



Laboratory Investigation Report

Mr. ZUBAIR SHOUKAT SHOUKAT Name

DOB 10/04/1995 Age / Gender 29 Y / Male

Referred by DR. HUMAIRA MUMTAZ CITICARE MEDICAL CENTER Centre

Ref No.

Sample No. 2501525595

Collected

14/01/2025 16:00 15/01/2025 17:08

Registered Reported

15/01/2025 18:25

BIOCHEMISTRY

Result Unit Test Flag **Reference Range** Methodology **C-REACTIVE PROTEIN (CRP)** < 5.0 Particle-enhanced 16.7 CH mg/L

Source: Roche IFU.

Please note change. immunoturbidimetric assay

INTERPRETATION NOTES:

- 1. CRP measurements are used as aid in diagnosis, monitoring, prognosis, and management of suspected inflammatory disorders and associated diseases, acute infections and tissue injury.
- C-reactive protein is the classic acute phase protein in inflammatory reactions.
- CRP is the most sensitive of the acute phase reactants and its concentration increases rapidly during inflammatory processes. The CRP response frequently precedes clinical symptoms, including fever. After onset of an acute phase response, the serum CRP concentration rises rapidly and extensively. The increase begins within 6 to 12 hours and the peak value is reached within 24 to 48 hours. Levels above 100 mg/L are associated with severe stimuli such as major trauma and severe infection (sepsis).
- 4. CRP response may be less pronounced in patients suffering from liver disease.
- 5. CRP assays are used to detect systemic inflammatory processes (apart from certain types of inflammation such as systemic lupus erythematosus (SLE) and Colitis ulcerosa); to assess treatment of bacterial infections with antibiotics; to detect intrauterine infections with concomitant premature amniorrhexis; to differentiate between active and inactive forms of disease with concurrent infection, e.g. in patients suffering from SLE or Colitis ulcerosa; to therapeutically monitor rheumatic disease and assess anti-inflammatory therapy; to determine the presence of post-operative complications at an early stage, such as infected wounds, thrombosis and pneumonia, and to distinguish between infection and bone marrow transplant rejection.

Serum Sample Type:

End of Report

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

P.O Box: 49527

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

This is an electronically authenticated report

Dubai, UAE

ACCREDITED

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.



Page 1 of 3

Tel: +971 4 398 8567

HARSHAD MANIKANDAN Laboratory Technician

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2501525595

BML513056

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Centre : CITICARE MEDICAL CENTER

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HEMATOLOGY				
Test	Result Flag	Unit	Reference Range	Methodology
COMPLETE BLOOD COUNT (CBC)				
HEMOGLOBIN	17.1	g/dL	13.5 - 17.5	Photometric
RBC COUNT	5.6	10^6/μL	4.3 - 5.7	Electrical Impedance
HEMATOCRIT	49.1	%	38 - 50	Calculation
MCV	87.9	fL	82 - 98	Calculation
МСН	30.7	pg	27 - 32	Calculation
мснс	34.9	g/dL	32 - 37	Calculation
RDW	13.9	%	11.8 - 15.6	Calculation
RDW-SD	42.4	fL		Calculation
MPV	10.2	fL	7.6 - 10.8	Calculation
PLATELET COUNT	273	10^3/uL	150 - 450	Electrical Impedance
РСТ	0.3	%	0.01 - 9.99	Calculation
PDW	18.7	Not Applicable	0.1 - 99.9	Calculation
NUCLEATED RBC (NRBC)^	0.2	/100 WBC		VCS 360 Technology
ABSOLUTE NRBC COUNTA	0.02	10^3/uL		Calculation
EARLY GRANULOCYTE COUNT (EGC)^	0.2	%		VCS 360 Technology
ABSOLUTE EGC^	0.0	10^3/uL		Calculation
WBC COUNT	9.2	10^3/μL	4 - 11	Electrical Impedance
DIFFERENTIAL COUNT (DC)				
NEUTROPHILS	68	%	40 - 75	VCS 360 Technology
LYMPHOCYTES	26	%	20 - 45	VCS 360 Technology
EOSINOPHILS	2	%	0 - 6	VCS 360 Technology
MONOCYTES	4	%	1 - 6	VCS 360 Technology
BASOPHILS	0	%	0 - 1	VCS 360 Technology
ABSOLUTE COUNT				
ABSOLUTE NEUTROPHIL COUNT	6.2	10^3/uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	2.0	10^3/uL	0.8 - 4.95	Calculation
ABSOLUTE MONOCYTE COUNT	0.4	10^3/uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	0.2	10^3/uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0.0	10^3/uL	0 - 0.11	Calculation

Gome V. Shah

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

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MOHAMMED RASHID CHENANGADATH

Laboratory Technologist
Printed on: 15/01/2025 18:28

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HEMATOLOGY

Result Flag Unit **Reference Range** Methodology **Test**

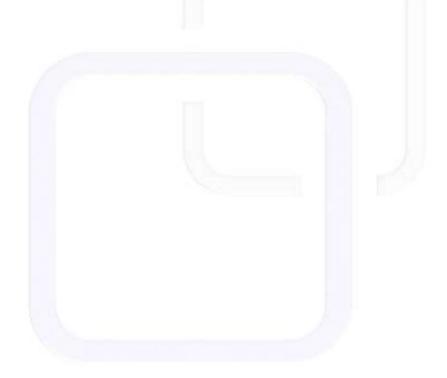
COMPLETE BLOOD COUNT (CBC)

INTERPRETATION NOTES:

Please note update on CBC report format, reference ranges and method(Beckman Coulter).

EDTA Whole Blood Sample Type:

End of Report



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