

### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

Test Name	Serology Result	Unit	Bio Ref Interval
-----------	-----------------	------	------------------

#### Dengue Serology (Ig M & Ig G),Serum/EDTA\*

Immunochromatography

Antibody IgM	Not Detected
Antibody IgG	Not Detected

#### Interpretation

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 flavivirus group (dengue virus, St. Louis encephalitis, Japanese encephalitis, West Nile virus and yellow fever virus) is common.

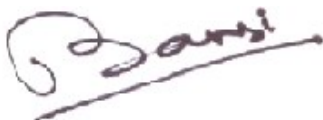
A negative results does not preclude the possibility of early dengue virus infection.

The report is based on screening test and is provisional.

**Advise:** "Dengue ELISA and Dengue PCR".

Kindly correlate with clinical findings

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



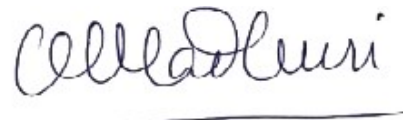
**Dr. Bansidhar Tarai, M.D.**

Associate Director  
Microbiology & Molecular Diagnostics



**Dr. Poornima Sen, M.D.**

Consultant - Microbiology



**Dr. Madhuri Somani, M.D. , DNB**

Consultant - Microbiology



**Dr. Ranjana Chhabra, M.D.**

Senior Consultant Microbiology



**Dr. Suchitra Jain, M.D.**

Senior Consultant Microbiology



### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

Serology Special			
Test Name	Result	Unit	Bio Ref Interval

#### Dengue NS 1 Antigen Test (Elisa)

Dengue NS 1 Antigen ELISA	0.02	Ratio	
------------------------------	------	-------	--

#### Ref. Range

Negative	Ratio < 0.50
Equivocal	0.50 ≤ Ratio < 1.00
Positive	Ratio ≥ 1.00

Kindly correlate with clinical findings

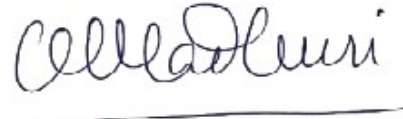
\*\*\* End Of Report \*\*\*



**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



### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Clinical Biochemistry Max Fever Profile Comprehensive

#### SGOT - Aspartate Amino Transferase, Serum

Date	29/Sep/2021 10:40PM	Unit	Bio Ref Interval
SGOT- Aspartate Transaminase (AST) UV without P5P	42	IU/L	< 50

#### Interpretation

Increased in acute hepatitis especially viral hepatitis, liver cell necrosis or injury of any cause, including cholestatic or obstructive jaundice, chronic hepatitis and drug induced injury to liver.

#### SGPT - Alanine Amino Transferase, Serum

Date	29/Sep/2021 10:40PM	Unit	Bio Ref Interval
SGPT- Alanine Transaminase (ALT) UV without P5P	34	IU/L	< 50

#### Interpretation

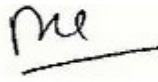
Increased in Acute Liver Cell necrosis of any cause, severe shock right heart failure, acute anoxia (e.g. status asthmaticus), extensive trauma and left heart failure.

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



### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Clinical Pathology Max Fever Profile Comprehensive

#### Urine Routine And Microscopy

Date	29/Sep/2021 10:40PM	18/Apr/21 12:58PM	13/Feb/21 10:32AM	Unit	Bio Ref Interval
------	------------------------	----------------------	----------------------	------	------------------

#### Macroscopy

Reflectance photometry

Colour	Yellow	Yellow	Yellow		Pale Yellow
PH	5.5	5.0	5.5	..	5-6
Specific Gravity	<b>1.030</b>	1.019	1.015		1.015 - 1.025
Protein	Nil	+	Nil		Nil
Glucose.	Nil	Nil	Nil		Nil
Ketones	Nil	Nil	Nil		Nil
Blood	Nil	Nil	Nil		Nil
Bilirubin	Nil	Nil	Nil		Nil
Urobilinogen	Nil	Normal	Normal		Normal
Nitrite	Nil	Negative	Negative		

