

### Laboratory Investigation Report

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

#### Serology Special

#### Max Arthritis Panel - Essential



Test Name	Result	Unit	Bio Ref Interval
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#### ANA (Anti Nuclear Antibody), Serum

ELISA

Anti Nuclear Antibody	0.26	Index
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#### Ref. Range

Negative < 1.0

Positive >=1.0

#### Interpretation

Antinuclear antibodies are the most sensitive screening test for autoantibodies in patients suspected of connective tissue diseases. They are a heterogenous group of autoantibodies directed against ds-DNA, histones, SSA / Ro, SSB / La, Sm, Sm / RNP, Scl-70, Jo-1 & Centromere. ANA 's have also been detected in patients with Autoimmune Hepatitis (80%), Primary biliary cirrhosis (60%), Alcohol related liver disease (50%), Viral hepatitis B (40%). Presence of ANA has also been detected in individuals taking certain drugs like Hydralazine, Isoniazid, Chlorpromazine; family of SLE patients; healthy and elderly persons

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

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

Booking Centre :3865 - Neelkanth Hospital Private Limited, Plot No.1Nathupur Road DLF Phase 3 Gurgaon, 9310707812

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Page 1 of 5

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Neelkanth Hospital: 1, Main Mehrauli-Gurgaon Road, Near Guru Dronacharya Metro Station, DLF Phase-3, Gurugram, Haryana-122022, Phone: 93107 07812, 4700500-599 | (CIN No.: U85100DL2021PLC381826)

Helpline No. 7982 100 200 [www.maxlab.co.in](http://www.maxlab.co.in) [feedback@maxlab.co.in](mailto: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.



**Laboratory Investigation Report**

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**Serology**
**Max Arthritis Panel - Essential**

**Anti-CCP (Anti Cyclic Citrullinated Peptide), Serum**

Date	12/Jun/2023 07:00PM	Unit	Bio Ref Interval
Anti-CCP ECLIA	<7.00	U/ml	< 17.0

**Comment Interpretation**

This test helps in diagnosis of rheumatoid arthritis in combination with other clinical and laboratory funding.

Kindly correlate with clinical findings

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




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Page 2 of 5

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**Laboratory Investigation Report**

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**Hematology Special**
**Max Arthritis Panel - Essential**


Test Name	Result	Unit	Bio Ref Interval
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**HLA B-27, Flow Cytometry, EDTA**

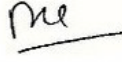
HLA B-27 Flow Cytometry	Negative		Negative
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Kindly correlate with clinical findings

\*\*\* 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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**Clinical Biochemistry**  
**Max Arthritis Panel - Essential**



#### Rheumatoid Factor(Quantitative), Serum

Date		Unit	Bio Ref Interval
12/Jun/2023	07:00PM		
Rheumatoid Factor	5.0	IU/mL	< 12
Immunoturbidimetric			

**Interpretation** Rheumatoid factor is found in rheumatoid arthritis, Sjögren’s syndrome, Scleroderma, dermatomyositis, Waldenström’s disease, sarcoidosis and SLE. 75% patients with rheumatoid arthritis have RF of IgM class. Highest titers of Rheumatoid arthritis are seen in severe, active, chronic disease with vasculitis and subcutaneous nodules

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**Clinical Biochemistry**  
**Max Arthritis Panel - Essential**

**Uric Acid\*, Serum**

Date	12/Jun/2023 07:00PM	Unit	Bio Ref Interval
Uric Acid	7.5	mg/dl	3.5 - 7.2
Uricase, Colorimetric			

**Interpretation**

Increased in gout, renal failure, inherited metabolic disorders, excess dietary purine intake, Increased nucleic acid turnover (e.g. Leukemia, Myeloma, Radiotherapy, Chemotherapy, Trauma) Psoriasis, preeclampsia and Alcohol consumption.

Decreased in Wilson's disease, Fanconi's syndrome xanthinuria, SIADH, deficiency of adenosine deaminase, purine and nucleoside phosphorylase and low purine diet.

**C-Reactive Protein (CRP)\*, Serum**

Date	12/Jun/2023 07:00PM	Unit	Bio Ref Interval
CRP	5.61	mg/L	< 5.0

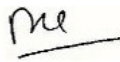
**Interpretation** This helps in detecting neonatal septicemia, meningitis and useful to assess the activity of inflammatory diseases like rheumatoid arthritis. It is increased after myocardial infarction, stress, trauma, infection, inflammation, surgery, or neoplastic proliferation. The increase with inflammation occurs within 6 -12 hours and peaks at about 48 hours.

Kindly correlate with clinical findings

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



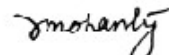
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Principal Consultant & Head,  
Haematopathology



**Dr. Tridib Kumar Mohanty**  
M.D Pathology(Delhi)