

Patient Name Centre
Age/Gender OP/IP No

Max ID/MobileCollection Date/TimeLab IDReceiving DateRef DoctorReporting DatePassport No.Passport No.

Serology Special

Test Name Result Unit Bio Ref Interval

# Elisa Dengue IgG Antibody, Serum\*

Dengue IgG 1.48 Index

# Ref. Range

Negative <0.90 Equivocal 0.90-1.1 Positive >1.1

#### **Comment:**

This test detects the presence of antibodies to dengue virus in the specimen and should not be used as the sole criterion for the diagnosis of dengue virus infection.

In early infections and some secondary infections, detectable levels of IgM antibodies may be low.

Some patients may not produce detectable levels of antibody within the first seven to ten days after infection. If the test result is negative and clinical symptoms persist, patients should be retested 3-4 days after the first specimen.

Serological cross-reactivity across the flavi virus group (dengue virus, St. Louis encephalitis, Japanese encephalitis, West Nile virus and yellow fever virus) is common.

A negative results does not preclude the possibility of early dengue virus infection.

Advise: "Dengue ELISA and Dengue PCR".

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Dr. Bansidhar Tarai, M.D.

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Associate Director

Microbiology & Molecular Diagnostics

Dr. Poornima Sen, M.D. Consultant - Microbiology Dr. Madhuri Somani, M.D., DNB

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Consultant - Microbiology

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### Covid 19 Antigen Test (Nasal Swab)\*

Immunochromatography

Covid 19 Antigen Test Negative

#### **Comment** Interpretation:-

- This is rapid card test for the qualitative detection of specific antigen to SARS-CoV-2.
- The test should be used for early diagnosis of symptomatic cases within 6-7 days after onset of symptoms
- Test is moderate sensitivity and high specificity
- When the antibody production starts, the antigen level will drop down rapidly.
- A positive test should be considered as a true positive whereas all symptomatic individuals testing negative through the rapid antigen test should be confirmed with a real time PCR test.

#### Indications for the tests

- 1. a. Asymptomatic direct and high risk contact
- b. Between 5 to 10 days after exposure to Covid positive patient.
- 2. Asymptomatic high risk group
  - Chemotherapy; Immunosuppressed patient; Malignancy; Transplant
  - Elderly (>65 years) co-morbidities (lung/heart/kidney/brain/blood/Diabetes Disorder)

### 3. Asymptomatic patients undergoing aerosol generating surgical/non-surgical interventions:-

- Elective/emergency surgical procedures like neurosurgery, ENT surgery, dental procedures or any other surgery,
- Non surgical interventions like bronchoscopy, upper GI endoscopy and dialysis ,Radiology procedures
- 4. Emergency purpose [symptomatic and asymptomatic)



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Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Centre

OP/IP No

Dr. Bansidhar Tarai, M.D.

Associate Director Microbiology & Molecular Diagnostics Dr. Poornima Sen, M.D. Consultant - Microbiology Dr. Madhuri Somani, M.D., DNB Consultant - Microbiology

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**Clinical Biochemistry** 

Renal Profile (Without Urine), Serum

Urea, Serum

Date 15/Oct/2021 Unit **Bio Ref Interval** 

09:58PM

Urea 95.4 mg/dL 17.0 - 43.0

Urease, UV

Creatinine, Serum

Date 15/Oct/2021 Unit Bio Ref

09:58PM Interval

Creatinine 1.24 mg/dL 0.8 - 1.3Rate-Jaffe

eGFR 57.02 ml/min/1.73

MDRD m²

#### Ref. Range

eGFR - Estimated Glomerular Filteration Rate is calculated by MDRD equation which is most accurate for GFRs  $\leq 60$ ml / min /1.73 m².MDRD equation is **used** for adult population only.

<60ml / min / 1.73 m² - Chronic Kidney Disease

<15 ml / min /1.73 m<sup>2</sup> - Kidney failure

## Sodium, Serum

Date 15/Oct/2021 Unit **Bio Ref Interval** 

09:58PM

133.7 mmol/L 136 - 146 Sodium

ISE Indirect

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**Clinical Biochemistry** 

Renal Profile (Without Urine), Serum

Potassium, Serum

Date 15/Oct/2021 Unit **Bio Ref Interval** 

09:58PM

3.5 - 5.1Potassium 4.11 mmol/L

ISE indirect

Chloride, Serum

Date 15/Oct/2021 Unit **Bio Ref Interval** 

09:58PM

Chloride 103.9 mmol/L 101 - 109

ISE indirect

Bicarbonate, Serum

Date 15/Oct/2021 Unit **Bio Ref Interval** 

09:58PM

**Bicarbonate** 22.5 mmol/L 21 - 31

Enzymatic

Calcium, Serum

15/Oct/2021 **Bio Ref Interval** Date Unit

09:58PM

Calcium (Total) 7.91 mg/dL 8.8 - 10.6

Arsenazo III

#### Comment

Increased in Primary and Tertiary hyperparathyroidism, malignant disease with bone involvement, Polycythemia vera, pheochromocytoma and Sarcoidosis.

