

LABORATORY REPORT

Name : **PREEMA CAREL LOBO PATRICK PETER TAURO** File. No. : **AAL02-335417**
DOB/Gender : **25-02-1987 (36 Yrs 5 Month 19 Days/Female)** Referral Doctor : **Dr. Enomen Goodluck Ekata**
Lab No. : **22232240427** Referral Clinic : **Peshawar(Irham Medical Center)**
Request Date : **12-08-2023 22:39** Clinic File No : **40021**
Insurance : **NEURON**

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	5.62^H	10 ¹² /L	3.80 - 4.80	Hydrodynamic focusing (DC Detection)
Haemoglobin	11.2^L	g/dl	12.0 - 15.0	Photometry-SLS
HCT	35.4^L	%	36.0 - 46.0	Hydrodynamic focusing
MCV	63.0^L	fl	83.0 - 101.0	Calculation
MCH	19.9^L	pg	27-32	Calculation
MCHC	31.6	g/dL	31.5 - 34.5	Calculation
Platelet Count	308	10 ³ /uL	150-400	Hydrodynamic Focusing(DCD)
WBC	8.05	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	56.5	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	31.8	%	20.0 - 40.0	Flow Cytometry
Monocytes	8.4	%	2-10	Flow Cytometry
Eosinophils	2.4	%	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)	4.55	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	2.56	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.68	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.19	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.07	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 : 12-08-2023 19:00:00
Authenticated On : 12-08-2023 23:10:14
Printed On : 12-08-2023 23:36:28

Received On : 12-08-2023 22:41:00
Released On : 12-08-2023 23:12:54
Reprinted On : 13-08-2023 13:40:57

Pring

Padmapriya Kumaresan
Sr. Technician
DHA/LS2992011/243822

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Lab No.	: 22232240427	Referral Clinic	: Peshawar(Irham Medical Center)
Request Date	: 12-08-2023 22:39	Clinic File No	: 40021
Insurance	: NEURON		

Test Name	Result	Units	Ref. Range	Method
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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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CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
CRP - quant (serum)	2.72	mg/L	< 5.0	Immunoturbidimetric

Sample Type : Serum

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

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