



**Patient Name** : Mr. GURVINDER SINGH S/O HANSA SINGH  
**Age/Gender** : 27 YRS 6 M7 M/M  
**UHID/MR No** : ADIL 0000943123  
**Visit ID** : MDEL943565  
**Ref Doctor** : Dr.SELF  
**Client Name** : DEEP DIAGNOSTIC LAB & X-RAY

**Specimen Drawn ON** : 31/Aug/2024 10:23AM  
**Specimen Received ON** : 01/Sep/2024 04:00AM  
**Report Date** : 01/Sep/2024 06:07AM  
**Client Code** : HR056  
**Barcode No** : B7895387  
**Ref Customer** : SELF

DEPARTMENT OF HAEMATOLOGY

SWASTHYA CARE IV

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE BLOOD COUNT(CBC)23</b>				
R.B.C	<b>3.98</b>	Millions/cumm	4.5-5.5	Impedance variation
Haemoglobin	<b>11.7</b>	g/dl	13-17	Spectrophotometry
Packed Cell Volume	<b>36.60</b>	%	40.0-50.0	Analogical Integration
MCV	91.96	fl	80-100	
MCH	29.4	pg	27.0-32.0	Calculated
MCHC	31.97	g/dl	27.0-48.0	Calculated
RDW-CV	<b>16.7</b>	%	11.5-14.0	Calculated
Platelet Count	154	x1000/uL	150-450	Impedance Variation
Total WBC Count	<b>11100</b>	/cumm	4000-10000	Impedance Variation
TNC	11.27			
MPV	10.20	%	9.1-11.9	Calculated
PCT	<b>0.13</b>	%	0.18-0.39	Calculated
PDW	<b>21.70</b>	%	9.0-15.0	Calculated
<b>Differential Leucocyte Count</b>				
Neutrophil	68	%	40.0-80.0	Flow cytometry/manual
Lymphocyte	25	%	20.0-40.0	Flow cytometry/manual
Monocytes	06	%	2-10	Flow cytometry/manual
Eosinophils	01	%	01-06	Flow cytometry/manual
Basophils	00	%	0-1	Flow cytometry/manual
Absolute Neutrophils	7.55	1000/ $\mu$ L	2.00-7.00	
Absolute Lymphocytes	2.78	1000/ $\mu$ L	1.00-3.00	
Absolute Monocytes	0.67	1000/ $\mu$ L	0.20-1.00	
Absolute Eosinophils	0.11	1000/ $\mu$ L	0.02-0.50	
Neutrophil-Lymphocyte Ratio	2.72			Calculated
Lymphocyte-Monocyte Ratio	4			Calculated
Platelet-Lymphocyte Ratio	6			Calculated

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INC 2442

**Patient Name** : Mr. GURVINDER SINGH S/O HANSA SINGH  
**Age/Gender** : 27 YRS 6 M7 M/M  
**UHID/MR No** : ADEL.0000943123  
**Visit ID** : MDEL943565  
**Ref Doctor** : Dr. SELF  
**Client Name** : DEL P DIAGNOSTIC LAB & X-RAY

**Specimen Drawn ON** : 31/Aug/2024 10:23AM  
**Specimen Received ON** : 01/Sep/2024 02:54AM  
**Report Date** : 01/Sep/2024 03:57AM  
**Client Code** : HR056  
**Barcode No** : B7895386  
**Ref Customer** : SELF

DEPARTMENT OF BIOCHEMISTRY  
 SWASTHYA CARE IV

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT)-EXTENDED</b>				
Sample Type : SERUM				
Bilirubin Total	0.27	mg/dl	<1.1	Diazotized Sulfanilic
Bilirubin Direct	0.10	mg/dl	0-0.3	Diazotized Sulfanilic
Bilirubin Indirect	0.17	mg/dl	0.30-1.00	Calculated
SGOT (AST)	8.01	U/l	<31.0	FCC without pyridoxal phosphate
SGPT (ALT)	7.6	U/L	<33.0	FCC without pyridoxal phosphate
Alkaline Phosphatase (ALP)	95.0	U/L	40-129	Spectrophotometry
Gamma Glutamyl Transferase (GGT)	25.6	U/l	15-60	L-Gamma glutamyl 3-carboxy 4-nitrobenzide substrate
Protein Total	6.2	g/dl	6.6-8.7	Biuret
Albumin (Serum)	4.23	g/dl	3.5-5.5	Bromocresol Green (BCG)
Globulin	1.97	g/dl	2.50-3.50	Calculated
A/G Ratio	2.15		1.5-2.5	Calculated

**Interpretation:-** Liver blood tests, or liver function tests, are used to detect and diagnose disease or inflammation of the liver. Elevated aminotransferase (ALT, AST) levels are measured as well as alkaline phosphatase, albumin, and bilirubin. Some diseases that cause abnormal levels of ALT and AST include hepatitis A, B, and C, cirrhosis, iron overload, and Tylenol liver damage. Medications also cause elevated liver enzymes. There are less common conditions and diseases that also cause elevated liver enzyme levels. Liver blood tests, or liver function tests, are used to detect and diagnose disease or inflammation of the liver. Elevated aminotransferase (ALT, AST) levels are measured as well as alkaline phosphatase, albumin, and bilirubin. Some diseases that cause abnormal levels of ALT and AST include hepatitis A, B, and C, cirrhosis, iron overload, and Tylenol liver damage. Medications also cause elevated liver enzymes. There are less common conditions and diseases that also cause elevated liver enzyme levels.

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