

**DEPARTMENT OF LABORATORY MEDICINE**

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)  
 Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:56 AM Reported On : 25/02/2023 12:10 PM  
 Barcode : 022302250358 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)  
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

**HEMATOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	12.5	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.27	million/ $\mu$ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	37.3	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	87.3	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.4	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	330	$10^3$ / $\mu$ L	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	7.4	$10^3$ / $\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCS Technology Plus Microscopy)	55.7	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	34.6	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	7.4	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	1.8	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.5	%	0.0-2.0

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Absolute Neutrophil Count (Calculated)	4.13	$\times 10^3$ cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.57	$\times 10^3$ cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.55	$\times 10^3$ cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.14	$\times 10^3$ cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.04	-	-

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--

Hema S

Dr. Hema S  
MD, DNB, Pathology  
Associate Consultant

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 12:08 PM Reported On : 25/02/2023 01:50 PM

Barcode : 1B2302250010 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

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

Note

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



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:56 AM Reported On : 25/02/2023 02:06 PM

Barcode : 022302250357 Specimen : Whole Blood - ESR Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

HEMATOLOGY

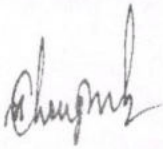
Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	9	mm/1hr	0.0-12.0

Interpretation Notes

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.

DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

--End of Report--



Dr. Sudarshan Chougule  
MBBS, MD, Pathology  
Consultant & Head - Hematology & Flow Cytometry

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:51 AM Reported On : 25/02/2023 12:16 PM

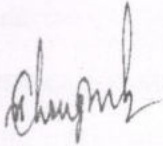
Barcode : 032302250069 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

CLINICAL PATHOLOGY

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

--End of Report--



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MBBS, MD, Pathology  
Consultant & Head - Hematology & Flow Cytometry

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Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:51 AM Reported On : 25/02/2023 12:47 PM

Barcode : 032302250069 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>URINE ROUTINE &amp; MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
Colour	Yellow	-	-
Appearance	Clear	-	-
<b>CHEMICAL EXAMINATION</b>			
pH(Reaction) (pH Indicator Method)	6.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.010	-	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
<b>MICROSCOPIC EXAMINATION</b>			
Pus Cells	0.3	/hpf	0-5

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RBC	0.3	/hpf	0-4
Epithelial Cells	0.9	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	25.2	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

--End of Report--

*Hema S*

Dr. Hema S  
 MD, DNB, Pathology  
 Associate Consultant

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 Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:56 AM Reported On : 25/02/2023 12:57 PM  
 Barcode : 012302250549 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)  
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

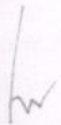
**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC NGSP Certified)	5.6	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	114.02		

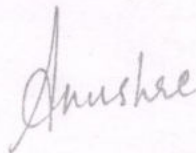
**Interpretation:**

- 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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- Kindly correlate clinically.





**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

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 Collected On : 25/02/2023 08:08 AM Received On : 25/02/2023 11:56 AM Reported On : 25/02/2023 12:36 PM  
 Barcode : 012302250548 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)  
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	92	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--

*Anushree*

Dr. Anushree Prasad  
 MBBS,MD, Biochemistry  
 Consultant Biochemistry

*L*

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

**Note**

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  - Results relate to the sample only.
  - Kindly correlate clinically.
- (Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 07:13 PM Received On : 25/02/2023 11:46 PM Reported On : 27/02/2023 03:39 PM

Barcode : 072302250040 Specimen : Smear Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

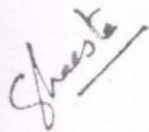
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

CYTOLOGY

PAP SMEAR

LAB No.	P-1339/23
MATERIAL RECEIVED	Received two unstained slides.
CLINICAL DETAILS	LMP 11-2-23 P/S, P/V Normal Screening pap smear
SPECIMEN TYPE	Conventional Smear
SMEAR ADEQUACY	Satisfactory for evaluation with presence of endocervical cell / transformation zone component.
GENERAL CATEGORIZATION	CERVICAL CYTOLOGY : PAP SMEAR REPORT - The 2014 Bethesda system . No epithelial cell abnormality seen No evidence of fungal organisms, trichomonas vaginalis, bacterial vaginosis or other epithelial abnormalities.
IMPRESSION	Smear is negative for intraepithelial lesion or malignancy.
REMARKS	Note: Cervical smear test is only a screening test for cervical carcinoma with inherent false negative results.

--End of Report--



Dr. Shaesta Naseem Zaidi  
MD, Pathology  
Consultant Histopathology

Page 1 of 2



Narayana Hrudayalaya Limited

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Priyanka Kola MRN : 20100000023966 Gender/Age : FEMALE , 33y (17/08/1989)

Collected On : 25/02/2023 10:08 AM Received On : 25/02/2023 11:47 AM Reported On : 25/02/2023 12:12 PM

Barcode : 032302250192 Specimen : Urine Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

CLINICAL PATHOLOGY

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

--End of Report--

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Corporate Office: 261/A, 2nd Floor, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

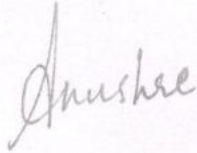
**DEPARTMENT OF LABORATORY MEDICINE**

Patient Name : Ms Priyanka Kola MRN : 2010000023966 Gender/Age : FEMALE , 33y (17/08/1989)  
Collected On : 25/02/2023 10:08 AM Received On : 25/02/2023 12:00 PM Reported On : 25/02/2023 12:39 PM  
Barcode : 012302251081 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)  
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9618091020

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	106	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--



Dr. Anushre Prasad  
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Consultant Biochemistry



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