LABORATORY REPORT

Name	: **HAMNA SHOUKAT SHOUKAT ALI**	File. No.	: **AAL02-417086**
DOB/Gender	: **27-05-2002 (22 Yrs 4 Month 5 Days/Female)**	Referral Doctor	: **Dr. Mohammed M Hamed Hashish**
Lab No.	: **22242730200**	Referral Clinic	: **Citicare Medical Center LLC**
Request Date	: **29-09-2024 15:48:23**	Clinic File No	: **4338**
Insurance	: **NAS ADMINISTRATION SERVICES LTD**		

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL				
RBC	4.74	10^12/L	3.80 - 4.80	Hydrodynamic focusing (DC Detection)
Haemoglobin	**10.4** L	g/dl	12.0 - 15.0	Photometry-SLS
HCT	**33.0** L	%	36.0 - 46.0	Hydrodynamic focusing (HF)
MCV	**69.6** L	fl	83.0 - 101.0	Calculation
MCH	**21.9** L	pg	27-32	Calculation
MCHC	31.5	g/dL	31.5 - 34.5	Calculation
Platelet Count	246	10^3/uL	150-400	HF (DCD)
WBC	8.25	10^3/uL	4.00 - 10.00	Flow Cytometry
DIFFERENTIAL COUNT (%)				
Neutrophils	53.9	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	37.7	%	20.0 - 40.0	Flow Cytometry
Monocytes	5.6	%	2-10	Flow Cytometry
Eosinophils	1.8	%	1 - 6	Flow Cytometry
Basophils	1.0	%	<1-2	Flow Cytometry
Band Forms	0.0	%	< 6	Flow Cytometry
DIFFERENTIAL COUNT (ABSOLUTE)				
Neutrophils (Absolute)	4.45	10^3/uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	**3.11** H	10^3/uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.46	10^3/uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.15	10^3/uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.08	10^3/uL	0.02 - 0.10	Calculation
Band Forms (Absolute)	0.00	10^3/uL	< 0.66	Calculation

Remarks:
Recommended to do peripheral smear, iron studies and thalassemia screening.
Test result to be interpreted in the light of clinical history and to be investigated further if necessary.

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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 : 29-09-2024 21:30:00
Authenticated On : 29-09-2024 18:45:21
Received On : 29-09-2024 15:50:00
Released On : 29-09-2024 19:11:28

Wasik Hasan Tisekar
Laboratory Technician
DHA-P-0039673

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Test Name	Result	Units	Ref. Range	Method

Sample Type : EDTA WB

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IMMUNOLOGY/SEROLOGY/INFECTIOUS DISEASES

Test Name	Result	Units	Ref. Range	Method
HIV I & II Abs + p24 Ag	0.22	Cutoff Index (COI)	Non Reactive: <1.0 Reactive: >=1.0	ECLIA
HIV Interpretation	Non-Reactive		Non-Reactive	

Kindly note above test is just a screening test.

Note: Patients at a very early stage of infection may still be non-reactive for HIV Abs or detect p24 antigen. If HIV is suspected, a control sample is recommended in 4-6 weeks.

Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration.

Please note Reference Range Reviewed w.ef 15/10/23

RPR (Syphilis Screen)	Non-Reactive	Titer	Non-Reactive	Carbon Agglutination

•This is a screening test for syphilis .Reactive RPR test specimens should be tested with further serological test. (i.e TPHA and FTA-abs), as with any serological procedure ,the diagnosis should not be made on a single reactive result.

•Conversely, a Non-Reactive result by itself does not rule out the diagnosis of syphilis. A diagnosis should always be made in conjunction with clinical findings.

•Biological false positive reactions have been reported in diseases such as infectious mononucleosis, viral pneumonia and toxoplasmosis, pregnancy and autoimmune diseases. This test is useful in determining the effectiveness of antibiotic therapy.

Sample Type : Serum

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HORMONES/ENDOCRINE/TUMOR MARKERS

Test Name	Result	Units	Ref. Range	Method
TSH (Thyroid Stimulating Hormone)	**4.7400** H	µIU/mL	0.27-4.20 Pregnancy: 1st Trimester: 0.33 - 4.59 2nd Trimester: 0.35 - 4.10 3rd Trimester: 0.21 - 3.15	ECLIA

Conversion Formula: (Concentration in IU/ mL) x (1.0) = mIU/L. The determination of TSH serves as the initial test in thyroid diagnostics.Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. Please note Reference Range Reviewed w.ef 15/10/23 .

Remarks:

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

Sample Type : Serum

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

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