

Primary Sample : Whole Blood Received On : 28-Aug-2024 11:15 PM

Sample Tested In : Serum Reported On : 29-Aug-2024 12:20 AM

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

## **CLINICAL BIOCHEMISTRY**

lest name Results Units Ref. Range Method	Test Name	Results	Units	Ref. Range	Method
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### **C-Reactive protein-(CRP) 24.0**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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DR. VAISHNAVI MD BIOCHEMISTRY



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## REPORT

Name : Mr. DATTU

Age/Gender : 40 Years/Male

Referred by : Dr. SELF

Referring Customer : V CARE MEDICAL DIAGNOSTICS

Primary Sample : Whole Blood

Sample Tested In : Whole Blood EDTA

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka

Sample ID : A0933758

Reg. No : 0312408280047

SPP Code : SPL-CV-172

Collected On : 28-Aug-2024 09:43 PM

Received On : 28-Aug-2024 11:15 PM

Reported On : 28-Aug-2024 11:41 PM

Report Status : Final Report

## **HAEMATOLOGY**

### **FEVER PROFILE**

Test Name Results Units Ref. Range Method

### **MALARIA ANTIGEN (VIVAX & FALCIPARUM)**

Plasmodium Vivax AntigenNegativeNegativeImmuno ChromatographyPlasmodium FalciparumNegativeNegativeImmuno 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 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.

Result rechecked and verified for abnormal cases

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

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Swarnabala - M DR.SWARNA BALA MD PATHOLOGY





# Sagepath Labs Pvt. Ltd.

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## REPORT

Name : Mr. DATTU Sample ID : A0933758 Age/Gender : 40 Years/Male Reg. No : 0312408280047 Referred by : Dr. SELF SPP Code : SPL-CV-172 Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 28-Aug-2024 09:43 PM Primary Sample : Whole Blood Received On : 28-Aug-2024 11:15 PM Sample Tested In : Whole Blood EDTA Reported On : 28-Aug-2024 11:33 PM : Final Report Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status

## **HAEMATOLOGY**

## **FEVER PROFILE**

Test Name	Results	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb)	14.0	g/dL	13-17	Cynmeth Method
RBC Count	5.46	10^12/L	4.5-5.5	Cell Impedence
Haematocrit (HCT)	47.3	%	40-50	Calculated
MCV	87	fl	81-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	32.8	g/dL	32.5-34.5	Calculated
RDW-CV	14.4	%	11.6-14.0	Calculated
Platelet Count (PLT)	158	10^9/L	150-410	Cell Impedance
Total WBC Count	4.4	10^9/L	4.0-10.0	Impedance
Neutrophils	70	%	40-70	Cell Impedence
Absolute Neutrophils Count	3.08	10^9/L	2.0-7.0	Impedence
Lymphocytes	20	%	20-40	Cell Impedence
Absolute Lymphocyte Count	0.88	10^9/L	1.0-3.0	Impedence
Monocytes	07	%	2-10	Microscopy
Absolute Monocyte Count	0.31	10^9/L	0.2-1.0	Calculated
Eosinophils	03	%	1-6	Microscopy
Absolute Eosinophils Count	0.13	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 Normal Limits			
RBC	Anisocytosis With Normocytic normochromic			
Platelets	Adequate.			Microscopy

Result rechecked and verified for abnormal cases

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

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## REPORT

Name : Mr. DATTU
Age/Gender : 40 Years/Male

Referred by : Dr. SELF

Referring Customer : V CARE MEDICAL DIAGNOSTICS
Primary Sample : Whole Blood

Sample Tested In : Whole Blood EDTA

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka

Sample ID : A0933758

Reg. No : 0312408280047

SPP Code : SPL-CV-172

Collected On : 28-Aug-2024 09:43 PM

Received On : 28-Aug-2024 11:15 PM

Reported On : 28-Aug-2024 11:45 PM

naka Report Status : Final Report

## **HAEMATOLOGY**

## **FEVER PROFILE**

Test Name Results Units Ref. Range Method

Erythrocyte Sedimentation Rate (ESR) 8 mm/hr 10 or less Westergren method

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
 : Mr. DATTU
 Sample ID
 : A0933771

 Age/Gender
 : 40 Years/Male
 Reg. No
 : 0312408280047

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 28-Aug-2024 09:43 PM Primary Sample : Received On : 28-Aug-2024 11:15 PM

Sample Tested In : Urine Reported On : 28-Aug-2024 11:53 PM

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

## **CLINICAL PATHOLOGY**

## **FEVER PROFILE**

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## **Complete Urine Analysis (CUE)**

## **Physical Examination**

Colour Pale Yellow Straw to light amber

Appearance HAZY Clear

## **Chemical Examination**

Glucose Negative Negative Strip Reflectance Protein Strip Reflectance trace Negative Bilirubin (Bile) Negative Negative Strip Reflectance Urobilinogen Negative Negative Ehrlichs reagent Ketone Bodies Negative Negative Strip Reflectance 1.030 Specific Gravity 1.000 - 1.030 Strip Reflectance Blood Negative Negative Strip Reflectance 6.0 5.0 - 8.5Reaction (pH)

Reaction (pH) 6.0 5.0 - 8.5 Reagent Strip Reflectance

Nitrites Negative Negative Strip Reflectance

Leukocyte esterase Negative Negative Reagent Strip Reflectance

#### Microscopic Examination (Microscopy)

PUS(WBC) Cells 03-04 /hpf 00-05 Microscopy R.B.C. Nil /hpf Nil Microscopic **Epithelial Cells** 01-02 /hpf 00-05 Microscopic Casts Absent Absent Microscopic Absent Crystals Absent Microscopic Bacteria Nil Nil

Budding Yeast Cells Nil Absent Microscopy

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

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## REPORT

Name : Mr. DATTU Sample ID : A0933756 Age/Gender : 40 Years/Male Reg. No : 0312408280047 Referred by : Dr. SELF SPP Code : SPL-CV-172 Referring Customer : V CARE MEDICAL DIAGNOSTICS : 28-Aug-2024 09:43 PM Collected On Primary Sample : Whole Blood Received On : 28-Aug-2024 11:15 PM Sample Tested In : 29-Aug-2024 12:50 AM : Serum Reported On

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

## **IMMUNOLOGY & SEROLOGY**

### **FEVER PROFILE**

lest Name	Results	Units	Ref. Range	Method	
Widal Test (Slide Test)					
Salmonella typhi O Antigen	1:80		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		
Complete Clinically					
Correlate Clinically.					

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

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DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST