


ILC REPORT: LAB ID: 1482 HEMATLOGY: CBC, ESR, BGRH, PT, PS EXAMINATION

SR. NO	PARAMETER	REPROT OFC LABORATORY DEPARTMENT S.S.HOSPITAL ,PETLAD	REPORT OF STERLING ACCURIS LABORATORY AHMEDABAD (NABL accredited lab no: MC 2202)	REMARKS
1	HB	14.3 gm/dl	14.1	Matching
2	TOTAL WBC COUNT	4700 /cmm	4100/cmm	Matching
3	DIFFERENTIAL WBC COUNT	Neutrophils: 39 Lymphocytes :48 Eosinophils:02 Monocytes:11 Basophils: 00	Neutrophils:34 Lymphocytes :50 Eosinophils:02 Monocytes:14 Basophils: 00	Matching
4	PLATELET COUNT	2,63,000/cmm	2,72,000/cmm	Matching
5	RBC COUNT	5.24 x10 ¹² /l	5.16 x 10 ¹² /l	
6	HCT	41.4%	42.7 %	Matching
7	MCV	79 fl	82.7 fl	Matching
8	MCH	27.2 pg	27.3 pg	Matching
9	MCHC	34.4 g/dl	33.0	Matching
10	RDW	12.8 %	13.2 %	Matching
11	ESR	12 mm/hr	04 mm/hr	Matching
12	AEC	94/cmm	82/cmm	Matching
13	Blood Group	"A " Positive	'A" positive	Matching
14	Prothrombin Time	Test :15 seconds Control : 14.75 seconds INR : 1.01	Test : 12.8 seconds Control :14.2 seconds INR: 0.91	Matching
15	Peripheral smear examination	Rbc series : Normochromic Microcytic picture with Mild anisopoikilocytosis Parasite : not seen Platelets : adequate	Rbc series : Normochromic normocytic Parasite : Malaria parasite is not detected Platelet : adequate with normal morphology	Matching

NOTE : REPORT OF BOTH LAB ATTACHED .


 Pathologist, Class-I
 S. S. Hospital, Petlad,
 S. S. Hospital, Petlad,
 Dr. Anand

FOR ILLC 'NO. 1482'
LABORATORY SERVICES OF S.S.H.
PETLAD .

Reporting Form	Hematology & Clinical pathology Report	Unique ID.LSGGGH/F/
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(Patient Sticker)

S.S HOSPITAL,PETLAD
 Department of Pathology
Haematology & Clinical Pathology Reporting Form

Patient Name: B.H. Munge
 Age: 40 yrs. Gender: M / F Unit: OPD
 MRD No.: 12400 OPD Reg. No.:
 Indoor Reg. No.: _____ Ward No./OPD:
 Head of Unit's Name: _____

Provisional Diagnosis: _____
 Time of Sample Receiving: 14/10/20 AM/PM
 Lab I. D. No.: 1482

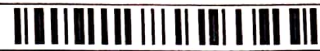
Date of Report	<u>14/10/20</u>
Time of Report	<u>10/45</u> AM/PM

HAEMATATOLOGY			Reference Range (Adult)
Test	Result	Unit	
Hemoglobin	14.5	gm/dl	M: 14.0-17.0 gm/dl F: 12.0-16.0 gm/dl
Total WBC Count	4,700	/cmm	4000-10000/cmm
Differential WBC Count:			
Neutrophils	39	%	55-70%
Lymphocytes	48	%	20-40%
Eosinophils	02	%	1-6%
Monocytes	11	%	2-10%
Basophils	00	%	0-1%
RBC	5.24	10 ¹² /l	4.0-5.50 10 ¹² /l
HCT	41.4	%	36.0-52.0 %
MCV	79	fl	76.0-96.0 fl
MCH	27.2	pg	27.0-32.0 pg
MCHC	34.4	g/dl	30.0-35.0 g/dl
RDW	14.8	%	11.5-14.5 %
Platelet Count	2,63,000	lacs/cmm	1.5-4.5 lacs/cmm
ESR	12	mm/hr	M: ≤10 mm/hr F: ≤15 mm/hr
AEC	94	/cmm	40-440/cmm
Blood Group	'A' Positive		

AD
 Pathologist Class-I
 S. S. Hospital, Petlad,
 Di. Anand



LABORATORY REPORT



Name : B H MENGAR 1482
Lab ID : 2002113751
Sex/Age : M / 40 Years
Ref. By :
Location :

Registration on : 21-Feb-2020
Collected on : 21-Feb-2020 16:31
Approved on : 21-Feb-2020 18:11
Sample Type : EDTA BLOOD
New Phone no. 079-49030000

TEST	RESULTS	UNIT	BIOLOGICAL REFERENCE RANGE
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COMPLETE BLOOD COUNT (CBC)

Specimen: EDTA blood Instrument : Beckman coulter LH 750

Hb and Indices

Hemoglobin (Photometry)	14.1	g/dL	13.0 - 16.5
RBC Count (Ele. Impedance)	5.16	million/cmm	4.5 - 5.5
PCV (Calculated)	42.7	%	40.0 - 49.0
MCV (Derived)	L 82.7	fL	83.0 - 101.0
MCH (Calculated)	27.3	Pg	27.1 - 32.5
MCHC (Calculated)	33.0	g/dL	32.5 - 36.7
RDW (Calculated)	13.2	%	11.6 - 14.0

Total WBC Count

WBC Count (Ele. Impedance)	4100	/cmm	4000 - 10000
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Differential & Absolute Count

	[%]	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Neutrophils	L 34	40 - 80 %	L 1394	2000 - 7000 /cmm
Lymphocytes	H 50	20 - 40 %	2050	1000 - 3000 /cmm
Eosinophils	02	1 - 6 %	82	20 - 500 /cmm
Monocytes	H 14	2 - 10 %	574	200 - 1000 /cmm
Basophils	00	<1 - 2 %	0	0 - 100 /cmm

Platelet Count

Platelet Count (Ele. Impedance)	272000	/cmm	150000 - 410000
MPV (Calculated)	8.5	fL	7.5 - 10.3

Peripheral Smear Examination

RBC Morphology : Normocytic Normochromic
Platelets : Platelets are adequate with normal morphology.
Parasites : Malarial parasite is not detected.

ERYTHROCYTE SEDIMENTATION RATE

ESR (After 1 hour)	4	mm/hr	0 - 14
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----- End Of Report -----

This is an Electronically Authenticated Report.
* Denotes Test not in NABL Scope.

*Note : (LL-Very low, L-Low, H-High, HH-Very High)

Approved by : Dr. Kamal Jadav

NATIONAL REFERENCE LABORATORY

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info@sterlingaccuris.com | www.sterlingaccuris.com

Laboratory department,

S.S.Hospital, Petlad.

Date: 20/02/2020

To,

Lab director,

Sterling Accuris Diagnostic,

Ahmadabad.

Sub: To sign MOU for inter-laboratory comparison program

Respected sir,

We laboratory department ,S.S.Hospital,Petlad have applied for Quality Assurance Scheme for Basic Composite Medical Laboratories and as per NABL requirement we need inter-laboratory comparison program and we wish to sign MOU WITH YOU FOR below mentioned test for same.

Kindly do needful and oblige

Thanking you

List of test:

CBC

Blood group

ESR

Prothrombin time

P/S Examination

Urine routine and micro

UPT

Stool R/M

Your faithfully



Pathologist Class-I
S. S. Hospital, Petlad,
Di. Anand

Accepted.



Sterling Accuris Diagnostic, Ahmad

