

LABORATORY REPORT

Name	: LAKJAYA WARNAJITH SANJEEWA SAMARATHUNGA	File. No.	: AAL02-364653
DOB/Gender	: 30-09-1990 (33 Yrs 2 Month 10 Days/Male)	Referral Doctor	: Dr. Sajid Sanaullah Khan
Lab No.	: 22233520106	Referral Clinic	: Peshawar(Irham Medical Center)
Request Date	: 18-12-2023 12:31	Clinic File No	: 40625
Insurance	: No		

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	5.04	10 ¹² /L	4.50 - 5.50	Hydrodynamic focusing (DC Detection)
Haemoglobin	14.5	g/dl	13.0 - 17.0	Photometry-SLS
HCT	43.3	%	40.0 - 50.0	Hydrodynamic focusing (HF)
MCV	85.9	fl	83.0 - 101.0	Calculation
MCH	28.8	pg	27-32	Calculation
MCHC	33.5	g/dL	31.5 - 34.5	Calculation
Platelet Count	225	10 ³ /uL	150 - 400	HF (DCD)
WBC	10.27 ^H	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	54.4	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	30.6	%	20.0 - 40.0	Flow Cytometry
Monocytes	13.7 ^H	%	2.0-10.0	Flow Cytometry
Eosinophils	0.5 ^L	%	1 - 6	Flow Cytometry
Basophils	0.8	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
<u>DIFFERENTIAL COUNT (ABSOLUTE)</u>				
Neutrophils (Absolute)	5.59	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	3.14 ^H	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	1.41 ^H	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.05	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.08	10 ³ /uL	0.02 - 0.10	Calculation
Band Forms (Absolute)	0.00	10 ³ /uL	< 0.66	Calculation
<u>ERYTHROCYTE SEDIMENTATION RATE (ESR)</u>				
ESR (whole blood)	35 ^H	mmhr	up to 10	Modified

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 : 18-12-2023 11:00:00
Authenticated On : 18-12-2023 14:17:26
Printed On : 18-12-2023 16:19:51

Received On : 18-12-2023 13:02:00
Released On : 18-12-2023 15:10:21

Wasik

Wasik Hasan Tisekar
Laboratory Technician
DHA-P-0039673

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Test Name	Result	Units	Ref. Range	Method
				Westergren

Remarks:

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
C-Reactive Protein (CRP)	24.30 ^H	mg/L	Negative < or = to 5.0	Immunoturbidimetric Assay

CRP is an acute phase protein whose concentration rises non -specifically in response to inflammation. CRP values should not be interpreted without a complete clinical evaluation. Follow-up testing of patients with elevated values is recommended in order to help rule out a recent response to undetected infection or tissue injury. Please note Reference Range Reviewed w.ef 15/10/23

Remarks:

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Sample Type : Serum

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IMMUNOLOGY/SEROLOGY/INFECTIOUS DISEASES

Test Name	Result	Units	Ref. Range	Method
**CMV IgG	88.80^H	U/mL	Non Reactive: <0.5 Borderline: 0.5 to < 1.0 Reactive: >=1.0	ECLIA

Non-reactive: Not infected with CMV and therefore susceptible to primary infection. Reactive: Positive for CMV IgG-specific antibodies indicating either acute or past infection. Such individuals are potentially at risk of transmitting the virus (e.g. mother to fetus) but are at current not necessarily contagious. Borderline: Samples should be retested. In case the result is still borderline, a second sample should be collected (e.g. within 2 weeks) and testing should be repeated. A positive IgM result in combination with a low avidity index for IgG is a strong indication of a primary CMV infection within the last 4 months. The diagnosis may be supported by a significant increase of the CMV IgG antibody titer from a first to a second sample taken e.g. within 34 weeks. A borderline or low positive result may already indicate an early acute CMV infection (also if the sample is non-reactive for CMV IgM antibodies). Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration. Please note Reference Range

Reviewed w.ef 15/10/23

Remarks:

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Sample Type : Serum

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

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