



Laboratory Investigation Report

Name MARIA YANEY

DOB 06/04/1978

Age / Gender 46 Y 1 M / Female

Referred by Peshawar Medical Center LLC Peshawar Medical Center LLC Centre

Ref No. 38080

Sample No. 2405403799

Collected 07/05/2024 10:30

Registered 07/05/2024 15:47 Reported 07/05/2024 19:40

BIOCHEMISTRY

Result Flag Unit Test **Reference Range**

IRON 57 ug/dL 33 - 193

Please note change.

Source: Roche IFU.

Methodology

Colorimetric without ppt (Ferene)

Interpretation Notes:

Increased iron or Chronic iron overload may be due to excessive iron intake, hereditary hemochromatosis, multiple blood transfusions, and a few other conditions. Decreased level leads to Iron deficiency may be seen with insufficient intake, inadequate absorption or increased nutrient requirements as seen during pregnancy or with acute or chronic blood loss

Sample Type: Serum

End of Report



This is an electronically authenticated report

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Test result pertains only to the sample tested and to be interpreted in the light of clinical history. These tests are accredited under ISO 15189:2012 unless specified by (^). Test marked with # is performed in an accredited referral laboratory.

Dubai, UAE

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Q aleem

HALEEM HAKKIM Laboratory Technician

Printed on: 15/06/2024 18:28



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HEMATOLOGY					
Test	Result	Flag	Unit	Reference Range	Methodology
COMPLETE BLOOD COUNT (CBC)					
HEMOGLOBIN	11.3	L	g/dL	12 - 15.5	Spectrophotometry (Oxyhemoglobin)
RBC COUNT	3.7	L	10^6/μL	3.9 - 5	Electrical Impedance
HEMATOCRIT	34.1	L	%	35 - 45	Calculation
MCV	93.2		fL	82 - 98	Calculation
МСН	30.9		pg	27 - 32	Calculation
мснс	33.2		g/dL	32 - 37	Calculation
RDW	12.5		%	11.9 - 15.5	Calculation
RDW-SD	39.8		fL		Calculation
MPV	10.6		fL	7.6 - 10.8	Calculation
PLATELET COUNT	258		10^3/μL	150 - 450	Electrical Impedance
РСТ	0.3		%	0.01 - 9.99	Calculation
PDW	17.7		Not Applicable	0.1 - 99.9	Calculation
NUCLEATED RBC (NRBC)^	0.3		/100 WBC		Flow Cytometry
ABSOLUTE NRBC COUNT^	0.02		10^3/uL		Calculation
EARLY GRANULOCYTE COUNT (EGC)^	0.2		%		Flow Cytometry
ABSOLUTE EGC^	0.0		10^3/uL		Calculation
WBC COUNT	6.4		10^3/μL	4 - 11	Electrical Impedance
DIFFERENTIAL COUNT (DC)					
NEUTROPHILS	60		%	40 - 75	Flow Cytometry
LYMPHOCYTES	35		%	30 - 60	Flow Cytometry
EOSINOPHILS	1		%	0 - 6	Flow Cytometry
MONOCYTES	4		%	1 - 6	Flow Cytometry
BASOPHILS	0		%	0 - 1	Flow Cytometry
ABSOLUTE COUNT					
ABSOLUTE NEUTROPHIL COUNT	3.5		10^3/uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	2.1		10^3/uL	1.2 - 6.6	Calculation
ABSOLUTE MONOCYTE COUNT	0.6		10^3/uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	0.1		10^3/uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0.1		10^3/uL	0 - 0.11	Calculation

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

This is an electronically authenticated report

MOHAMMED RASHID CHENANGADATH

Laboratory Technologist
Printed on: 15/06/2024 18:28

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HEMATOLOGY

Test Result Flag Unit Reference Range Methodology

COMPLETE BLOOD COUNT (CBC)

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

Sample Type : EDTA Whole Blood

End of Report



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

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

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Peshawar Medical Center LLC Reported 07/05/2024 19:40 Centre

IMMUNOLOGY

Result Flag Unit Methodology Test **Reference Range**

FERRITIN ng/mL 6 - 175 **ECLIA**

> Please note change. Source: Mayo Clinic Laboratories.

Interpretation Notes:

Interpretation:

Increased level is seen in haemochromatosis, porphyria, rheumatoid arthritis, liver disease, hyperthyroidism, adult stills disease, type 2 diabetes, leukemia, Hodgkins lymphoma, iron poisoning, in inflammation, frequent blood transfusion, alcohol abuse

Decreased level is seen in any Iron deficiency conditions such as heavy menstrual bleeding, pregnancy, not enough iron in the diet, or bleeding inside the intestinal tract (from ulcers, colon polyps, colon cancer, hemorrhoids, or other conditions).

Serum Sample Type:

End of Report

Dr. Vyoma V Shah **Dr. Adley Mark Fernandes** M.D (Pathology) M.D (Pathology) **Pathologist Clinical Pathologist**

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