#### Microscopy

Light Microscopy/Image capture microscopy

Red Blood Cells (RBC)	Nil	Nil	Nil	/HPF	Nil
White Blood Cells	3-5	0-1	0-1	/HPF	0.0-5.0
Squamous Epithelial Cells	0-1	0-1	0-1	/HPF	
Cast	Nil	Nil	Nil	/LPF	Nil
Crystals	Occasional calcium oxalate crystals.	Nil	Calcium oxalate seen.	..	Nil

Kindly correlate with clinical findings

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

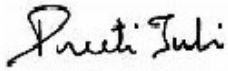


SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11 Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
The authenticity of the report can be verified by scanning the Q R Code on top of the page

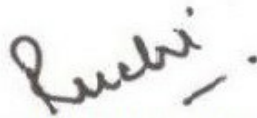
### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

**Clinical Pathology**  
**Max Fever Profile Comprehensive**



**Dr. Preeti Tuli, M.D.**  
Principal Consultant & Quality Manager  
Pathology.



**Dr. Ruchi Srivastava, M.D.**  
Consultant - Pathology



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
The authenticity of the report can be verified by scanning the Q R Code on top of the page

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

Max Lab, Max Super Speciality Hospital, Patparganj: 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
Phone: +91-11-4303 3333 | (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

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Hematology

#### Max Fever Profile Comprehensive

Test Name	Result	Unit	Bio Ref Interval
-----------	--------	------	------------------

#### Malaria Antigen, EDTA, EDTA

Malaria Antigen Immuno-chromatography - pLDH & HRP2	Negative		Negative
--------------------------------------------------------	----------	--	----------

**Interpretation** Rapid card test for malaria is a combo kit designed to test Plasmodium falciparum and Plasmodium vivax species of malaria. This is a combo kit coated with specific monoclonal antibodies against pLDH of the P. Vivax and HRP2 of the P. Falciparum. This kit can also detect the combined infection by these two species.

The result of this test needs to be corroborated with clinical features and other laboratory findings. Positive result with faint test line or false negative may be seen in low parasite density. Negative result can also be seen in prozone effect – i.e. very high antigen concentration compared to antibody concentration.

False positive result may be seen in acute Schistosomiasis.

Test may remain positive even after successful anti-malarial therapy and therefore should not be used for monitoring response to anti-malarial treatment.

**Advice:** “Peripheral smear for Malarial Parasite”



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
 Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
 The authenticity of the report can be verified by scanning the Q R Code on top of the page

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

Max Lab, Max Super Speciality Hospital, Patparganj: 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
 Phone: +91-11-4303 3333 | (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.

### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Hematology Max Fever Profile Comprehensive

#### Complete Haemogram, Peripheral Smear and ESR, EDTA

Date	29/Sep/2021 10:40PM	13/Feb/21 10:32AM	Unit	Bio Ref Interval
Haemoglobin <small>Modified cyanmethemoglobin</small>	14.9	15.2	g/dl	13.0 - 17.0
Packed Cell, Volume <small>Calculated</small>	45.8	46.5	%	40-50
Total Leucocyte Count (TLC) <small>Electrical Impedance</small>	4.9	4.4	10~9/L	4.0-10.0
RBC Count <small>Electrical Impedance</small>	5.35	5.46	10~12/L	4.5-5.5
MCV <small>Electrical Impedance</small>	85.6	85.2	fL	83-101
MCH <small>Calculated</small>	27.8	27.9	pg	27-32
MCHC <small>Calculated</small>	32.5	32.8	g/dl	31.5-34.5
Platelet Count <small>Electrical Impedance</small>	207	167	10~9/L	150-410
MPV <small>Calculated</small>	9.3	10.4	fl	7.8-11.2
RDW <small>Calculated</small>	13.7	13.7	%	11.5-14.5

