

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

REPORT -

L		REPORT -		
	Name	: Miss. TRIVENI	Sample ID	: A0934058
	Age/Gender	: 17 Years/Female	Reg. No	: 0312409090017
	Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 09-Sep-2024 11:06 AM
	Primary Sample	: Whole Blood	Received On	: 09-Sep-2024 01:28 PM
	Sample Tested In	: Serum	Reported On	: 09-Sep-2024 04:14 PM
	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY				
Test Name Results Units Ref. Range Method				Method
C-Reactive protein-(CRP) 14.2 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

Excellence In Health Care







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Name	: Miss. TRIVENI	Sample ID	: A0934057	
Age/Gender	: 17 Years/Female	Reg. No	: 0312409090017	
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 09-Sep-2024 11:06 AM	
Primary Sample	: Whole Blood	Received On	: 09-Sep-2024 01:28 PM	
Sample Tested In	: Whole Blood EDTA	Reported On	: 09-Sep-2024 03:18 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

 HAEMATOLOGY

 FEVER PROFILE

 Test Name
 Method

 MALARIA ANTIGEN (VIVAX & FALCIPARUM)

 Nagative
 Nagative

 Plasmodium Vivax Antigan
 Nagative
 Immuno Chromatography

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 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 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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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Client Address	: Kimtee colony ,Gokul Nagar,Tarr	naka

 Sample ID
 : A0934057

 Reg. No
 : 0312409090017

 SPP Code
 : SPL-CV-172

 Collected On
 : 09-Sep-2024 11:06 AM

 Received On
 : 09-Sep-2024 01:28 PM

 Reported On
 : 09-Sep-2024 02:30 PM

 Report Status
 : Final Report

	HA	EMATOLOG	SY			
	FE	VER PROFIL	E			
Test Name	Results	Units	Ref. Range	Method		
COMPLETE BLOOD COUNT (CBC)						
Haemoglobin (Hb)	10.8	g/dL	12-15	Cynmeth Method		
RBC Count	4.94	10^12/L	3.8-4.8	Cell Impedence		
Haematocrit (HCT)	37.7	%	40-50	Calculated		
MCV	76	fl	81-101	Calculated		
МСН	21.8	pg	27-32	Calculated		
МСНС	28.6	g/dL	32.5-34.5	Calculated		
RDW-CV	16.4	%	11.6-14.0	Calculated		
Platelet Count (PLT)	509	10^9/L	150-410	Cell Impedance		
Total WBC Count	5.2	10^9/L	4.0-10.0	Impedance		
Neutrophils	60	%	40-70	Cell Impedence		
Absolute Neutrophils Count	3.12	10^9/L	2.0-7.0	Impedence		
Lymphocytes	32	%	20-40	Cell Impedence		
Absolute Lymphocyte Count	1.66	10^9/L	1.0-6.2	Impedence		
Monocytes	06	%	2-10	Microscopy		
Absolute Monocyte Count	0.31	10^9/L	0.2-1.0	Calculated		
Eosinophils	02	%	1-6	Microscopy		
Absolute Eosinophils Count	0.1	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	Within Norr	nal Limits				
RBC	Anisocytos	is with Normocy	tic normochromic/			
Platelets	Thrombocy	rtosis		Microscopy		
Result rechecked and verified for abnor						
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Lab Address:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana. ICMR Reg .No. SAPALAPVLHT (Covid -19)

Westergren method

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

HAEMATOLOGY FEVER PROFILE						
						Test Name

mm/hr

10 or less

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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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Erythrocyte Sedimentation Rate (ESR)

HAC MRA MC 3633

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Sample Te	sted In : Serum	Reported On	: 09-Sep-2024 02:39 PM		
Client Add	ress : Kimtee colony ,Gokul Nagar,Tarna	aka Report Status	: Final Report		
Referred b Referring (Primary Sa Sample Te	y : Dr. SELF Customer : V CARE MEDICAL DIAGNOSTICS mple : Whole Blood sted In : Serum	SPP Code Collected On Received On Reported On	: 09-Sep-2024 11:06 AM : 09-Sep-2024 01:28 PM : 09-Sep-2024 02:39 PM		

IMMUNOLOGY & SEROLOGY FEVER PROFILE Results Test Name 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 Correlate Clinically. Laboratory is NABL Accredited *** End Of Report ***





DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST