

Laboratory Investigation Report

BML345450

Name : Mr. ADAM EHAB HAMOUDA
DOB : 06/03/2007
Age / Gender : 16 Y / Male
Referred by : Dr. Enomen Goodluck Ekata
Centre : Peshawar Medical Center LLC

Ref No. : 38053
Sample No. : 2401351739
Collected : 28/01/2024 14:08
Registered : 29/01/2024 18:35
Reported : 29/01/2024 23:21

BIOCHEMISTRY

Test	Result	Flag	Unit	Reference Range	Methodology
CALCIUM	9.4		mg/dL	8.4 - 10.2	O-cresolphthalein complexone

Interpretation Notes :

Increased level is seen in Hyperparathyroidism, Infections that cause granulomas such as tuberculosis and certain fungal and mycobacterial infections, Multiple myeloma, T cell lymphoma and certain other cancers, Metastatic bone tumor, Paget disease, Use of certain medicines such as lithium, tamoxifen, and thiazides. Decreased level is seen in Kidney failure, Low blood level of albumin, Liver disease, Magnesium deficiency, Pancreatitis, Vitamin D deficiency

C-REACTIVE PROTEIN (CRP)	4		mg/L	< 5.0	Immunoturbidimetry
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Sample Type : Serum

End of Report

Dr. Adley Mark Fernandes
M.D (Pathology)
Pathologist

Dr. Vyoma V Shah
M.D (Pathology)
Clinical Pathologist



NAZAR MOHAMED ALI
Laboratory Technologist

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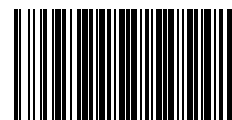
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HEMATOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
COMPLETE BLOOD COUNT (CBC)					
HEMOGLOBIN	15.9		g/dL	13.5 - 17.5	Spectrophotometry (Oxyhemoglobin)
RBC COUNT	5.3		10 ⁶ /μL	4.3 - 5.7	Electrical Impedance
HEMATOCRIT	47.2		%	38 - 50	Calculation
MCV	89		fL	82 - 98	Calculation
MCH	30		pg	27 - 32	Calculation
MCHC	33.8		g/dL	32 - 37	Calculation
RDW	12.4		%	11.8 - 15.6	Calculation
RDW-SD	38.9		fL		Calculation
MPV	8.4		fL	7.6 - 10.8	Calculation
PLATELET COUNT	163		10 ³ /μL	150 - 450	Electrical Impedance
PCT	0.1		%	0.01 - 9.99	Calculation
PDW	17.6		Not Applicable	0.1 - 99.9	Calculation
NUCLEATED RBC (NRBC) [^]	0.5		/100 WBC		Flow Cytometry
ABSOLUTE NRBC COUNT [^]	0.04		10 ³ /uL		Calculation
EARLY GRANULOCYTE COUNT (EGC) [^]	0.2		%		Flow Cytometry
ABSOLUTE EGC [^]	0		10 ³ /uL		Calculation
WBC COUNT	7.3		10 ³ /μL	4 - 11	Electrical Impedance
DIFFERENTIAL COUNT (DC)					
NEUTROPHILS	63		%	40 - 75	Flow Cytometry
LYMPHOCYTES	28	L	%	30 - 60	Flow Cytometry
EOSINOPHILS	5		%	0 - 6	Flow Cytometry
MONOCYTES	4		%	1 - 6	Flow Cytometry
BASOPHILS	0		%	0 - 1	Flow Cytometry
ABSOLUTE COUNT					
ABSOLUTE NEUTROPHIL COUNT	4.7		10 ³ /uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	1.7		10 ³ /uL	0.8 - 4.95	Calculation
ABSOLUTE MONOCYTE COUNT	0.6		10 ³ /uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	0.3		10 ³ /uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0		10 ³ /uL	0 - 0.11	Calculation

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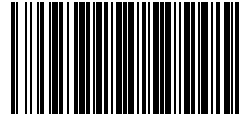
Haleem

HALEEM HAKKIM
Laboratory Technician

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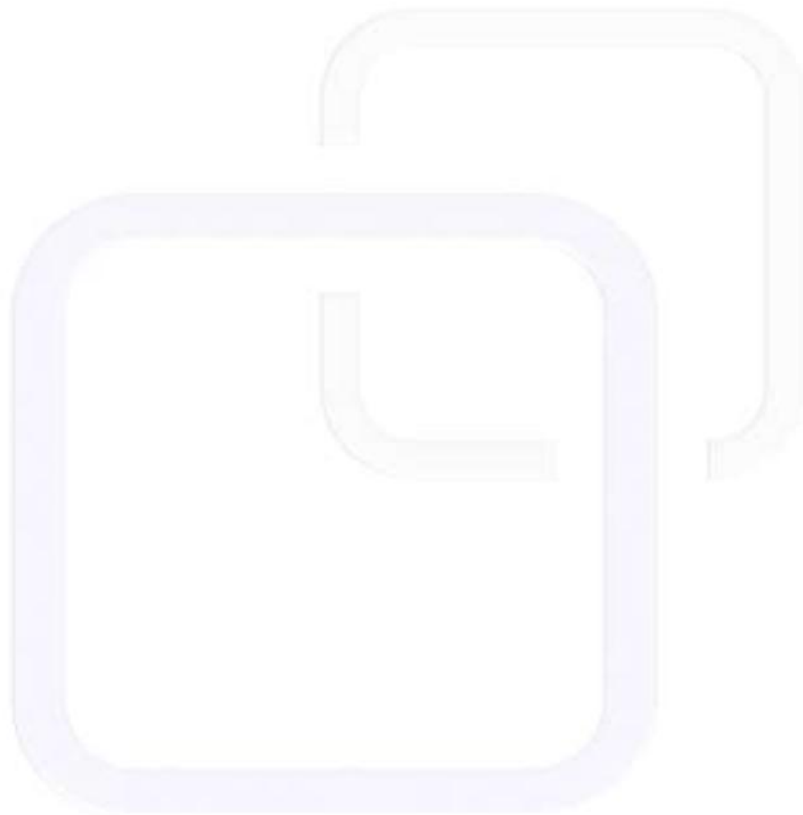
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HEMATOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
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COMPLETE BLOOD COUNT (CBC)

Interpretation Notes : Please note update on CBC report format and changes in reference ranges.



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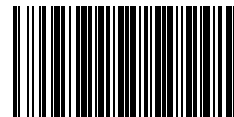
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HAEMATOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
ERYTHROCYTE SEDIMENTATION RATE (ESR)	1		mm/hr	< 15 Please note change in reference range and method.	Automated

Interpretation Notes :

Increased ESR is seen in inflammation, pregnancy, anemia, autoimmune disorders (such as rheumatoid arthritis and lupus), infections, some kidney diseases and some cancers (such as lymphoma and multiple myeloma).

The ESR is decreased in polycythemia, hyperviscosity, sickle cell anemia, leukemia, low plasma protein (due to liver or kidney disease), congestive heart failure, hypofibrinogenemia and leukocytosis.

Sample Type : EDTA Whole Blood

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