

BML468921

Laboratory Investigation Report

Name : Mr. LIKITH NARAYANA NARAYANA
DOB : 08/10/1998
Age / Gender : 25 Y 11 M / Male
Referred by : DR HUMAIRA
Centre : CITICARE MEDICAL CENTER

Ref No. : 44225
Sample No. : 2409479308
Collected : 22/09/2024 12:39
Registered : 22/09/2024 17:00
Reported : 22/09/2024 20:22

CLINICAL PATHOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
URINE ANALYSIS (ROUTINE)					
COLOR	Yellow			Pale to Dark Yellow	Photometry
APPEARANCE	Clear			-	Turbidimetry
CHEMISTRY EXAMINATION					
SPECIFIC GRAVITY	1.025			1.002 - 1.035	Refractometry
PH	6			5 - 9	Litmus paper
GLUCOSE	Negative			Negative	GOD / POD
BLOOD	Negative			Negative	Peroxidase
PROTEIN	Negative			Negative	Protein error of pH indicator
LEUKOCYTE ESTERASE	Negative			Negative	Esterase
UROBILINOGEN	Negative			Negative	Diazonium Salt
BILIRUBIN	Negative			Negative	Diazonium Salt
KETONE	Negative			Negative	Legal's test
NITRITE	Negative			Negative	Griess test
MICROSCOPIC EXAMINATION					
LEUCOCYTES	1-4		/HPF	1 - 4	Automated Microscopy
ERYTHROCYTES	0-2		/HPF	0 - 2	Automated Microscopy
SQUAMOUS EPITHELIAL CELLS	0-1		/HPF	< 20	Automated Microscopy
NON-SQUAMOUS EPITHELIAL CELLS	-		/HPF	Variable	Automated Microscopy
BACTERIA	-		/HPF	Absent	Automated Microscopy
CASTS	-		/HPF	Absent	Automated Microscopy
HYALINE CAST	-		/HPF	Absent	Automated Microscopy
FINE GRANULAR CAST	-		/HPF	Absent	Automated Microscopy
COARSE GRANULAR CAST	-		/HPF	Absent	Automated Microscopy
WAXY CAST	-		/HPF	Absent	Automated Microscopy
FATTY CAST	-		/HPF	Absent	Automated Microscopy
RBC CAST	-		/HPF	Absent	Automated Microscopy
WBC CAST	-		/HPF	Absent	Automated Microscopy
BACTERIAL CAST	-		/HPF	Absent	Automated Microscopy
EPITHELIAL CAST	-		/HPF	Absent	Automated Microscopy
CRYSTALS	-		/HPF	Absent	Automated Microscopy


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Pathologist

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Reena Babu
Laboratory Technologist

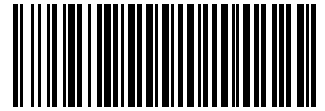
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CALCIUM OXALATE	-		/HPF	Absent	Automated Microscopy
CALCIUM CARBONATE	-		/HPF	Absent	Automated Microscopy
CALCIUM PHOSPHATE	-		/HPF	Absent	Automated Microscopy
TRIPLE PHOSPHATE	-		/HPF	Absent	Automated Microscopy
URIC ACID CRYSTAL	-		/HPF	Absent	Automated Microscopy
AMMONIUM BIURATE	-		/HPF	Absent	Automated Microscopy
AMORPHOUS URATES	-		/HPF	Absent	Automated Microscopy
AMORPHOUS PHOSPHATES	-		/HPF	Absent	Automated Microscopy
CYSTINE	-		/HPF	Absent	Automated Microscopy
LEUCINE	-		/HPF	Absent	Automated Microscopy
TYROSINE	-		/HPF	Absent	Automated Microscopy
DRUG CRYSTAL	-		/HPF	Absent	Automated Microscopy
MUCUS THREADS	Present		/HPF	Absent	Automated Microscopy
BUDDING YEAST CELLS	-		/HPF	Absent	Automated Microscopy
HYPHAE	-		/HPF	Absent	Automated Microscopy
OVA	-		/HPF	Absent	Automated Microscopy
CYST	-		/HPF	Absent	Automated Microscopy
PARASITE	-		/HPF	Absent	Automated Microscopy
ARTIFACTS	-		/HPF	Absent	Automated Microscopy

INTERPRETATION NOTES :

Please note change in method (Roche Cobas U6500).

