

Gurugram

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

**Processed By** 

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

Name : Mrs. PL23 : 35 Yrs Age

Sex : Female

P. ID No. : P1000100012904 : 10002304960 Accession No

Referring Doctor: Self

Referred By

Billing Date

07/07/202312:30:34 10/07/2023 10:01:31

Sample Collected on Sample Received on

10/07/2023 11:02:13

Report Released on Barcode No.

20/07/2023 20:22:48

10002304960-03,

10002304960-04, 10002304960-05.

Ref no.

12.0 - 15.0

10002304960-02

Report Status - Final

**Test Name** Result Biological Ref. Interval

Unit

**HAEMATOLOGY** 

**Ante Natal Profile 1** 

Haemoglobin (Hb)

Sample: Whole Blood EDTA Method: Photometric measurement 13.0

gm/dL

**Blood Group** 

**Blood Grouping** 

Sample: Whole Blood EDTA Method: Column Agglutination

Rh (D) Typing

Sample: Whole Blood EDTA Method: Column agglutination Α

Positive

**BIOCHEMISTRY** 

Fasting Plasma Glucose

Sample: Fluoride Plasma - F Method: Hexokinase

Glucose Random

Sample: Fluoride Plasma - R Method: Hexokinase

158 H

138 H

74 - 99

70 - 140

mg/dL

mg/dL

**SEROLOGY** 

HIV Antibody, Rapid Card

Sample: Serum

Method: Immunodot Assay

Non Reactive

Non Reactive

Hepatitis B Surface Antigen (HBsAg) Rapid Card

Sample: Serum

Method: Immunochromatography

Non Reactive

Non Reactive

Hepatitis C Antibody (HCV), Rapid Card Sample: Serum

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Method: Immunodot Assay

Non Reactive

Non Reactive

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Plot No. 55-56, Udyog Vihar, Phase-4, Gurugram



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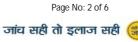
: Mrs. PL23 Name **Billing Date** 07/07/202312:30:34 Age : 35 Yrs Sample Collected on 10/07/2023 10:01:31 10/07/2023 11:02:13 : Female Sample Received on Sex P. ID No. : P1000100012904 Report Released on 20/07/2023 20:22:48 : 10002304960 Barcode No. 10002304960-03, **Accession No** 10002304960-04, Referring Doctor: Self

10002304960-05. 10002304960-02

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Test Name	Result	Biological Ref. Interval	Unit
VDRL (RPR)	Non Reactive	Non Reactive	NA

Sample: Serum Method: Slide flocculation







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10002304960-01, 10002304960-02,

10002304960-03. Ref no. 10002304960-04,

<del>10002304960-05</del>

Report Status - Final

Result

**Test Name** 

Biological Ref. Interval

Unit

# **CLINICAL PATHOLOGY**

# **Urine Routine & Microscopic Examination**

Method: Reflectance Photometry

**Physical Examination** 

Colour

Sample: Urine Method: Physical Examination

**Appearance** Sample: Urine

Method: Physical Examination

Specific Gravity

Sample: Urine

Method: pKa change of pretreated polyelectrolytes

pΗ Sample: Urine

. Method: Double indicator principle

Pale Yellow

Clear

Pale Yellow

1.010

6.0

Clear

1.003 - 1.035

4.7 - 7.5

## **Chemical Examination**

Glucose

Sample: Urine

. Method: Glucose oxidase/peroxidase

Protein

Sample: Urine

Method: Protein-error-of-indicators principle

**Ketones** 

Sample: Urine Method: Sodium nitroprusside reaction

Sample: Urine Method: Peroxidase

Bilirubin

Sample: Urine Method: Diazo reaction Not Detected

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<del>10002304960-05</del>

# Report Status - Final

Nopoli Status Tina					
Test Name	Result	Biological Ref. Interval	Unit		
<b>Urobilinogen</b> Sample: Urine Method: Ehrlich's reaction	Normal	Normal			
<b>Nitrite</b> Sample: Urine Method: Nitrite Test	Not Detected	Not Detected			
Microscopic Examination Method: Microscopy					
Pus Cells Sample: Urine	2 - 3	0 - 5	/hpf		
RBC Sample: Urine	Not Detected	Not Detected	/hpf		
Epithelial Cells Sample: Urine	2 - 3	0 - 5	/hpf		
Casts Sample: Urine	Not Detected	Not Detected	/hpf		
Crystals Sample: Urine	Not Detected	Not Detected	/hpf		
Bacteria Sample: Urine	Not Detected	Not Detected	/hpf		
Remarks Sample: Urine					

