



Kamal Diagnostic Center

Patient Name:	Mrs. Dummy	Registered on:	11/08/2022 02:39 PM
Age / Sex:	34 YRS / F	Collected on:	11/08/2022 02:57 PM
Referred By:	Dr. Self	Received on:	11/08/2022 02:57 PM
Reg. no. / UHID:	1015 /	Reported on:	11/08/2022 06:39 PM
Investigations:	Pregnancy Profile - 3		



1015

HAEMATOLOGY

COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Hemoglobin	L 10.0	g/dl	12 - 15
Total Leukocyte Count	H 12,000	cumm	4,000 - 11,000
Differential Leucocyte Count			
Neutrophils	55	%	40 - 80
Lymphocyte	40	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	03	%	2 - 10
Basophils		%	< 2
Platelet Count	3.1	lakhs/cumm	1.5 - 4.5
Total RBC Count	4.1	million/cumm	3.9 - 4.8
Hematocrit Value, Hct	39	%	36 - 46
Mean Corpuscular Volume, MCV	95.1	fL	83 - 101
Mean Cell Haemoglobin, MCH	L 24.4	Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC	L 25.6	%	31.5 - 34.5
Mean Platelet Volume, MPV	8	fL	6.5 - 12
R.D.W. - SD	41	fL	39 - 46
R.D.W. - CV	12	%	11.6 - 14
P-LCR	22.3	%	19.7 - 42.4
P.D.W.	H 18.5	fL	9.6 - 15.2

TEST	VALUE	UNIT	REFERENCE
Blood Group & Rh.			
ABO	B		
Rh (ANTI -D)	POSITIVE		

Mr. Sachin Sharma
DMLT, Lab Incharge



Dr. A. K. Asthana
MBBS, MD Pathologist



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BIOCHEMISTRY

TEST	VALUE	UNIT	REFERENCE
Serum Creatinine	0.7	mg/dl	0.5 - 0.8
Random Blood Sugar	99	mg/dl	60 - 160

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SEROLOGY & IMMUNOLOGY

TEST	VALUE	UNIT	REFERENCE
HIV (Card Test)			
HIV - 1	NEGATIVE		
HIV - 2	NEGATIVE		

1. A negative result implies that no Anti HIV – 1 & HIV - 2 antibodies have been detected in the sample by this method. This means that either the patient has not been exposed to HIV-1 or HIV-2 infection or the sample has been tested during the "WINDOW PHASE" (before the development of detectable levels of antibodies).
2. A positive result suggests the possibilities of HIV-I and / or HIV-II infection. However these results must be verified by a confirmatory test (IFA / WESTERN BLOT I-II) before pronouncing the patient positive for HIV-1 and / or HIV-2 infection.

Hepatitis C Virus, HCV	NEGATIVE
VDRL	NON-REACTIVE

LIMITATION:

1. The test described here is primarily valid as a screening procedure. It advisable to confirm positive sample with other methods employing specific treponemal antigen e.g tpha, ftaabs etc.
2. This method may give false positive result in presence of disease such as leprosy, malaria, toxoplasma, infectious mononucleosis or lupus erythematosus.

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CLINICAL PATHOLOGY

TEST	VALUE	UNIT	REFERENCE
Urine Routine Examination			
Physical Examination			
Quantity	18	ml	
Colour	Pale Yellow		Pale Yellow
Transparency	Clear		Clear
Specific Gravity	1.020		1.005 - 1.03
pH	6		5 - 7
Leukocytes	Present (+)		Absent
Blood	Present (++)		Absent
Chemical Examination			
Protein / Albumin	Present (+++)		Absent
Sugar / Glucose	Present (++++)		Absent
Ketone Bodies	Absent		Absent
Bilirubin	Absent		Absent
Nitrite	Present (+)		Absent
Microscopic Examination			
R.B.C.	Absent	/HPF	Absent
Pus Cells	Absent	/HPF	Absent
Epithelial Cells	Absent	/HPF	Absent
Casts	Absent		Absent
Crystals	Absent		
Bacteria	Absent		Absent
Others	Absent		

~~~ End of report ~~~

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