

## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs Sudha Kumari MRN : 10110000056307 Gender/Age : FEMALE , 41y (05/12/1981)

Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:29 PM

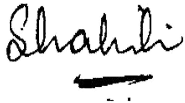
Barcode : 032305030063 Specimen : Urine Consultant : Dr. Gayathri Meganathan(OBSTETRICS & GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Fasting)</b> (Enzyme Method (GOD POD))	Not Present	-

--End of Report--



Dr. Shalini K S  
DCP, DNB, Pathology  
Consultant

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



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Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:44 PM

Barcode : 032305030063 Specimen : Urine Consultant : Dr. Gayathri Meganathan(OBSTETRICS &amp; GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY****PHYSICAL EXAMINATION**

Colour	Yellow	-	-
Appearance	Clear	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.005	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

**MICROSCOPIC EXAMINATION**

Pus Cells	0.1	/hpf	0-5
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Patient Name : Mrs Sudha Kumari MRN : 10110000056307 Gender/Age : FEMALE , 41y (05/12/1981)

RBC	0.1	/hpf	0-4
Epithelial Cells	0.5	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	6.1	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

#### Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

--End of Report--



Dr. Deepak M B  
MD, PDF, Hematopathology  
Consultant

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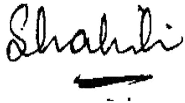
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DCP, DNB, Pathology  
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Patient Name : Mrs Sudha Kumari MRN : 10110000056307 Gender/Age : FEMALE , 41y (05/12/1981)

Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 12:05 PM Reported On : 03/05/2023 01:38 PM

Barcode : 1B2305030006 Specimen : Whole Blood Consultant : Dr. Gayathri Meganathan(OBSTETRICS & GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	B	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report--

Dr. Prathip Kumar B R  
MBBS,MD, Immunohaematology & Blood Transfusion  
Consultant

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Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:27 PM

Barcode : 022305030341 Specimen : Whole Blood Consultant : Dr. Gayathri Meganathan(OBSTETRICS &amp; GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

## HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
<strong>COMPLETE BLOOD COUNT (CBC)</strong>			
Haemoglobin (Hb%) (Photometric Measurement)	12.8	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.37	million/ $\mu$ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	37.0	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	84.5	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.2	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	<b>34.6 H</b>	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	<b>15.5 H</b>	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	152	$10^3/\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	7.3	$10^3/\mu$ L	4.0-10.0
<strong>DIFFERENTIAL COUNT (DC)</strong>			
Neutrophils (VCS Technology Plus Microscopy)	63.8	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	28.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.5	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	2.2	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.4	%	0.0-2.0



Patient Name : Mrs Sudha Kumari MRN : 10110000056307 Gender/Age : FEMALE , 41y (05/12/1981)

Absolute Neutrophil Count (Calculated)	4.66	$\times 10^3$ cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.05	$\times 10^3$ cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.4	$\times 10^3$ cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.16	$\times 10^3$ cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### Interpretation Notes

- Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .  
RBC Indices aid in typing of anemia.  
WBC Count: If below reference range, susceptibility to infection.  
If above reference range- Infection\*  
If very high in lakhs-Leukemia  
Neutrophils -If above reference range-acute infection, mostly bacterial  
Lymphocytes -If above reference range-chronic infection/ viral infection  
Monocytes -If above reference range- TB,Typhoid,UTI  
Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms  
Basophils - If above reference range, Leukemia, allergy  
Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies  
\* In bacterial infection with fever total WBC count increases.  
Eg Tonsillitis,Sinusitis,Bronchitis,Pneumonia,Appendicitis,UTI -12000-25000 cells/cumm.  
In typhoid and viral fever WBC may be normal.  
**DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.**

--End of Report--



Dr. Deepak M B  
MD, PDF, Hematopathology  
Consultant

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Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:20 PM

Barcode : 012305030581 Specimen : Plasma Consultant : Dr. Gayathri Meganathan(OBSTETRICS & GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

### BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	91	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--

Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

#### Note

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- Kindly correlate clinically.  
(Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs Sudha Kumari MRN : 1011000056307 Gender/Age : FEMALE , 41y (05/12/1981)

Collected On : 03/05/2023 10:51 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:53 PM

Barcode : 012305031055 Specimen : Plasma Consultant : Dr. Gayathri Meganathan(OBSTETRICS & GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	110	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--

Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry

Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

Note

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  - Results relate to the sample only.
  - Kindly correlate clinically.
- (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



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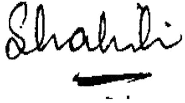
Barcode : 032305030161 Specimen : Urine Consultant : Dr. Gayathri Meganathan(OBSTETRICS & GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Post Prandial)</b> (Enzyme Method (GOD POD))	Not Present	-

--End of Report--



Dr. Shalini K S  
DCP, DNB, Pathology  
Consultant

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Collected On : 03/05/2023 08:15 AM Received On : 03/05/2023 11:57 AM Reported On : 03/05/2023 12:40 PM

Barcode : 012305030583 Specimen : Whole Blood Consultant : Dr. Gayathri Meganathan(OBSTETRICS &amp; GYNAECOLOGY)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9019676370

**BIOCHEMISTRY****Test Result Unit Biological Reference Interval****HbA1C**

HbA1c (HPLC NGSP Certified)	5.1	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
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Estimated Average Glucose (Calculated)	99.67	-	-
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**Interpretation:**

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

**--End of Report--**

Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

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MC-2688

