

LABORATORY REPORT

Name : **SUNIL RAJBHAR GHAR BHARAN RAJBHAR** File. No. : **AAL02-1309915**
DOB/Gender : **05-06-1988 (36 Yrs 11 Month 12 Days/Male)** Referral Doctor : **Dr. Farhan Ilyas Malik**
Lab No. : **22251370098** Referral Clinic : **Citicare Medical Center LLC**
Request Date : **17-05-2025 13:15:35** Clinic File No : **46876**
Insurance : **NAS ADMINISTRATION SERVICES LTD**

HAEMATOLOGY & COAGULATION

Test Name	Result	Units	Ref. Range	Method
<u>COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL</u>				
RBC	4.83	10 ¹² /L	4.50 - 5.50	Hydrodynamic focusing (DC Detection)
Haemoglobin	15.6	g/dl	13.0 - 17.0	Photometry-SLS
HCT	42.3	%	40.0 - 50.0	Hydrodynamic focusing (HF)
MCV	87.6	fl	83.0 - 101.0	Calculation
MCH	32.3^H	pg	27-32	Calculation
MCHC	36.9^H	g/dL	31.5 - 34.5	Calculation
Platelet Count	194	10 ³ /uL	150 - 400	HF (DCD)
WBC	8.50	10 ³ /uL	4.00 - 10.00	Flow Cytometry
<u>DIFFERENTIAL COUNT (%)</u>				
Neutrophils	41.0	%	40.0 - 80.0	Flow Cytometry
Lymphocytes	44.8^H	%	20.0 - 40.0	Flow Cytometry
Monocytes	8.4	%	2.0-10.0	Flow Cytometry
Eosinophils	5.4	%	1 - 6	Flow Cytometry
Basophils	0.4	%	<1-2	Flow Cytometry
<u>DIFFERENTIAL COUNT (ABSOLUTE)</u>				
Neutrophils (Absolute)	3.49	10 ³ /uL	2.00 - 7.00	Calculation
Lymphocytes (Absolute)	3.81^H	10 ³ /uL	1.00 - 3.00	Calculation
Monocytes (Absolute)	0.71	10 ³ /uL	0.20 - 1.00	Calculation
Eosinophils (Absolute)	0.46	10 ³ /uL	0.02 - 0.50	Calculation
Basophils (Absolute)	0.03	10 ³ /uL	0.02 - 0.10	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 pertain 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 : 17-05-2025 09:58:00
Authenticated On : 17-05-2025 14:52:41

Received On : 17-05-2025 13:17:00
Released On : 17-05-2025 15:38:12

Wasik

Wasik Hasan Tisekar
Laboratory Technician
DHA-P-0039673

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CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
C-Reactive Protein (CRP)	6.20^H	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

Remarks:

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

Sample Type : Serum

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IMMUNOLOGY/SEROLOGY/INFECTIOUS DISEASES

Test Name	Result	Units	Ref. Range	Method
<u>WIDAL TEST</u>				
Salmonella typhi H	<1:80	Titer	Negative < 1:80	Agglutination
Salmonella H paratyphi A - AH	< 1:80	Titre	Negative < 1:80	Agglutination
Salmonella H paratyphi B - BH	< 1:80	Titre	Negative < 1:80	Agglutination
Salmonella H paratyphi C - CH	< 1:80	Titer	Negative < 1:80	Agglutination
Salmonella typhi (O)	<1:80	Titer	Negative < 1:80	Agglutination
Salmonella O paratyphi A - AO	< 1:80	Titer	Negative < 1:80	Agglutination
Salmonella O paratyphi B - BO	< 1:80	Titer	Negative < 1:80	Agglutination
Salmonella O paratyphi C - CO	< 1:80	Titer	Negative < 1:80	Agglutination

•It has been found that many serotypes of Salmonella possess somatic antigens of the same kind. Therefore, agglutination of any of the Salmonella antigens with human serum should not be taken as proof of infection by one particular organism, but rather infection by an organism of a like antigenic structure.

•Test should be read after the recommended incubation time to eliminate the possibility of false results.

•Many populations or communities can show high levels of residual antibodies often in excess of 1/180-1/160. Patients can also show high level of residual antibodies from previous infections or immunization.

•For a test to be of clinical significance a rise in titre must be demonstrated not just a high titre for a one off test. Chronic liver disease has also shown to cause a rise in Salmonella antibody titre.

Sample Type : Serum

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

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