#### Differential Cell Count

VCS / Light Microscopy

Neutrophils	78	53	%	40-80
Lymphocytes	15	35	%	20-40
Monocytes	06	08	%	2-10
Eosinophils	01	04	%	1-6
Basophils	00	00	%	0-2

#### Absolute Leukocyte Count

Calculated from TLC & DLC

Absolute Neutrophil Count	3.82	2.33	10~9/L	2.0-7.0
Absolute Lymphocyte	0.7	1.5	10~9/L	1.0-3.0



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
 Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
 The authenticity of the report can be verified by scanning the Q R Code on top of the page

**Laboratory Investigation Report**

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

**Hematology**  
**Max Fever Profile Comprehensive**

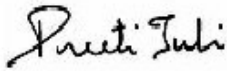
Count				
Absolute Monocyte Count	0.29	0.35	10~9/L	0.2-1.0
Absolute Eosinophil Count	0.05	0.18	10~9/L	0.02-0.5
<b>ESR (Westergren)</b>	<b>20</b>	<b>02</b>	mm/hr	<=12

**Peripheral Smear Examination**

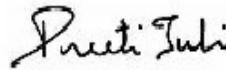
**RBC:** - Normocytic Normochromic  
**WBC:** - Counts within normal limits  
**Platelet:** - Adequate

Kindly correlate with clinical findings

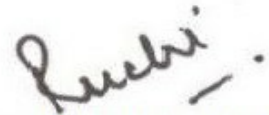
\*\*\* End Of Report \*\*\*



**Dr. Preeti Tuli, M.D.**  
Principal Consultant & Quality Manager  
Pathology.



**Dr. Preeti Tuli, M.D.**  
Principal Consultant & Quality Manager  
Pathology.



**Dr. Ruchi Srivastava, M.D.**  
Consultant - Pathology



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
 Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
 The authenticity of the report can be verified by scanning the Q R Code on top of the page





### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Serology

Test Name	Result	Unit	Bio Ref Interval
-----------	--------	------	------------------

#### Widal Test (Tube Method), Serum

Tube Agglutination

Salmonella Typhi, (O)	<1:80	Titre	<1:80
Salmonella Typhi, (H)	<1:80	Titre	<1:160
Salmonella Paratyphi (A,H)	<1:80	Titre	< 1:160
Salmonella Paratyphi (B, H)	<1:80	Titre	<1:160

#### Interpretation

1. This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli.
2. The antibodies usually appear at the end of the first week of infection and increase steadily till third / fourth week after which the decline starts.
3. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases.
4. Non specific febrile disease may cause this titre to increase (anamnestic reaction).
5. The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages.
6. The recommended test in the first week of infection is Blood Culture.
7. Titres 1:80 and above of "O" antigen & 1:160 and above of "H" antigen are significant. Rising titres are significant
8. A definitive clinical diagnosis should not be made by result of a single test only, but should be made by taking clinical history and other laboratory findings in to account.

Kindly correlate with clinical findings

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

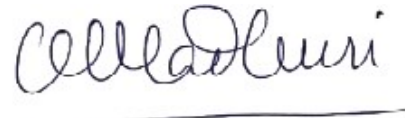


**Dr. Bansidhar Tarai, M.D.**

Associate Director  
Microbiology & Molecular Diagnostics



**Dr. Poornima Sen, M.D.**  
Consultant - Microbiology



**Dr. Madhuri Somani, M.D. , DNB**  
Consultant - Microbiology



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
The authenticity of the report can be verified by scanning the Q R Code on top of the page

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

Max Lab, Max Super Speciality Hospital, Patparganj; 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
Phone: +91-11-4303 3333 | (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.

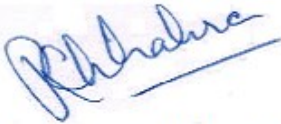


MC-2347

### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

Serology			
Test Name	Result	Unit	Bio Ref Interval



**Dr. Ranjana Chhabra, M.D.**  
Senior Consultant Microbiology



**Dr. Suchitra Jain, M.D.**  
Senior Consultant Microbiology

**Results to follow:**

Phlebotomy service at home by partner. : Sample not yet received



SIN No: mbb116746, Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11  
 Booking Centre :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877  
 The authenticity of the report can be verified by scanning the Q R Code on top of the page

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

Max Lab, Max Super Speciality Hospital, Patparganj: 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
 Phone: +91-11-4303 3333 | (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.



