

REPORT

Name	: Mrs. VAISHNAVI	Sample ID	: A0933676
Age/Gender	: 25 Years/Female	Reg. No	: 0312409030036
Referred by	: Dr. KRISHNA RAO	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 03-Sep-2024 06:02 PM
Primary Sample	: Whole Blood	Received On	: 03-Sep-2024 10:52 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 03-Sep-2024 11:35 PM
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)	12.2	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	40.4	%	40-50	Calculated
RBC Count	4.24	10 ¹² /L	3.8-4.8	Cell Impedence
MCV	95	fl	81-101	Calculated
MCH	28.7	pg	27-32	Calculated
MCHC	30.1	g/dL	32.5-34.5	Calculated
RDW-CV	13.7	%	11.6-14.0	Calculated
Platelet Count (PLT)	375	10 ⁹ /L	150-410	Cell Impedence
Total WBC Count	5.4	10 ⁹ /L	4.0-10.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	70	%	40-70	Cell Impedence
Lymphocytes	20	%	20-40	Cell Impedence
Monocytes	06	%	2-10	Microscopy
Eosinophils	04	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	3.78	10 ⁹ /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	1.08	10 ⁹ /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.32	10 ⁹ /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.22	10 ⁹ /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic			PAPs Staining
Malarial Parasite (Identification)	Negative		Negative	Microscopy

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.



Swannabala - M
DR.SWARNA BALA
MD PATHOLOGY

REPORT

Name	: Mrs. VAISHNAVI	Sample ID	: A0933675
Age/Gender	: 25 Years/Female	Reg. No	: 0312409030036
Referred by	: Dr. KRISHNA RAO	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 03-Sep-2024 06:02 PM
Primary Sample	: Whole Blood	Received On	: 03-Sep-2024 10:52 PM
Sample Tested In	: Serum	Reported On	: 04-Sep-2024 12:34 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

IMMUNOLOGY & SEROLOGY

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	

Interpretation

Antigens Tested	RESULT	REMARKS
TO, TH,AH,BH	Titre 1:20 and Titre 1:40	Indicates absence of IgM & IgG antibodies against Salmonella species.
TO, TH,AH,BH	Titre 1:80	Indicates Presence of IgM & IgG antibodies against Salmonella species.
TO, TH,AH,BH	Titre 1:160	Indicates Presence of IgM & IgG antibodies against Salmonella species.
TO, TH,AH,BH	Titre 1:320	Indicates Presence of IgM & IgG antibodies against Salmonella species.

- This test measures Somatic O and Flagellar H antibodies against Typhoid and Paratyphoid bacilli.
- The agglutinins usually appear at the end of the first week of infection and increase steadily till third / fourth week after which the decline starts. A Positive Widal test may occur because of Typhoid vaccination or previous typhoid infection and in certain autoimmune diseases.
- False positive results/anamnestic response may be seen in patients with past enteric infection during unrelated fevers like Malaria, Influenzae etc in the form of transient rise in H antibody in Widal test.
- False negative results may be due to processing of sample collected early in the course of disease (1st week) and immunosuppression.

Correlate Clinically.

Laboratory is NABL Accredited

*** End Of Report ***



DR. RUTURAJ MANIKLAL KOLHAPURE
MD, MICROBIOLOGIST