

LABORATORY REPORT

Name	: MORAD ACHETOUI	File. No.	: AAL02-359528
DOB/Gender	: 05-09-1981 (42 Yrs 2 Month 12 Days/Male)	Referral Doctor	: Dr. Enomen Goodluck Ekata
Lab No.	: 22233210230	Referral Clinic	: Peshawar(Irham Medical Center)
Request Date	: 17-11-2023 20:49	Clinic File No	: 35630
Insurance	: NATIONAL GENERAL INSURANCE (HEALTHNET)		

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	4.82	10 ¹² /L	4.50 - 5.50	Hydrodynamic focusing (DC Detection)
Haemoglobin	15.1	g/dl	13.0 - 17.0	Photometry-SLS
HCT	44.9	%	40.0 - 50.0	Hydrodynamic focusing
MCV	93.2	fl	83.0 - 101.0	Calculation
MCH	31.3	pg	27-32	Calculation
MCHC	33.6	g/dL	31.5 - 34.5	Calculation
Platelet Count	245	10 ³ /uL	150 - 400	Hydrodynamic Focusing(DCD)
WBC	5.67	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	51.3	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	34.6	%	20.0 - 40.0	Flow Cytometry
Monocytes	8.3	%	2.0-10.0	Flow Cytometry
Eosinophils	4.9	%	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)	2.91	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	1.96	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.47	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.28	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.05	10 ³ /uL	0.02 - 0.10	Calculation
Band Forms (Absolute)	0.00	10 ³ /uL	< 0.66	Calculation

ERYTHROCYTE SEDIMENTATION RATE (ESR)

ESR (whole blood)	7	mmhr	up to 10	Modified
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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 : 17-11-2023 19:00:00
Authenticated On : 17-11-2023 22:44:31
Printed On : 17-11-2023 23:36:37

Received On : 17-11-2023 21:03:00
Released On : 17-11-2023 22:48:15
Reprinted On : 18-11-2023 08:28:25



Esmeralda Obenita
Lab Incharge
DHA/LS/2992011/ 241430

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Test Name	Result	Units	Ref. Range	Method
				Westergren

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	Yellow		Yellow	Light Scatter
Appearance	Clear		Clear	Light Scatter
Specific Gravity	1.023		1.005 - 1.030	Refractrometry
PH	5.00		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		Negative	Peroxidase Activity/Reflectance
Bilirubin	Negative		Negative	Acidified Diazo Coupling
Urobilinogen	3.0 ^H	mg/dL	Normal 0.2 - 1.0	Buffered Diazo Coupling
Nitrite	Negative		Negative	Mod. Gries Rn
Leukocytes.	Negative		Negative	Enz.Rn/Reflect
<u>MICROSCOPIC EXAMINATION</u>				
Pus Cells	1 - 2	/HPF	1 - 4	F.D.I/Microscopy
RBC's	0 - 1	/HPF	0 - 2	F.D.I/Microscopy
Epithelial cells	0 - 1	/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	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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Bilirubin and Urobilinogen if clinically indicated.

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

Remarks:

Spermatozoa : Present.

Test was rechecked. Recommended to repeat test with new sample for Urobilinogen confirmation.

Sample Type : Urine

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

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