Note: "-" means Absent

Sample Type : URINE

End of Report


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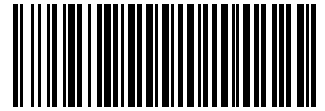
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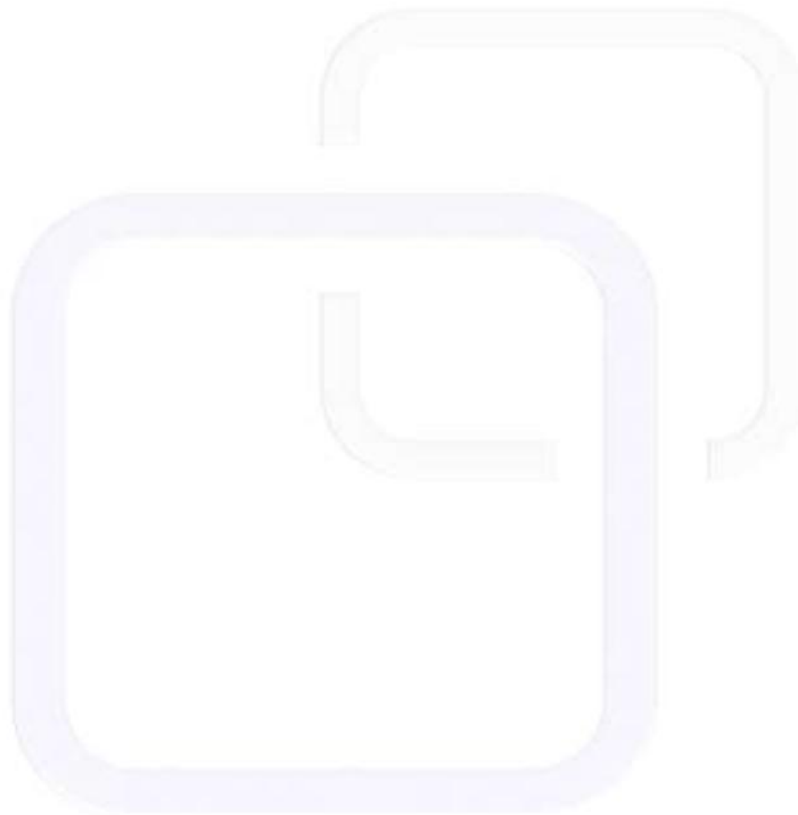
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CLINICAL PATHOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
E Histolytica antigen detection	NEGATIVE				Immunochromatography

Sample Type : Stool

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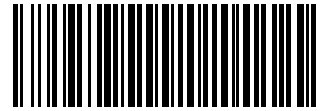
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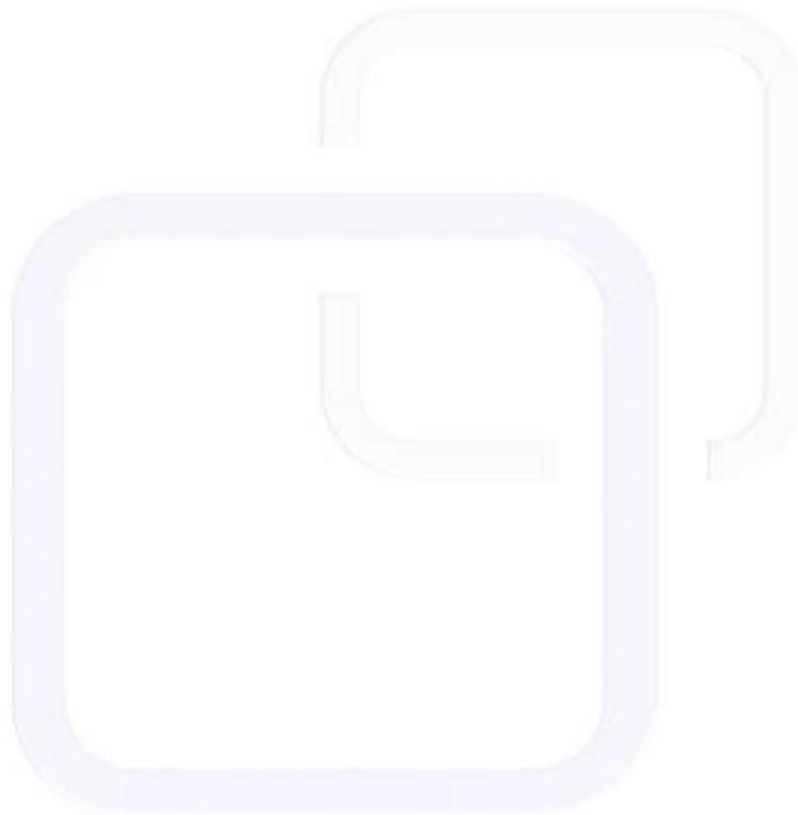
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CLINICAL PATHOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
GIARDIA ANTIGEN	Negative			Negative	Immunochromatography

