

NAME : MRS SAROJNI KHUNTEY

Ref. By : DR JITESH SHARMA

33 Years / Female Reg No. : 19798 Reg. Date : 10/08/2022 11:07AM

Collected At : MedZone Center

Address

INVESTIGATION REPORT

CLINICAL BIOCHEMISTRY

TEST	<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD	
ASO Titre (Anti Streptolysin 'O' Titre)					
Sample Type	: SERUM				
ASO Titre (Anti Streptolysin 'O' Titre)	: <50.00	IU/mL	Upto 200	Latex Agglutination Method	

Anti-streptolysin O (ASO or ASLO) is the antibody produced against an antigen produced by Lancefield group A streptococci. The enzyme is called *streptolysin O*, wherein the O stands for *oxygen-labile*; the other antigen being oxygen stable streptolysin-S. Both the enzymes are involved in producing hemolysis, i.e., digestion of blood, in particular, beta-hemolysis. When the body is infected with streptococci, it produces antibodies against the various antigens that the streptococci produce. ASO is one such antibody. So, raised or rising levels can indicate past or present infection. Historically was one of the first bacterial markers used for diagnosis and follow up of rheumatism or scarlet fever. Since these antibodies are produced as a delayed hypersensitive reaction to the above mentioned bacteria, there is no normal value. Any presence of these antibodies indicates an exposure to these bacteria. However, as many people are exposed to these bacteria and remain asymptomatic, the mere presence of ASO does not indicate disease. Acceptable values, where there is no clinical feature of rheumatism are as follows: Adults: less than 200 units, Children: less than 300 units. This titre (value) has significance only if it is greatly raised, or if a rise in titre can be demonstrated in paired blood samples taken days apart. Values need to be correlated with a clinical diagnosis.

METHOD : Nephlometry

INSTRUMENT: Nephstar, Class II Laser Protein Analyser.



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CLINICAL BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD
CRP (C-Reactive Protein Quantitative)				
Sample Type	: SERUM			
CRP (C-Reactive Protein Quantitative)	: 0.57	mg/L	Upto 6	Nephelometry (
				Fully Automated
				Quantitative
				Analyz

C-reactive protein (CRP) is a protein found in the blood, the levels of which rise in response to inflammation (an acute-phase protein). Its physiological role is to bind to phosphocholine expressed on the surface of dead or dying cells (and some types of bacteria) in order to activate the complement system via c1q. CRP is synthesized by the liver in response to factors released by fat cells (adipocytes). It is a member of the pentraxin family of proteins. It is not related to C-peptide or protein C. CRP is used mainly as a marker of inflammation. Apart from liver failure, there are few known factors that interfere with CRP production. Measuring and charting CRP values can prove useful in determining disease progress or the effectiveness of treatments. CRP is therefore a test of value in medicine, reflecting the presence and intensity of inflammation, although an elevation in C-reactive protein is not the telltale diagnostic sign of any one condition.

METHOD : Turbidometry

INSTRUMENT: A-25 Biosystem (Spain) Fully Automated Chemistry Analyser

--- End Of Report ---

Sample Barcode :	
Report Released On	: 10/08/2022 06:16PM
Sample Received On	: 10/08/2022 11:13AM
Sample Registered On	: 10/08/2022 11:07AM



Checked By:gopal

Dr. VANDANA CHANDANI



ADVANCE DIAGNOSTICS CENTRE C1-C2/17A, NEAR NIHARIKA TALKIES KORBA- 495677

PH-09228333 MOBILE-9300888178

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INVESTIGATION REPORT

HAEMATOLOGY

TEST		<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF	RANGE TEST METHOD
ESR (Erythrocyt	e Sedimentation R	<u>late)</u>			
Sample Type		: PLASMA	-Na Citrate		
ESR (Erythrocyte Sedim	entation Rate)	: 65	mm/hr	0 - 20 :1st Hour	Sedimentation me
		End Of	Report		
Sample Registered On	: 10/08/2022 11:07A	AM			1
Sample Received On	: 10/08/2022 11:13A	۸M			Dhr.
Report Released On	: 10/08/2022 06:16F	PM		Dr	
Sample Barcode :			Checked By:g	opal	



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INVESTIGATION REPORT

IMMUNOLOGY/SEROLOGY

TEST	<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD
RA Factor (Rheumatoid Factor)				
Sample Type	: SERUM			
RA Factor (Rheumatoid Factor)	: >100.0	IU/mL	< 18	Nephelometry (
, , , , , , , , , , , , , , , , , , ,				Fully Automated
				Quantitative
				Analyz

Rheumatoid Arthritis is an autoimmune disorder causing chronic inflammation.RA often affects the small joints of hands & feet as it attacks the joint lining resulting in painful swelling & eventually to joint deformation & erosion of bone. Rheumatoid Factor is an antibody linked to RA & related autoimmune diseases.RF is an autoantibody against human IgG commonly seen in sera, particularly in patients of RA.It gives useful objective evidence of RA, but a negative test does not rule out RA.

Negative in a third of patients with definite RA.

Positive test can also be seen in chronic Hepatitis, Chronic Viral infection, Dermatomyositis, Scleroderma & SLE.

Method - Nephelometry

Instrument - MISPA i

Anti CCP (Cyclic Citrullinated Peptide) Antibody

Sample Type	: SERUM			
Anti CCP (Cyclic Citrullinated Peptide) Antibody	: 25.1	U/mL	<10 Negative >10 Positive	ELISA

CCP can be useful in diagnosing early RA. An elevated CCP can be found in a significant number of patients who have a negative RF, the classic test for RA, and therefore can help to make a diagnosis.

CCP antibodies may be detected in about 50-60% of patients with early RA (as early as 3-6 months after the beginning of symptoms). Early detection and diagnosis of RA allows doctors to begin aggressive treatment of the condition, minimizing the associated complications and tissue damage.

CCP may also be ordered to help evaluate the likely development of RA in patients with undifferentiated arthritis (those whose symptoms suggest but do not yet meet the criteria of RA). The reason it is useful in confounding clinical presentations is that CCP is a more specific test for RA then the traditional RF. According to American College of Rheumatology, approximately 95% of patients with a positive CCP will develop RA in the future.

--- End Of Report ---

Sample Barcode :	
Report Released On	: 12/08/2022 08:02PM
Sample Received On	: 10/08/2022 11:13AM
Sample Registered On	: 10/08/2022 11:07AM

Dr. VANDANA CHANDANI