


LABORATORY TEST REPORT


Name	: Mr. RAKESH MENGJI		
Sample ID	: A0934608		
Age/Gender	: 32 Years/Male	Reg. No	: 0312409240013
Referred by	: Dr. RAJESHWARI	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 24-Sep-2024 10:25 AM
Primary Sample	: Semen	Received On	: 24-Sep-2024 10:35 AM
Sample Tested In	: Semen	Reported On	: 24-Sep-2024 04:25 PM
Client Address	: Kimtee colony , Gokul Nagar, Tarnaka	Report Status	: Final Report

CLINICAL PATHOLOGY

Test Name	Results	Units	Biological Reference Interval
<b><u>SEMEN ANALYSIS</u></b>			
Time of Collection	10:35AM	AM/PM	
Period of Abstinence (In Days)	3	Days	
<b><u>Physical Examination</u></b>			
Volume	1.50	mL	>1.5
Colour	Pearly white		Pearly White
Viscosity	Viscous		Viscous
Liquifaction Time	30 mins	Mins	15 - 60
<b><u>Chemical Examination</u></b>			
Semen Fructose <small>(Method: Chemical)</small>	Present		
PH <small>(Method: Chemical)</small>	Alkaline		
<b><u>Microscopic Examination</u></b>			
Total Sperm Concentration <small>(Method: Neubauer chamber)</small>	28	million/ml	over 15 million
Total Sperm count	42.00	Millions/ejaculate	over 40 million
Pus Cells	01-02	/HPF	
Epithelial Cells	01-02	/HPF	
Rbc	01-01		
Sperm vitality <small>(Method: Dye exclusion)</small>	Live - 30%	%	>58
	Dead - 70%		
<b><u>Morphology</u></b> <small>(Method: PAPs Staining)</small>			
Normal morphology <small>(Method: Microscopy)</small>	8.00	%	>4.0%
Abnormal Morphology <small>(Method: Microscopy)</small>	92	%	
head defects <small>(Method: Microscopy)</small>	32.00	%	
Neck & mid piece <small>(Method: Microscopy)</small>	25.00	%	
Tail defects <small>(Method: Microscopy)</small>	35.00	%	
<b><u>Motility</u></b>			
Progressive (P) <small>(Method: Microscopy of Wet mount)</small>	10.00	%	>32
Non Progressive (NP) <small>(Method: Microscopy of Wet mount)</small>	20.00	%	
Total Motility(P+NP) <small>(Method: Microscopy of Wet mount)</small>	30	%	>40
Non Motile	70.00	%	



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**CLINICAL PATHOLOGY**

Test Name	Results	Units	Biological Reference Interval
(Method: Microscopy of Wet mount) Others	-		
Impression	Asthenonecrozoospermia		

**Comments:** This assay helps in determining male fertility status. Male infertility can be due to decrease in the number of viable sperms, abnormal sperm morphology and abnormalities of the seminal fluid.

**Sperm count:**

- Sperm count measures the concentration of sperm in a man's ejaculate, distinguished from total sperm count, which is the sperm count multiplied with volume.

**Motility:**

- Grade a: Sperm with progressive motility. These are the strongest and swim fast in a straight line. Sometimes it is also denoted motility IV.
- Grade b: (non-linear motility): These also move forward but tend to travel in a curved or crooked motion. Sometimes also denoted motility III.
- Grade c: These have non-progressive motility because they do not move forward despite the fact that they move their tails. Sometimes also denoted motility II.
- Grade d: These are immotile and fail to move at all. Sometimes also denoted motility .

**Morphology:**

- The WHO criteria as described in 2010 state that a sample is normal (samples from men whose partners had a pregnancy in the last 12 months) if 4% (or 5th centile) or more of the observed sperm have normal morphology.

**Liquifaction:**

- The liquefaction is the process when the gel formed by proteins from the seminal vesicles is broken up and the semen becomes more liquid. It normally takes less than 20 minutes for the sample to change from a thick gel into a liquid

**Abnormalities:**

- Aspermia: absence of semen.
- Azoospermia: absence of sperm.
- Oligozoospermia: Very low sperm count.

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



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