

C1-C2/17A, NEAR NIHARIKA TALKIES KORBA- 495677 PH-09228333 MOBILE-9300888178

NAME : MR BARATU RAM 63 Years / Male Reg No. : 20384

Ref. By : HARISH SONI(MD MED) Reg. Date : 17/08/2022 11:34AM

Address : Collected At : MedZone Center

INVESTIGATION REPORT

CLINICAL BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REF RANGE TEST METHOD

CRP (C-Reactive Protein Quantitative)

Sample Type : SERUM

CRP (C-Reactive Protein Quantitative) : 12.44 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 Registered On : 17/08/2022 11:34AM

Sample Received On : 17/08/2022 11:36AM

Report Released On : 17/08/2022 06:00PM

Sample Barcode :

Checked By:RAVI

Dr. VANDANA CHANDANI



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INVESTIGATION REPORT

CLINICAL PATHOLOGY

TEST RESULT UNIT TEST METHOD

CUE (Complete Urine Examination)

Sample Type : URINE

PHYSICAL EXAMINATION:

Color : Pale Yellow

Appearence : clear

Reaction (pH) : 5.7 4.8-7.6 Specific Gravity : 1.018 1.002-1.030

CHEMICAL EXAMINATION:

Proteins : Trace
Sugar : Absent

MICROSCOPIC EXAMINATION:

Pus (WBC) Cells : 2-3/hpf
Epithelial Cells. : 1-3/hpf
R.B.C : Absent
Casts : Absent
Crystals : Absent

--- End Of Report ---

Sample Registered On : 17/08/2022 11:34AM

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Sample Barcode : Checked By:RAVI

Dr. VANDANA CHANDANI



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INVESTIGATION REPORT

HAEMATOLOGY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD
CBP (Complete Blood Picture)				
Sample Type	: WB - EDTA			
Haemoglobin	: 10.2	gm%	12.0 - 18.0	
Total Erythrocyte Count	: 5.19	M/cmm	4.0 - 6.2	Cell Counter
Hemotocrit (PCV)	: 32.2	Vol %	35.0 - 50.0	
Mean Corpuscular Volume	: 62.0	fL	80 - 100	
Mean Corpuscular Hemoglobin	: 19.7	PG	26 - 34	
MCHC	: 31.7	g/L	31 - 35	
RDW	: 14.3	%	11.5 - 14.5	
Total Leucocyte Count.	: 5880	/cumm	4000 - 11000	
DIFFERENTIAL COUNT:				
Neutrophils	: 65	%	40 - 75	
Lymphocytes.	: 29	%	20 - 40	Cell Counter
Monocytes.	: 05	%	2 - 10	Cell Counter
Eosinophils	: 01	%	1 - 6	Cell Counter
Basophils	: 0	%	0 - 1	Cell Counter
Platelet Count	: 171000	/cmm	150000 - 450000	

ESR (Erythrocyte Sedimentation Rate)

Sample Type : PLASMA -Na Citrate

ESR (Erythrocyte Sedimentation Rate) : 30 mm/hr 0 - 15 :1st Hour Sedimentation me



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INVESTIGATION REPORT

HAEMATOLOGY

TEST RESULT UNIT TEST METHOD

Malarial parasite Identification By QBC

Sample Type WB - EDTA

QBC For Malaria : Negative

QBC: It is a new method for identifying the malarial parasite in peripheral blood involves staining of the centrifuged & compressed red blood cell layar with seridine orange & its examintion under UV light source. It is fast easy & calimed to be more sensitive than traditional thick smear.

RDT; (Rapid detection of malarial)

It is basd on immunochromatographic detction of malarial antigen. 3antigens are usually used PFHRP2, plasmodium aldolase & pLDH.

These remain positive even 1 manth treatment

False Positive in patient having autoantibodies as Rheumatoid Factor.

False Negative in immunocompromised patient.

SENSITIVITY INDEX:

QBC : < 5 parasites / microlit. of blood
Thick smear :> 5 parasites / microlit. of blood
Thin smear :200 parasites / microlit. of blood
pLDH :>100-200 parasites / microlit. of blood
PfHRP2 :>40- 100 parasites / microlit. of blood

Detection Of Malaria Parasite may be negative in 1st 3 days, because of low parasite index.

Repeat examination requiret depending upon clinical suspicion.

--- End Of Report ---

Sample Registered On : 17/08/2022 11:34AM

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