

LABORATORY REPORT

Name	: JUDITH MOYO	File. No.	: AAL02-338797
DOB/Gender	: 24-03-1985 (38 Yrs 5 Month 2 Days/Female)	Referral Doctor	: Dr. Enomen Goodluck Ekata
Lab No.	: 22232380195	Referral Clinic	: Peshawar(Irham Medical Center)
Request Date	: 26-08-2023 15:19	Clinic File No	: 40788
Insurance	: NEXTCARE		

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	4.28	10 ¹² /L	3.80 - 4.80	Hydrodynamic focusing (DC Detection)
Haemoglobin	11.0 ^L	g/dl	12.0 - 15.0	Photometry-SLS
HCT	33.2 ^L	%	36.0 - 46.0	Hydrodynamic focusing
MCV	77.6 ^L	fl	83.0 - 101.0	Calculation
MCH	25.7 ^L	pg	27-32	Calculation
MCHC	33.1	g/dL	31.5 - 34.5	Calculation
Platelet Count	395	10 ³ /uL	150-400	Hydrodynamic Focusing(DCD)
WBC	5.82	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	49.6	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	40.5 ^H	%	20.0 - 40.0	Flow Cytometry
Monocytes	6.9	%	2-10	Flow Cytometry
Eosinophils	1.5	%	1 - 6	Flow Cytometry
Basophils	1.5	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
<u>DIFFERENTIAL COUNT (ABSOLUTE)</u>				
Neutrophils (Absolute)	2.88	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	2.36	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.40	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.09	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.09	10 ³ /uL	0.02 - 0.10	Calculation
Band Forms (Absolute)	0.00	10 ³ /uL	< 0.66	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.

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 : 26-08-2023 11:00:00
Authenticated On : 26-08-2023 16:43:08
Printed On : 26-08-2023 17:19:32

Received On : 26-08-2023 15:30:00
Released On : 26-08-2023 16:45:48

Wasik

Wasik Hasan Tisekar
Laboratory Technician
DHA-P-0039673

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

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CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
CRP - quant (serum)	2.20	mg/L	< 5.0	Immunoturbidimetric

Sample Type : Serum

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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	Straw		Yellow	Light Scatter
Appearance	Clear		Clear	Light Scatter
Specific Gravity	1.008		1.005 - 1.030	Refractrometry
PH	6.00		4.6 - 8.0	Litmus reaction
Glucose	Negative		Negative	Enz.Rn/Reflect
Ketone	Negative		Negative	Legal's method
Protein	Negative		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	4 - 6	/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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Dr. Solmaz Siddiqui
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DHA/LS/248469

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Bilirubin and Urobilinogen if clinically indicated.

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

Remarks:

Presence of Blood in absence of RBCs can be seen in conditions where there is hemolysis of RBCs .Test result to be interpreted in the light of clinical history and to be investigated further if necessary.

Sample Type : Urine

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

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