



Patient Name : Ms. AFSEEN SADIA Sample UID No. : 4100962

 Age / Gender
 : 36 Y / Female
 Sample Collected On : 25-07-2025 22:35

 Patient ID
 : QLD100723
 Registered On : 25-07-2025 22:35

 Referred By
 : Dr. AISHA
 Reported on : 26-07-2025 08:06

Referral Client : CITICARE MEDICAL CENTER External Patient ID : 47466
Emirates ID / Passport No : Print Version : V.1

Department of BIOCHEMISTRY

 Investigation
 Results
 Flag
 Units
 Biological Reference Interval
 Method

 * C-REACTIVE PROTEIN (CRP)
 1.4
 mg/L
 < 5</td>
 Particle enhanced immunoturbidimetric assay

Sample: Serum Comments:

CLINICAL IMPLICATIONS:

- 1. CRP is the most sensitive acute phase reactant that can increase dramatically (100-fold or more) after severe trauma, bacterial infection, inflammation, surgeryor neoplastic proliferation. CRP levels may predict future cardiovascular events and can be used as a screening tool.
- 2. The traditional test of CRP has added significance over the elevated ESR, which may be influenced by altered physiologic states. CRP tends to increase before rises in antibody titres and ESR level occurs. CRP levels also tend to decrease sooner than ESR levels.
- 3. The traditional test for CRP is elevated in rheumatic fever, RA, myocardial infarction, malignancy, bacterial and viral infections. The positive test indicates active inflammation but not its cause. In RA, the traditional test for CRP becomes negative with successful treatment and indicates that the inflammation has subsided.
- 4.High sensitive measurement of CRP (hs-CRP) are useful in assessing vascular inflammation and cardiovascular stratification. A single test for hs-CRP may not reflect an individual patient basal hs-CRP level, therefore follow up tests or serial measurements may be required in patients presenting with increased hs-CRP levels.

INTERFERING FACTORS: Haemolysed or lipemic sample may alter the results.

REFERENCE:

- 1) Manual of Laboratory and Diagnostics -Frances Fischbach Marshall B. Dunning III [9th Edition]
- 2) Tietz clinical guide to Laboratory tests(Fourth edition) ALAN H.B.WU

Note:

"The analytes with asterix (*) symbol are non-accredited parameters.". "QLabs compliance with ISO 15189:2022 standards"

Maqsood Rahman Lab Technologist

DHA No:48036476-001



Dr. Vidhya Mohan Specialist Clinical Pathologist Clinical Pathologist DHA No. 23553203-004 Dr. Dheepa Manoharan Medical Director Specialist Microbiologist

DHA No. 00231751-004

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Department of CLINICAL PATHOLOGY

COMPREHENSIVE URINE ANALYSIS

<u>Investigation</u>	<u>Results</u>	<u>Flag</u>	<u>Units</u>	Biological Reference Interval	<u>Method</u>				
Sample: URINE MACROSCOPIC EXAMINATION									
COLOR	Pale yellow			Pale to Dark Yellow	Colorimetric				
APPEARANCE	Clear			-	Turbidometric Method				
CHEMISTRY EXAMINATION									
SPECIFIC GRAVITY	1.005			1.002 - 1.035	Reflectance photometry				
рН	7			4.5 - 8	Reflectance photometry				
PROTEIN	Neg.			Negative	Reflectance photometry				
GLUCOSE	Neg.			Negative	Reflectance photometry				
KETONE	Neg.			Negative	Reflectance photometry				
UROBILINOGEN	Norm.			Negative	Reflectance photometry				
BILIRUBIN	Neg.			Negative	Reflectance photometry				
BLOOD	Trace			Negative	Reflectance photometry				
LEUCOCYTES	2+	н		Negative	Reflectance photometry				
MICROSCOPIC EXAMINATION									
NITRATE	Neg.			NEGATIVE	Reflectance photometry				
PUS CELLS	Trace		/HPF	0 - 5	Microscopy				
RBC	Few		/HPF	0 - 3	Microscopy				
NRBC	Nil		/HPF	0 - 3	Microscopy				
DRBC	Nil		/HPF	0 - 3	Microscopy				
RBC CLUMP	Nil		/HPF	0 - 3	Microscopy				
SQUAMOUS EPITHELIAL CELLS	Few		/HPF	0 - 5	Microscopy				
OTHER EPITHELIAL CELLS	Nil		/HPF	0 - 5	Microscopy				

"QLabs compliance with ISO 15189:2022 standards"

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Mohammed Jahfar Kuttikkattil Lab Technologist

DHA No:05143389-001



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Dr. Dheepa Manoharan Medical Director Specialist Microbiologist DHA No. 00231751-004

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BACTERIA	Nil		/HPF	0 - 5	Microscopy
BACTERIA CLUMP	Nil		/HPF	0 - 5	Microscopy
BACTERIA RODS	Nil		/HPF	0 - 5	Microscopy
BACTERIA COCCI	Nil		/HPF	0 - 5	Microscopy
HYALINE CAST	Nil		/HPF	NIL	Microscopy
PATHOLOGICAL CAST	Nil		/HPF	NIL	Microscopy
GRANULAR CAST	Nil		/HPF	NIL	Microscopy
CELLULAR CAST	Nil		/HPF	NIL	Microscopy
WAXY CAST	Nil		/HPF	NIL	Microscopy
RBC CAST	Nil		/HPF	NIL	Microscopy
WBC CAST	Nil		/HPF	NIL	Microscopy
FACT	Nil		/HPF	NIL	Microscopy
CALCIUM OXALATE CRYSTALS	Nil		/HPF	NIL	Microscopy
MONOHYDRATE CALCIUM CRYSTALS	Few		/HPF	NIL	Microscopy
TRIPLE PHOSPHATE CRYSTALS	Nil		/HPF	NIL	Microscopy
URIC ACID CRYSTALS	Nil		/HPF	NIL	Microscopy
OTHER SMALL CRYSTALS	Nil		/HPF	NIL	Microscopy
CALCIUM PHOSPHATE CRYSTALS	Nil		/HPF	NIL	Microscopy
LEUCINE CRYSTALS	Nil		/HPF	NIL	Microscopy
CYSTINE CRYSTALS	Nil		/HPF	NIL	Microscopy
TYROSINE CRYSTALS	Nil		/HPF	NIL	Microscopy
AMORPHOUS CRYSTALS	Few		/HPF	NIL	Microscopy

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Mohammed Jahfar Kuttikkattil Lab Technologist

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CHOLESTEROL CRYSTALS	Nil		/HPF	NIL	Microscopy
FAT	Nil		/HPF	NIL	Microscopy
MUCUS	Nil		/HPF	NIL	Microscopy
YEAST	Nil		/HPF	NIL	Microscopy
UNCLASSIFIED	Nil		/HPF	NIL	Microscopy
OTHERS	Nil		/HPF	NIL	Microscopy

- END OF REPORT -

"QLabs compliance with ISO 15189:2022 standards"

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Mohammed Jahfar Kuttikkattil Lab Technologist

DHA No:05143389-001



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