

LABORATORY REPORT

Name : **ANJU DAVIS DAVIS MAZHUVANCHERY CHERIYA** File. No. : **AAL02-294965**
DOB/Gender : **01-06-1996 (26 Yrs 9 Month 27 Days/Female)** Referral Doctor : **Dr. Tahniyat Iqbal**
Lab No. : **22230860409** Referral Clinic : **Peshawar(Irham Medical Center)**
Request Date : **27-03-2023 22:08** Clinic File No : **39804**
Insurance : **No**

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	5.29^H	10 ¹² /L	3.80 - 4.80	Hydrodynamic focusing (DC Detection)
Haemoglobin	14.4	g/dl	12.0 - 15.0	Photometry-SLS
HCT	41.5	%	36.0 - 46.0	Hydrodynamic focusing
MCV	78.4^L	fl	83.0 - 101.0	Calculation
MCH	27.2	pg	27-32	Calculation
MCHC	34.7^H	g/dL	31.5 - 34.5	Calculation
Platelet Count	207	10 ³ /uL	150-400	Hydrodynamic Focusing(DCD)
WBC	7.05	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	55.3	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	36.0	%	20.0 - 40.0	Flow Cytometry
Monocytes	7.8	%	2-10	Flow Cytometry
Eosinophils	0.0^L	%	1 - 6	Flow Cytometry
Basophils	0.9	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
<u>DIFFERENTIAL COUNT (ABSOLUTE)</u>				
Neutrophils (Absolute)	3.90	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	2.54	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.55	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.00^L	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.06	10 ³ /uL	0.02 - 0.10	Calculation
Band Forms (Absolute)	0.00	10 ³ /uL	< 0.66	Calculation

Remarks:

These tests are accredited under ISO 15189:2012 unless specified by (*)

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 : 27-03-2023 20:00:00
Authenticated On : 27-03-2023 22:38:47
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Esmeralda Obenita
Lab Incharge
DHA/LS/2992011/ 241430

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Test Name	Result	Units	Ref. Range	Method
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. Sample Type : EDTA WB				

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MICROBIOLOGY/BACTERIOLOGY/BODY FLUIDS

Test Name	Result	Units	Ref. Range	Method
<u>URINE ROUTINE (URINALYSIS)</u>				
<u>PHYSICAL EXAMINATION</u>				
Color	Light Yellow		Yellow	Light Scatter
Appearance	Clear		Clear	Light Scatter
Specific Gravity	1.011		1.005 - 1.030	Refractrometry
PH	7.00		4.6 - 8.0	pH.I/Reflectance
Glucose	Negative		Negative	Enz.Rn/Reflect
Ketone	Negative		Negative	Legal's method
Protein	Trace		Negative	Dye Binding
Blood	++		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.	Trace		Negative	Enz.Rn/Reflect
<u>MICROSCOPIC EXAMINATION</u>				
Pus Cells	2 - 4	/HPF	1 - 4	F.D.I/Microscopy
RBC's	10 - 15	/HPF	0 - 2	F.D.I/Microscopy
Epithelial cells	4 - 6	/HPF	1 - 4	F.D.I/Microscopy
Bacteria	Rare	/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	Absent	/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
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Bilirubin and Urobilinogen if clinically indicated.

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

Sample Type : Mid-stream Urine

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

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