



Dedicated to Excellence

# DHANDE PATHLAB DIAGNOSTICS PVT. LTD.

www.dhandepathlab.com  
www.dhandelab.com  
dhandepathlab@gmail.com

**LABORATORY & REGISTERED ADDRESS** : Chinar Apartments, Sheelavihar Colony, Opp. Paud Phata Police Station, Paud Road, Pune - 38. Phone : 2543 2950, 2545 9494, 2545 2020  
94030 85417, 80802 44202, 90492 34055  
Timing : 8.00 a.m. to 8.30 p.m. Sunday : 8.00 a.m. to 12.30 p.m.

**Dr. Nitin L. Dhande**  
M. D. (Path)  
Reg. No. 52301  
Add. Reg. No. 6398

**Dr. Ashish N. Dhande**  
M. D. (Path)  
Reg. No. 2014/04/1752  
Add. Reg. No. 3439/2017

Registration.Date : 17/06/2024  
**Patient Name** : MR. SIVARAMAKRISHNAN B.A.  
Age / Gender : 76 Yrs / Male  
Reference (Dr.) : Self  
Sample Collected : From Outside



Permanent ID No. : 270389  
Patient ID No. : 1204571  
Reg Date/Time : 17-06-2024 10:24am  
Sample Coll.Date/Time : 17-06-2024 00:00  
Report Date/Time : 17-06-2024 03:08pm

## HAEMOGRAM (CBC)

Investigation	Result	Units	Reference Range
Haemoglobin	: L 9.00	gm/dL	13.0 - 17.0
RBC Count	: L 2.91	mill/cu mm	4.5 - 6.5
Haematocrit (PCV)	: L 26.40	%	40 - 52
MCV (Mean Corpuscular Volume)	: 90.70	fL	83 - 101
MCH (Mean Corpuscular Hb)	: 30.90	pg	27 - 32
MCHC (Mean Corpuscular Hb Conc.)	: 34.10	gm/dL	32 - 36
RDW (Red cell Distribution Width)	: H 15.8	%	11.6 - 14.0
RBC Morphology	: Predominantly Normocytic Normochromic.		
<b>Total WBC (Leucocyte) Count</b>	: 8000	/cu mm	4,000 - 11,000
Neutrophils	: H 82	%	40 - 75
Lymphocytes	: L 12	%	20 - 40
Eosinophils	: 02	%	1 - 6
Monocytes	: 04	%	1 - 10
Basophils	: 00	%	0 - 2
Neutrophil/Lymphocyte ratio(N/L ratio) (Calculated)	: H 6.83	Ratio	1.05 - 2.67
Absolute Neutrophil Count	: 6560	/cu mm	2000 - 7000
Absolute Lymphocyte Count	: L 960	/cu mm	1000 - 3000
Absolute Eosinophil Count	: 160	/cu mm	20 - 500
Absolute Monocyte Count	: 320	/cu mm	200 - 1000
Absolute Basophil Count	: 0	/cu mm	0 - 100
<b>Platelet Count</b>	: 246000	/cu mm	1,50,000 - 4,50,000
MPV (Mean Platelet Volume)	: 9.1	fL	7.8 - 12.0
Platelet Remarks	: Adequate		
<b>PBS For Parasites</b>	: Malarial Parasites Not Seen		

EDTA Whole Blood - [Tests done on fully automated five part Haematology analyzer, XNL550, (Sysmex) BC-6800 Plus (Mindray). WBC, RBC, Platelet count by Impedance method, WBC Differential by Fluorescent Flowcytometry & other parameters are calculated.] Differential WBC count, Platelet Count are correlated microscopically. All abnormal Haemograms are reviewed and confirmed microscopically.



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## CRP (C REACTIVE PROTEIN)

<u>Investigation</u>	<u>Result</u>	<u>Units</u>	<u>Reference Range</u>
<b>C-Reactive Protein, Serum</b> <i>(Serum, Immuno-turbidimetric method)</i>	: H 56.56	mg/L	0 to 5

### COMMENTS:

1. C Reactive Protein (CRP) is the most sensitive acute phase reactant for inflammation.
2. The levels increase dramatically after severe trauma, bacterial infection, surgery & neoplastic proliferation.
3. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis.
4. It is used in inflammatory disorders for monitoring course and effect of therapy. It assesses response to antibiotic treatment and differentiates between active and inactive disease forms with concurrent infection.
5. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc.



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## BIOCHEMICAL TEST

Investigation	Result	Units	Reference Range
<b>Creatinine</b> <i>(Serum, Method: Modified Jaffe)</i>	: 1.19	mg/dL	0.60 - 1.30
<b>Total Proteins, Serum</b> <i>(Biuret Method)</i>	: 6.9	gms/dL	6.4 - 8.3
<b>Albumin, Serum</b> <i>(Bromocresol Green Method)</i>	: L 2.2	gms/dL	3.5 - 5.2
<b>Globulin, Serum</b> <i>(Calculated parameter)</i>	: H 4.70	gms/dL	1.8 - 3.9
<b>Iron, Serum</b> <i>(Method: Colorimetric assay)</i>	: L 40.40	mcg/dL	45 - 182 Please note the change in reference ranges
<b>TIBC (Total Iron Binding Capacity), Serum</b> <i>(Method: Ferrozine)</i>	: H 465.20	mcg/dL	255 - 450 Please note the change in reference range.

### COMMENTS:

1. Iron is an essential trace mineral element which forms an important component of hemoglobin, metallocompounds and Vitamin A. Deficiency of iron, leads to microcytic hypochromic anemia. The toxic effects of iron are deposition of iron in various organs of the body and hemochromatosis.
2. Total Iron Binding capacity (TIBC) is a direct measure of the protein Transferrin which transports iron from the gut to storage sites in the bone marrow. In iron deficiency anemia, serum iron is reduced and TIBC increases.



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## FREE LIGHT (LAMBDA) CHAINS (Blood)

<u>Investigation</u>	<u>Result</u>	<u>Units</u>	<u>Reference Range</u>
<b>Free Light(Lambda) Chains</b> (Serum, Nephelometry)	: 92.10		

--End Of Report--



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