

Tel: 971 4 398 8567 www.biosytech.com

Ms. PUPUT ADI CANDRA

PID NO: 37008

Age: 22 Years Sex: Female

DOB: 03-Jan-2003

Referred Client:

CITICARE MEDICAL CENTER

Reference: Dr. AISHA UMER

Unit G03, Al Barsha South Bldg, Al Barhsa South

Third, Dubai

VID: 5080106444

Collected on:

Registered on: 21-Aug-2025 04:21 PM

Reported on:

Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
LYMPHOCYTES	27	%	30 - 60

Abnormal Result(s) Summary End

This is an Electronically Authenticated Report.

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 unless specified by (*).

Test marked with # is performed in an accredited referral laboratory.

Printed on:





Ms. PUPUT ADI CANDRA

PID NO: 37008

Age: 22 Years Sex: Female

DOB: 03-Jan-2003

Reference: Dr. AISHA UMER

Referred Client:

CITICARE MEDICAL CENTER

Unit G03, Al Barsha South Bldg, Al Barhsa South

Third, Dubai

VID: 5080106444

Collected on:

20-Aug-2025 07:51 PM

Registered on:

21-Aug-2025 04:21 PM

Reported on:

21-Aug-2025 05:07 PM

<u>Investigation</u>	Observed Value	Flag	<u>Unit</u>	Biological Reference Interval Method	
COMPLETE BLOOD COUNT (CBC)					
HEMOGLOBIN	12.5		g/dL	12 - 15.5	Photometric
RBC COUNT	4.4		10^6/μL	3.9 - 5	Electrical Impedance
HEMATOCRIT	37.3		%	35 - 45	Calculation
MCV	84.9		fL	82 - 98	Calculation
МСН	28.5		pg	27 - 32	Calculation
МСНС	33.6		g/dL	32 - 37	Calculation
* RDW	13.1		%	11.9 - 15.5	Calculation
* RDW-SD	38.90		fL		Calculation
MPV	10.1		fL	7.6 - 10.8	Calculation
PLATELET COUNT	196		10^3/uL	150 - 450	Electrical Impedance
* NUCLEATED RBC (NRBC)	0.30		/100 WBC		VCS 360 Technology
* ABSOLUTE NRBC COUNT	0.02		10^3/uL		Calculation
TOTAL & DIFFERENTIAL COUNT (DC)					
WBC COUNT	5.8		10^3/μL	4 - 11	Electrical Impedance
NEUTROPHILS	68		%	40 - 75	VCS 360 Technology
LYMPHOCYTES	27	L	%	30 - 60	VCS 360 Technology
EOSINOPHILS	0		%	0 - 6	VCS 360 Technology
MONOCYTES	5		%	1 - 6	VCS 360 Technology
BASOPHILS	0		%	0 - 1	VCS 360 Technology
ABSOLUTE COUNT					
ABSOLUTE NEUTROPHIL COUNT	3.94		10^3/uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	1.57		10^3/uL	1.2 - 6.6	Calculation
ABSOLUTE MONOCYTE COUNT	0.29		10^3/uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	0		10^3/uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0		10^3/uL	0 - 0.11	Calculation

DR. ADLEY MARK FERNANDES

Sample Type: EDTA Whole Blood

DR. VYOMA SHAH M.D (Pathology) M.D (Pathology) **Pathologist Clinical Pathologist**

This is an Electronically Authenticated Report.

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 unless specified by (*). Test marked with # is performed in an accredited referral laboratory.

ayana V. Shah



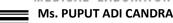


SHAMAL H M









PID NO: 37008

Age: 22 Years Sex: Female

DOB: 03-Jan-2003

Reference: Dr. AISHA UMER

Referred Client:

CITICARE MEDICAL CENTER

Unit G03, Al Barsha South Bldg, Al Barhsa South

Third, Dubai

VID: 5080106444

Tel: 971 4 398 8567 www.biosytech.com

Collected on:

20-Aug-2025 07:51 PM

Registered on :

21-Aug-2025 04:21 PM

Reported on :

21-Aug-2025 05:46 PM

<u>Investigation</u> <u>Observed Value</u> <u>Flag</u> <u>Unit</u> <u>Biological Reference Interval</u>

< 0.6

* C-REACTIVE PROTEIN (CRP)

(Serum, Particle-enhanced immunoturbidimetric assay)

mg/L < 5.0

Please note change.
Source: Roche IFU.

INTERPRETATION:

- 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).
- CRP response may be less pronounced in patients suffering from liver disease.
- 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."

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

DR. ADLEY MARK FERNANDES

M.D (Pathology) Pathologist DR. VYOMA SHAH M.D (Pathology) Clinical Pathologist

agena V. Shah

This is an Electronically Authenticated Report.

There were the

COLLEGE OF AMERICAN PATHOLOGIST

NAZAR ALI

Laboratory Technologist

مروحة الإسارات العالمي للعتماء Emirates International Accreditation Centre 1921 - 1997(19) 063



Test marked with # is performed in an accredited referral laboratory.

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 unless specified by (*).