**Remarks**: Microscopic Examination is performed on urine sediment Haemoglobin (Hb)







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Report Status - Final

Test Name Result Biological Ref. Interval Unit

Hemoglobin is the iron containing protein molecule in red blood cells that carries oxygen from the lungs to the body's tissues and returns carbon dioxide from the tissues back to the lungs. Decrease in Hemoglobin levels results in anaemia and very high Hemoglobin levels results in hemochromatosis.

# **HIV Antibody, Rapid Card**

#### Clinical Significance:

HIV Rapid test is a qualitative test used to screen for antibodies against HIV 1 and 2 viruses. As per NACO guidelines, all positive samples should be tested by using 3 different types of kits before report is released.

# **Hepatitis B Surface Antigen (HBsAg)**

#### Clinical Significance:

Hepatitis B surface antigen (HBsAg) is the first serologic marker appearing in the serum at 6 to 16 weeks following exposure to HBV. In acute infection, HBsAg usually disappears in 1 to 2 months after the onset of symptoms. Persistence of HBsAg for more than 6 months in duration indicates development of either a chronic carrier state or chronic HBV infection.

#### In case of negative results:

Please note that while rapid test is a sensitive and reliable screening test, it should not be used as a sole criterion for diagnosis. It is recommended to use molecular testing (PCR) for confirmation.

#### In case of positive results:

The test has been performed on two different rapid technologies. Please note that while rapid test is a sensitive and reliable screening test, it should not be used as a sole criterion for diagnosis. It is recommended to use molecular testing (PCR) for confirmation.

## Hepatitis C Antibody (HCV), Rapid Card

# Clinical Significance:

HCV rapid test is a qualitative test used to screen for antibodies against Hepatitis C Virus.

In case of negative results:



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Ref no. 10002304960-04, <del>10002304960-05</del>

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**Test Name** Result Biological Ref. Interval Unit

Please note that while rapid test is a sensitive and reliable screening test, it should not be used as a sole criterion for diagnosis. It is recommended to use molecular testing (PCR) for confirmation.

### In case of positive results:

The test has been performed on two different rapid technologies. Please note that while rapid test is a sensitive and reliable screening test, it should not be used as a sole criterion for diagnosis. It is recommended to use molecular testing (PCR) for confirmation.

## **VDRL (RPR)**

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- 1. This is a screening test for syphilis based on principal of flocculation which measures antibodies produced by the body when comes in contact with the bacteria Treponema pallidum
- 2. This test is helpful in the initial diagnosis and following the progression of disease and response to therapy
- 3. Titers >1:8 are considered REACTIVE and SIGNIFICANT
- 4. Titers < 1:8 are considered NON REACTIVE and could be due to Biological False Positive reaction which may be seen in conditions like Malaria, HIV, SLE, Autoimmune disorders, Viral fever, Pregnancy etc.
- 5. Confirmation of diagnosis should be done by TPHA / FTA-ABS

## **Urine Routine & Microscopic Examination**

#### Clinical Significance:

Urine routine examination and microscopy comprises of a set of screening tests that can detect some common diseases like urinary tract infections, kidney disorders, liver problems, diabetes or other metabolic conditions. Physical characteristics (colour and appearance), chemical composition (glucose, protein, ketone, blood, bilirubin and urobilinogen) and microscopic content (pus cells, epithelial cells, RBCs, casts and crystals) are analyzed and reported.

\* End of Report\*\*

Dr. Aarti Khanna Nagpal

DNB (Pathology) Senior Consultant
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Dr. Rahul Behl

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