

LABORATORY REPORT

Name : **SHAHUL HAMEED MUSTHAFA** File. No. : **AAL02-432834**
DOB/Gender : **15-07-1998 (26 Yrs 8 Month 14 Days/Male)** Referral Doctor : **Dr. Humaira Mumtaz**
Lab No. : **22250690174** Referral Clinic : **Citicare Medical Center LLC**
Request Date : **10-03-2025 14:01:15** Clinic File No : **39071**
Insurance : **NATIONAL GENERAL INSURANCE (HEALTHNET)**

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	5.23	10 ¹² /L	4.50 - 5.50	Hydrodynamic focusing (DC Detection)
Haemoglobin	15.0	g/dl	13.0 - 17.0	Photometry-SLS
HCT	43.8	%	40.0 - 50.0	Hydrodynamic focusing (HF)
MCV	83.7	fl	83.0 - 101.0	Calculation
MCH	28.7	pg	27-32	Calculation
MCHC	34.2	g/dL	31.5 - 34.5	Calculation
Platelet Count	236	10 ³ /uL	150 - 400	HF (DCD)
WBC	4.09	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	66.5	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	15.6 ^L	%	20.0 - 40.0	Flow Cytometry
Monocytes	12.5 ^H	%	2.0-10.0	Flow Cytometry
Eosinophils	4.2	%	1 - 6	Flow Cytometry
Basophils	1.2	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
<u>DIFFERENTIAL COUNT (ABSOLUTE)</u>				
Neutrophils (Absolute)	2.72	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	0.64 ^L	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.51	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.17	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

Remarks:

Test result to be interpreted in the light of clinical history and to be investigated further if necessary.

Sample Type : EDTA WB

These tests are accredited under ISO 15189:2022 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

Patient Sample Collected On : 09-03-2025 19:15:00
Authenticated On : 10-03-2025 16:00:06

Received On : 10-03-2025 14:07:00
Released On : 10-03-2025 16:25:54

Pring

Padmapriya Kumareshan
Sr. Technician
DHA-P-2992011

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Lab No.	: 22250690174	Referral Clinic	: Citicare Medical Center LLC
Request Date	: 10-03-2025 14:01:15	Clinic File No	: 39071
Insurance	: NATIONAL GENERAL INSURANCE (HEALTHNET)		

CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
C-Reactive Protein (CRP)	<0.60	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

Sample Type : Serum

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

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