MC-2347

### Laboratory Investigation Report

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Microbiology

#### Max Fever Profile Comprehensive

#### Blood - Culture & Sensitivity

Method : BacT Alert Culture/ID & Sensitivity by Vitek 2

Source 1 : Left hand

#### Preliminary

Left Hand Sterile after 2 days of aerobic incubation at 37 degree C.  
Note : Final report will be follow on 5th day.

#### Final Report

Left Hand Sterile after 5 days of aerobic incubation at 37 degree C.



SIN No: mbb116746

BookingCentreAddress : 1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877

The authenticity of the report can be verified by scanning the Q R Code on top of the page

Test Performed at: 969 - Max Hospital, Patparganj, 108A, IP Ext, I.P. Extension, Patparganj, Delhi, 11

Max Lab, Max Super Speciality Hospital, Patparganj; 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
Phone: +91-11-4303 3333 | (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. They 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. 1 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

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

**Microbiology**  
**Max Fever Profile Comprehensive**

#### Urine Culture & Sensitivity

**Method :** Semi quantitative-Culture/ID & Sensitivity by Vitek 2

**Result** No growth.  
**Interpretation.** Sterile after 2 days of aerobic incubation at 37 degree C.

#### Comment

Urine pus cells /HPF	Colony count	Interpretation
<5	10 <sup>3</sup>	Insignificant growth, more likely to be a colonizer. To be treated only if the patient is symptomatic
<5	10 <sup>4</sup>	Moderately significant growth. Should be correlated clinically and to be treated only if the patient is symptomatic
<5	10 <sup>5</sup>	Significant growth. Should be treated if the patient is clinically symptomatic
>5	10 <sup>3</sup> / 10 <sup>4</sup> / 10 <sup>5</sup>	Significant growth. Should be treated if the patient is clinically symptomatic
5 - 10	No growth	Kindly rule out the cause of sterile pyuria i.e Is the patient on antibiotics Or anyother systemic illness (e.g TB /STD)
>5	Mixed growth	Mixed growth of more than two types of organisms indicating specimen colonization. Kindly send mid-stream urine sample after proper collection.

Kindly correlate with clinical findings

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



SIN No:mhb116746

BookingCentreAddress :1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877

The authenticity of the report can be verified by scanning the Q R Code on top of the page

Test Performed at: 969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11

Max Lab, Max Super Speciality Hospital, Patparganj; 108 A, Indraprestha Extension, Patparganj, New Delhi-110092,  
Phone: +91-11-4303 3333 | (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. They 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. 1 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

Patient Name	Centre
Age/Gender	OP/IP No
Max ID/Mobile	Collection Date/Time
Lab ID	Receiving Date
Ref Doctor	Reporting Date
Passport No.	

#### Microbiology

#### Max Fever Profile Comprehensive



**Dr. Ranjana Chhabra, M.D.**  
Senior Consultant Microbiology



**Dr. Suchitra Jain, M.D.**  
Senior Consultant Microbiology



SIN No: mbb116746

BookingCentreAddress : 1189 - Max Lab, D Block, Anand Vihar, Delhi, S-15 Csc, D Block Market, Anand Vihar Delhi, 9899228877

The authenticity of the report can be verified by scanning the Q R Code on top of the page

Test Performed at: 969 - Max Hospital, Patparganj, 108A, IP Ext, I.P. Extension, Patparganj, Delhi, 11

Max Lab, Max Super Speciality Hospital, Patparganj; 108 A, Indraprastha Extension, Patparganj, New Delhi-110092,  
Phone: +91-11-4303 3333 | (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. They 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. 1 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.



MC-2347