

Client
Gurugram
Pathkind Diagnostics Pvt. Ltd.
Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Processed By
Pathkind Diagnostics Pvt. Ltd.
Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Name : Mrs. SE14	Billing Date : 07/07/2023 12:34:28
Age : 21 Yrs	Sample Collected on : 10/07/2023 10:01:31
Sex : Female	Sample Received on : 10/07/2023 11:02:13
P. ID No. : P1000100013035	Report Released on : 18/07/2023 16:46:31
Accession No : 10002305091	Barcode No. : 10002305091-01
Referring Doctor : Self	Ref no. :
Referred By :	

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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SEROLOGY

WIDAL

Sample: Serum
Method: agglutination method

Salmonella Typhi 'O'	< 1:80	< 1:80
Salmonella Typhi 'H'	1:320	< 1:80
Salmonella Paratyphi 'AH'	1:160	< 1:80
Salmonella Paratyphi 'BH'	1:160	< 1:80
Result :	Negative	

WIDAL

While the definitive diagnosis of typhoid fever depends on the isolation of S typhi from blood, stools, urine or other body fluids, the role of the Widal test had been to increase the index of suspicion for the presence of typhoid fever by demonstrating a positive agglutination during the acute convalescent period of infection with evidence of a four-fold rise of antibody titre.

Please note that the test suffers from serious cross-reactivity with other infectious agents, it may produce false-positive results, leading to an over-diagnosis of typhoid fever.

The IgM somatic O antibody appears first and represents the initial serologic response in acute typhoid fever, while the IgG flagella H antibody usually develops more slowly but persists for longer.

In an individual with no prior exposure to S typhi infection (either lack of active infection or absence of passive immunisation), a higher than 1:80 or 1:160 titre on an initial single test, usually indicates towards exposure to typhoid fever. However, even these single high value titres in an endemic area like India where repeated exposures to S typhi may have occurred, do not have any clinical relevance in the absence of a positive isolate of the causal organism OR demonstration of rising titers of antibodies by testing 2 or more serum samples 1-2 weeks apart.

Researchers from different parts of India have reported that in normally healthy blood donors, the baseline titre for antibodies to "O" and "H" antigens of



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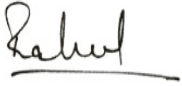
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Salmonella enterica serotype typhi was 1:40 and hence, based on the above results, it could be recommended to use a cutoff level of >1:80 for a single antibody test titre. Similarly, baseline titre for antibody to H antigen of Salmonella enterica serotype paratyphi A and paratyphi B was 1:80 and the cutoff level was \geq 1:160 for a single antibody test titre.			

** End of Report**



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MD
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