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Al Abbar Laboratories for Research and Medical Analysis
مختبرات العبار للأبحاث و التحاليل الطبية
Dubai Accreditation Department for ISO 15189 إدارة دبي للإعتماد طبقا لمواصفات الأيزو ١٥١٨٩

LABORATORY REPORT

Name	: **SIMAL IRSHAD IRSHAD IRSHAD AHMAD**	File. No.	: **AAL02-319036**
DOB/Gender	: **01-06-2013 (10 Yrs 12 Days/Female)**	Referral Doctor	: **Dr. Farideh Moradimoghaddam**
Lab No.	: **22231630583**	Referral Clinic	: **Peshawar(Irham Medical Center)**
Request Date	: **12-06-2023 22:22**	Clinic File No	: **39131**
Insurance	: **NEXTCARE**		

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL				
RBC	**5.71** H	10^12/L	4.00 - 5.20	Hydrodynamic focusing (DC Detection)
Haemoglobin	**10.0** L	g/dl	11.5 - 15.5	Photometry-SLS
HCT	**32.6** L	%	35.0 - 45.0	Hydrodynamic focusing
MCV	**57.1** L	fl	77.0 - 95.0	Calculation
MCH	**17.5** L	pg	25.0 - 33.0	Calculation
MCHC	**30.7** L	g/dL	31.0 - 37.0	Calculation
Platelet Count	353	10^3/uL	170 - 450	Hydrodynamic Focusing(DCD)
WBC	**18.73** H	10^3/uL	5.00 - 13.00	Flow Cytometry
DIFFERENTIAL COUNT (%)				
Neutrophils	87.9	%	22.0 - 89.0	Flow Cytometry
Lymphocytes	**7.3** L	%	25.0 - 65.0	Flow Cytometry
Monocytes	4.5	%	2.0 - 10.0	Flow Cytometry
Eosinophils	**0.1** L	%	1.0 - 8.0	Flow Cytometry
Basophils	0.2	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
DIFFERENTIAL COUNT (ABSOLUTE)				
Neutrophils (Absolute)	**16.46** H	10^3/uL	2.00 - 8.00	Calculation
Lymphocytes (Absolute)	1.37	10^3/uL	1.00 - 5.00	Calculation
Monocytes (Absolute)	0.85	10^3/uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	**0.01** L	10^3/uL	0.10 - 1.00	Calculation
Basophils (Absolute)	0.04	10^3/uL	< 0.15	Calculation
Band Forms (Absolute)	0.00	10^3/uL	< 0.9	Calculation

Remarks:
Recommended to do peripheral smear, iron studies and thalassemia screening.
Test result to be interpreted in the light of clinical history and to be investigated further if necessary.

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Sample processed on the same day of receipt unless specified otherwise.
Test results pertains only the sample tested and to be correlated with clinical history.
Reference range related to Age/Gender.

Dr. Solmaz Siddiqui
Laboratory Director
DHA/LS/248469

H/L Collected On : 12-06-2023 20:00:00
Received On : 12-06-2023 22:23:00
Authenticated On : 12-06-2023 23:47:30
Released On : 12-06-2023 23:48:03
Printed On : 13-06-2023 11:02:15

Padmapriya Kumareshan
Sr. Technician
DHA/LS2992011/243822

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Test Name	Result	Units	Ref. Range	Method

Sample Type : EDTA WB

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CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
CRP - quant (serum)	**8.61** H	mg/L	< 5.0	Immunoturbidimetric

Remarks:
Test result to be interpreted in the light of clinical history and to be investigated further if necessary.

Sample Type : Serum

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MICROBIOLOGY/BACTERIOLOGY/BODY FLUIDS

Test Name	Result	Units	Ref. Range	Method
URINE ROUTINE (URINALYSIS)				
PHYSICAL EXAMINATION				
Color	Light Yellow		Yellow	Light Scatter
Appearance	Clear		Clear	Light Scatter
Specific Gravity	1.016		1.005 - 1.030	Refractrometry
PH	5.00		4.6 - 8.0	pH.I/Reflectance
Glucose	Negative		Negative	Enz.Rn/Reflect
Ketone	++		Negative	Legal's method
Protein	Negative		Negative	Dye Binding
Blood	Trace		Negative	Peroxidase Activity/Reflectance
Bilirubin	Negative		Negative	Acidified Diazo Coupling
Urobilinogen	Normal	mg/dL	Normal 0.2 - 1.0	Buffered Diazo Coupling
Nitrite	Negative		Negative	Mod. Gries Rn
Leukocytes.	Negative		Negative	Enz.Rn/Reflect
MICROSCOPIC EXAMINATION				
Pus Cells	1 - 2	/HPF	1 - 4	F.D.I/Microscopy
RBC's	0 - 1	/HPF	0 - 2	F.D.I/Microscopy
Epithelial cells	1 - 2	/HPF	1 - 4	F.D.I/Microscopy
Bacteria	Absent	/HPF	Absent	F.D.I/Microscopy
Yeast cells	Absent	/HPF	Absent	F.D.I/Microscopy
Trichomonas Vaginalis	Absent	/HPF	Absent	F.D.I/Microscopy
Mucus Threads	Few	/HPF	Absent	F.D.I/Microscopy
Crystals	Absent	/HPF	Absent	F.D.I/Microscopy
Casts	Absent	/LPF	Absent	F.D.I/Microscopy

Bilirubin and Urobilinogen when exposed to sunlight leads to artificially low results, hence recommended to collect urine in dark container for analyzing Urine

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Test Name	Result	Units	Ref. Range	Method

Bilirubin and Urobilinogen if clinically indicated.

Kindly note the new methodology is effective from 31-10-2022.

Remarks:

Test result to be interpreted in the light of clinical history and to be investigated further if clinically indicated.

Sample Type : Mid-stream Urine

---------- End Of Report ----------

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