

Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No/UHID
MaxID/Lab ID	Collection Date/Time
Ref Doctor	Reporting Date/Time



Test Name	Result	Unit	Bio Ref Interval
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Allergy Eczema Profile, Serum*

FEIA

Egg White, (f1) Fluoroenzyme Immunoassay	0.00	KUA/L	< 0.34
Milk, (f2) Fluoroenzyme Immunoassay	0.07	KUA/L	< 0.34
Fish (Cod), (f3) Fluoroenzyme Immunoassay	0.00	KUA/L	< 0.34
Wheat, (f4) Fluoroenzyme Immunoassay	0.12	KUA/L	< 0.34
Rice, (f9) Fluoroenzyme Immunoassay	0.00	KUA/L	< 0.34
Peanut, (f13) Fluoroenzyme Immunoassay	0.02	KUA/L	< 0.34
Soybean, (f14) Fluoroenzyme Immunoassay	0.07	KUA/L	< 0.34
Shrimp, (f24) Fluoroenzyme Immunoassay	0.11	KUA/L	< 0.34
Banana, (f92) Fluoroenzyme Immunoassay	0.11	KUA/L	< 0.34
Lemon, (f208) Fluoroenzyme Immunoassay	0.03	KUA/L	< 0.34
Chick Pea (kabuli chana), (f309) Fluoroenzyme Immunoassay	0.06	KUA/L	< 0.34
House Dust Mite (D.farinae), (d2) FEIA	0.22	KUA/L	< 0.34

Test Performed at :910 - Max Hospital - Saket M S S H, Press Enclave Road, Mandir Marg, Saket, New Delhi, Delhi 110017

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Booking Centre :1108 - Max Hospital Dehradun, Near Indian Oil Petrol Pump, Malsi, Mussoorie Diversion Road, Dehradun,

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Max Lab Limited (A Wholly Owned Subsidiary of Max Healthcare Institute Ltd.)

Max Lab, Max Super Speciality Hospital Dehradun: Mussoorie Diversion Road, Dehradun, Uttarakhand-248001,

Phone: 0135 719 3000 | (CIN No.: U85100DL2021PLC381826)

 Helpline No. 7982 100 200 | www.maxlab.co.in | feedback@maxlab.co.in

Conditions of Reporting: 1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient name as identified in the bill/test request form. 2. The test results relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory. 3. The reported results are for the information and interpretation by the referring doctor only. 4. Some tests are referred to other laboratories to provide a wider test menu to the customer. 5. Max Healthcare shall in no event be liable for accidental damages loss, or destruction of specimen which is not attributable to any direct and mala fide act or omission of Max Healthcare or its employees. Liability of Max Healthcare for deficiency of services, or other errors and omissions shall be limited to fee paid by the patient for the relevant laboratory services.

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Test Name	Serology Special	Result	Unit	Bio Ref Interval
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Allergy Panel - Food, Serum*

Test Name	Serology Special	Result	Unit	Bio Ref Interval
FEIA				
Egg White,(f1) Fluoroenzyme Immunoassay		0.00	kUA/L	< 0.34
Milk,(f2) Fluoroenzyme Immunoassay		0.07	kUA/L	< 0.34
Fish (Cod),(f3) Fluoroenzyme Immunoassay		0.00	kUA/L	< 0.34
Wheat,(f4) Fluoroenzyme Immunoassay		0.12	kUA/L	< 0.34
Rice,(f9) Fluoroenzyme Immunoassay		0.00	kUA/L	< 0.34
Peanut,(f13) Fluoroenzyme Immunoassay		0.02	kUA/L	< 0.34
Soybean,(f14) Fluoroenzyme Immunoassay		0.07	kUA/L	< 0.34
Shrimp,(f24) Fluoroenzyme Immunoassay		0.11	kUA/L	< 0.34
Banana,(f92) Fluoroenzyme Immunoassay		0.11	kUA/L	< 0.34
Lemon,(f208) Fluoroenzyme Immunoassay		0.03	kUA/L	< 0.34
Chick Pea (kabuli chana),(f309) Fluoroenzyme Immunoassay		0.06	kUA/L	< 0.34

Comment

Specific IgE is an in vitro test system for the quantitative measurement of allergen specific IgE in human serum or plasma. It is intended for in vitro diagnostic use as an aid in the clinical diagnosis of IgE mediated allergic disorders in conjunction with other clinical findings, and is to be used in clinical laboratories. A definite clinical diagnosis should not be made as a result of single test only, but should be made by taking into account clinical history and other laboratory findings.

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Serology Special



IgE (Immunoglobulin-E)*, Serum

FEIA

Date	27/Feb/2023	Unit	Bio Ref Interval
	01:20PM		
Immunoglobulin-IgE	219	KUA/L	0-64
FEIA			

Comment Total IgE is an in vitro test system for the quantitative measurement of circulating total IgE in human serum or plasma. It is intended for in vitro diagnostic use as an aid in the clinical diagnosis of IgE mediated allergic disorders in conjunction with other clinical findings, and is to be used in clinical laboratories. A definite clinical diagnosis should not be made as a result of single test only, but should be made by taking into account clinical history and other laboratory findings.

Kindly correlate with clinical findings

*** End Of Report ***



Dr. Poonam S. Das, M.D.
Principal Director-
Max Lab & Blood Bank Services



Dr. Bansidhar Tarai, M.D.
Associate Director
Microbiology & Molecular Diagnostics



Dr. Sonu Kumari Agrawal, MD
Associate Consultant
Microbiology



Dr Nidhi Malik, MD
Consultant Microbiology

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Clinical Biochemistry



Random Blood Sugar, RBS (Glucose), Fluoride Plasma

Date	27/Feb/2023 01:20PM	Unit	Bio Ref Interval
Random Glucose UV-Hexokinase	89	mg/dl	74 - 140

Interpretation A random plasma glucose of > 200 mg/dl with symptoms of diabetes is diagnostic. A confirmatory fasting plasma Glucose (FPG) test or OGTT should be completed on a different day if the clinical condition of the patient permits.

Kindly correlate with clinical findings

*** End Of Report ***



Dr. Mini Singhal M.D.
Principal Consultant Pathology



Dr. Shalini Shah M.D.
Attending Consultant Pathology

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