


LABORATORY TEST REPORT

Name	: Master. SAI LOHITH		
Sample ID	: a0934457		
Age/Gender	: 1 Years 1 Months 5 Days/Male	Reg. No	: 0312409200061
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	: 20-Sep-2024 11:17 AM
Primary Sample	: Whole Blood	Received On	: 20-Sep-2024 07:07 PM
Sample Tested In	: Serum	Reported On	: 20-Sep-2024 09:45 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

VCARE FEVER PROFILE-1

Test Name	Results	Units	Biological Reference Interval
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C-Reactive protein-(CRP) <small>(Method: Immunoturbidimetry)</small>	23.0	mg/L	Upto:6.0
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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



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Dr. Vaishnavi
DR.VAISHNAVI
MD BIOCHEMISTRY

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Primary Sample	: Whole Blood	Received On	: 20-Sep-2024 07:07 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Sep-2024 07:36 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

VCARE FEVER PROFILE-1

Test Name	Results	Units	Biological Reference Interval
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MALARIA ANTIGEN (VIVAX & FALCIPARUM)

Plasmodium Vivax Antigen <small>(Method: Immuno Chromatography)</small>	Negative		Negative
Plasmodium Falciparum <small>(Method: Immuno Chromatography)</small>	Negative		Negative

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 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.

*** End Of Report ***

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Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

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HAEMATOLOGY

VCARE FEVER PROFILE-1

Test Name	Results	Units	Biological Reference Interval
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COMPLETE BLOOD COUNT (CBC)

 Haemoglobin (Hb) <small>(Method: Cynmeth Method)</small>	9.2	g/dL	11-14.5
 RBC Count <small>(Method: Cell Impedance)</small>	4.98	10 ¹² /L	4.0-5.2
 Haematocrit (HCT) <small>(Method: Calculated)</small>	34.6	%	34-40
 MCV <small>(Method: Calculated)</small>	70	fl	77-87
 MCH <small>(Method: Calculated)</small>	18.4	pg	24-30
 MCHC <small>(Method: Calculated)</small>	26.5	g/dL	31-37
 RDW-CV <small>(Method: Calculated)</small>	17.6	%	11.6-14.0
 Platelet Count (PLT) <small>(Method: Cell Impedance)</small>	263	10 ⁹ /L	200-490
 Total WBC Count <small>(Method: Impedance)</small>	25.4	10 ⁹ /L	6.0-16.0
 Neutrophils <small>(Method: Cell Impedance)</small>	60	%	21-43
 Absolute Neutrophils Count <small>(Method: Impedance)</small>	15.24	10 ⁹ /L	1.3-7.5
 Lymphocytes <small>(Method: Cell Impedance)</small>	35	%	49-71
 Absolute Lymphocyte Count <small>(Method: Impedance)</small>	8.89	10 ⁹ /L	2.9-12.4
 Monocytes <small>(Method: Microscopy)</small>	03	%	1-9
 Absolute Monocyte Count <small>(Method: Calculated)</small>	0.76	10 ⁹ /L	0.1-1.6
 Eosinophils <small>(Method: Microscopy)</small>	02	%	0-7
 Absolute Eosinophils Count <small>(Method: Calculated)</small>	0.51	10 ⁹ /L	0.0-1.2
 Basophils <small>(Method: Microscopy)</small>	00	%	0-2
 Absolute Basophil ICount <small>(Method: Calculated)</small>	0.00	10 ⁹ /L	0.0-1.2

Morphology

WBC	Neutrophilic Leucocytosis
RBC	Anisocytosis With Microcytic Hypochromic
Platelets <small>(Method: Microscopy)</small>	Adequate.


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Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY


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HAEMATOLOGY

VCARE FEVER PROFILE-1

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 Erythrocyte Sedimentation Rate (ESR) <small>(Method: Westergren method)</small>	35	mm/hr	3-13
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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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Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

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IMMUNOLOGY & SEROLOGY

VCARE FEVER PROFILE-1

Test Name	Results	Units	Biological Reference Interval
Widal Test (Slide Test)			
<i>(Method: (SLIDE AGGLUTINATION))</i>			
Salmonella typhi O Antigen	<1:20		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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IMMUNOLOGY & SEROLOGY

VCARE FEVER PROFILE-1

Test Name	Results	Units	Biological Reference Interval
Dengue NS1 Antigen <small>(Method: ELISA)</small>	0.26	S/Co	< 0.8~ : Negative 0.8-1.1 : Equivocal > 1.1~ : Positive

Correlate Clinically.

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*** End Of Report ***