Advise: PTH testing. If normal or increased, then check urine Ca++/ Creatinine ratio to exclude Familial benign hypocalciuric hypercalcemia (FBHH) Decreased in surgical or congenital hyperparathyroidism; Vitamin D deficiency, chronic renal failure; magnesium deficiency, prolonged anticonvulsant therapy, acute pancreatitis, hyperphosphatemia, massive blood transfusion, leprosy, proximal and distal renal tubular disease, alcoholism and hepatic cirrhosis. Advice: Albumin, Phosphate, Creatinine, Alkaline Phosphatase and PTH.



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### **Clinical Biochemistry**

## Liver Function Test Profile, Serum

Date	15/Oct/2021 09:58PM	Unit	Bio Ref Interval
Total Protein Biuret	6.14	g/dL	6.6 - 8.3
Albumin Bromcresol Green (BCG)	2.4	g/dL	3.5 - 5.2
Globulin Calculated	3.7	g/dl	2.3 - 3.5
A.G. ratio Calculated	0.6		1.2 - 1.5
Bilirubin (Total)	0.71	mg/dL	0.3 - 1.2
Bilirubin (Direct) Diazotization	0.13	mg/dL	0.0 - 0.2
Bilirubin (Indirect) Calculated	0.58	mg/dL	0.1 - 1.0
SGOT- Aspartate Transaminase (AST) UV without P5P	94	IU/L	< 50
SGPT- Alanine Transaminase (ALT) UV without P5P	101	IU/L	< 50
Alkaline Phosphatase PNPP, AMP Buffer	80	IU/L	30 - 120
GGTP (Gamma GT), Serum Enzymatic Rate	34.0	IU/L	< 55

Kindly correlate with clinical findings

\*\*\* End Of Report \*\*\*

Dr. Poonam. S. Das, M.D.

Principal Director-

Max Lab & Blood Bank Services

Dr. Dilip Kumar M.D. Associate Director & Manager Quality

Dr. Nitin Dayal, M.D. Principal Consultant & Head, Haematopathology

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### Hematology

# CBC (Complete Blood Count), Whole Blood EDTA

The (Complete Blood Co.	•		
Date	15/Oct/2021 09:58PM	Unit	Bio Ref Interval
Haemoglobin	12.6	g/dl	13.0 - 17.0
Packed Cell, Volume Calculated	37.6	%	40-50
Total Leucocyte Count (TLC) Electrical Impedance	10.5	10~9/L	4.0-10.0
RBC Count Electrical Impedance	4.54	10~12/L	4.5-5.5
MCV Electrical Impedance	82.8	fL	83-101
MCH Calculated	27.7	pg	27-32
MCHC Calculated	33.4	g/dl	31.5-34.5
Platelet Count Electrical Impedance	150	10~9/L	150-410
	also been rechecked microscopically.		
MPV Calculated	10.9	fl	7.8-11.2
RDW Calculated	15.7	%	11.5-14.5
Differential Cell Count VCS / Light Microscopy			
Neutrophils	54.9	%	40-80
Lymphocytes	39.0	%	20-40
Monocytes	5.3	%	2-10
Eosinophils	0.1	%	1-6
Basophils	0.7	%	0-2
Absolute Leukocyte Cou Calculated from TLC & DLC	unt		
Absolute Neutrophil Count	5.76	10~9/L	2.0-7.0
Absolute Lymphocyte Count	4.1	10~9/L	1.0-3.0
Absolute Monocyte Count	0.56	10~9/L	0.2-1.0
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Hematology

Absolute Eosinophil Count 0.01 10~9/L 0.02 - 0.5Absolute Basophil Count 0.07 10~9/L 0.02 - 0.1

Kindly correlate with clinical findings

Passport No.

\*\*\* End Of Report \*\*\*

Dr. Dilip Kumar M.D. Dr. Poonam. S. Das, M.D.

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