Sample Type : Stool Sample

End of Report



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HEMATOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
COMPLETE BLOOD COUNT (CBC)					
HEMOGLOBIN	16.0		g/dL	13.5 - 17.5	Photometric
RBC COUNT	5.3		10 ⁶ /μL	4.3 - 5.7	Electrical Impedance
HEMATOCRIT	47		%	38 - 50	Calculation
MCV	88.6		fL	82 - 98	Calculation
MCH	30.2		pg	27 - 32	Calculation
MCHC	34		g/dL	32 - 37	Calculation
RDW	13.1		%	11.8 - 15.6	Calculation
RDW-SD	40.7		fL		Calculation
MPV	9.9		fL	7.6 - 10.8	Calculation
PLATELET COUNT	194		10 ³ /uL	150 - 450	Electrical Impedance
PCT	0.2		%	0.01 - 9.99	Calculation
PDW	17.2		Not Applicable	0.1 - 99.9	Calculation
NUCLEATED RBC (NRBC) [^]	0.2		/100 WBC		VCS 360 Technology
ABSOLUTE NRBC COUNT [^]	0.01		10 ³ /uL		Calculation
EARLY GRANULOCYTE COUNT (EGC) [^]	0.5		%		VCS 360 Technology
ABSOLUTE EGC [^]	0		10 ³ /uL		Calculation
WBC COUNT	7.2		10 ³ /μL	4 - 11	Electrical Impedance
DIFFERENTIAL COUNT (DC)					
NEUTROPHILS	44		%	40 - 75	VCS 360 Technology
LYMPHOCYTES	45		%	20 - 45	VCS 360 Technology
EOSINOPHILS	5		%	0 - 6	VCS 360 Technology
MONOCYTES	6		%	1 - 6	VCS 360 Technology
BASOPHILS	0		%	0 - 1	VCS 360 Technology
ABSOLUTE COUNT					
ABSOLUTE NEUTROPHIL COUNT	3.2		10 ³ /uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	3.3		10 ³ /uL	0.8 - 4.95	Calculation
ABSOLUTE MONOCYTE COUNT	0.4		10 ³ /uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	0.4		10 ³ /uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0.0		10 ³ /uL	0 - 0.11	Calculation

Vyoma V. Shah

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Mubasher

MUBASHER ZAHOOR
Laboratory Technologist

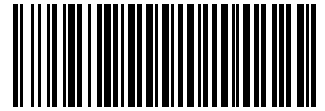
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HEMATOLOGY

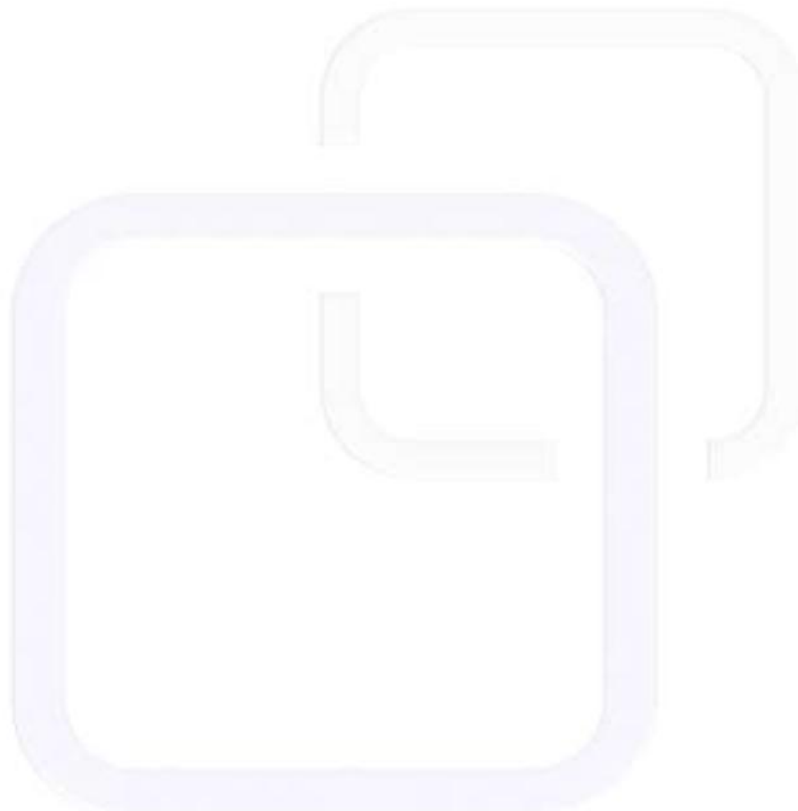
Test	Result	Flag	Unit	Reference Range	Methodology
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COMPLETE BLOOD COUNT (CBC)

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

Sample Type : EDTA Whole Blood

End of Report



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SEROLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
RPR (RAPID PLASMA REAGEN)	Non - reactive			Non-reactive	Carbon flocculation

INTERPRETATION NOTES :

Syphilis is a disease caused by infection with the spirochete *Treponema pallidum*. The infection is systemic and the disease is characterized by periods of latency.

Patients with primary or secondary syphilis should be reexamined clinically and serologically 6 months and 12 months following treatment. Typically, rapid plasma reagin (RPR) titers decrease following successful treatment, but this may occur over a period of months to years.

Biological false-positive reactions with cardiolipin-type antigens have been reported in disease such as infectious mononucleosis, leprosy, malaria, lupus erythematosus, vaccinia, and viral pneumonia. Pregnancy, autoimmune diseases, and narcotic addictions may give false-positives. Pinta, yaws, bejel, and other treponemal diseases may also produce false-positive results with this test.

False negatives tend to be more common in the initial and end stages of infection. Among people who are in the secondary (middle) stage of infection, the RPR test result is nearly always positive. (Interpretation added on 28 Dec 2019).

Sample Type : Serum

End of Report

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Nazar Mohamed Ali
NAZAR MOHAMED ALI
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