LAXMI
CLINICAL LABORATORY

KPME Reg. No : UKA00513ALMDL

ಲಕ್ಷ್ಮೀ ಕ್ಲಿನಿಕಲ್ ಲ್ಯಾಬೊರೇಟರಿ, ಮುಂಡಗೋಡ

COMPUTERIZED LABORATORY

Chabbi Hospital, Y. B. Road, **MUNDGOD (U.K.) - 581 349**

94485 71171 jkanade123@gmail.com

Name	: **Mr. HEMANNAGOUDA PATIL**	Reg No	: **R-0012014**	
Age / Gender	: **67Years /Male**	Lab Serial No	:	
Referred By	: Dr. SELF	Collected On	: 07-Jun-2024	/12:15:17 pm
Referring Customer	:	Received On	: 07-Jun-2024	/12:15:17 pm
Sample Tested In	: Whole Blood	Reported On	: 07-Jun-2024	/ 8:46:56 pm
Collection Center	: MAIN LAB	Report Status	: Final Report	

HAEMATOLOGY

Test Description	Result	Units	Biological Reff Intervals
HB %			
Hameoglobin	**6.9**	gms/dL	Male : 13.5 - 18.0 Female : 12.0 - 15.0

Interpretation ::

BIOCHEMISTRY

Test Description	Result	Units	Biological Reff Intervals
BLOOD UREA			
BLOOD UREA	**125.9**	mg/dL	15 - 45

Interpretation ::

A blood urea nitrogen (BUN) test measures the amount of nitrogen in your blood that comes from the waste product urea. Urea is made when protein is broken down in your body. Urea is made in the liver and passed out of your body in the urine. A BUN test is done to see how well your kidneys are working.

SERUM CREATININE			
Creatinine	**7.55**	mg/dL	0.6 - 1.6

Interpretation ::

--------- End of the Report ---------

Approved by

LAB TECHNICIAN
Analyzed & Reported by

Apollo TOUCHING LIVES

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Patient Name	: Mr.HEMANNAGOUDA PATIL	Collected	: 07/Jun/2024 06:33PM
Age/Gender	: 67 Y 0 M 0 D /M	Received	: 08/Jun/2024 09:56AM
UHID/MR No	: DHLI.0000163929	Reported	: 08/Jun/2024 11:30AM
Visit ID	: DHLIOPV172344	Status	: Final Report
Ref Doctor	: Dr.SELF	Client Name	: PUP SHREYA DIAGNOSTIC CENTER
IP/OP NO	:	Center location	: Hubli,Hubli

DEPARTMENT OF SEROLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
HIV I AND II ANTIBODIES , *SERUM*	0.09	s/co	<1.0 Non Reactive >=~1.0 Reactive	CLIA

Comment:

RESULTS IN S/C UNITS	INTERPRETATION
< 0.9	NON-REACTIVE
0.9 - 1.1	EQUIVOCAL
> 1.1	REACTIVE

This test uses 4 recombinant antigens derived from HIV-1 core (p24), HIV-1 envelope (env 10 and env13) and HIV-2 envelope (env A1). These antigens detect antibodies to HIV-1 and antibodies to HIV-2 in the same test.
Reactive results suggest the presence of HIV-1 and/or HIV-2 infection, but it is not diagnostic for HIV infection and should be considered preliminary. The results from this or any other diagnostic kit should be used and interpreted only in the context of the overall clinical picture.
A negative test result does not exclude the possibility of exposure to or infection with HIV. Levels of HIV antibodies may be undetectable in the early stages of infection

Test Name	Result	Unit	Bio. Ref. Range	Method
HBsAg , *SERUM*	0.11	S/C UNITS		ECLIA

Comment:

VALUE IN S/C UNITS	INTERPRETATION
<0.90	NEGATIVE
0.90 - 1.00	INDETERMINATE
> 1.00	POSITIVE

Interpretation:
- This is a screening assay which detects the first serological marker of Hepatitis B as early as 4-16 weeks after exposure.
- It persists during acute illness and usually disappears 12-20 weeks after onset of symptoms. Persistence of HBsAg for more than 6 months indicates development of carrier state or chronic liver disease
- A negative test result does not exclude with certainty a possible exposure to or an infection with the hepatitis B virus.

CAP ACCREDITED COLLEGE of AMERICAN PATHOLOGISTS

DR.MIR SALMAN ALI
M.B.B.S,MD
Consultant Microbiologist

SIN No:SE02164375
This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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DEPARTMENT OF SEROLOGY

- It is recommended that a positive result of HBsAg must be be confirmed using a different enzyme immunoassay kit or by using a confirmatory assay based on neutralisation with human anti hepatitis B surface antibody and/or HBV PCR
- Based upon clinical history it may become necessary to test for presence of other markers of hepatitis B virus infection.

APOLLO TRUST ASSURED QUALITY AFFORDABLE AAA+

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DEPARTMENT OF SEROLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
ANTI HCV , *SERUM*	22.5	S/Co	0-0.99	ECLIA

Comment:

VALUE IN S/C UNITS	RESULTS
<0.99	NON-REACTIVE
0.99 - 1.00	INDETERMINATE
> 1.00	REACTIVE

Interpretation:

• This is a Screening assay.HCV Antibodies are usually not detectable during the first 2 months following infection, and they are usually detectable by the late convalescent stage (>6 months of onset) of infection.

• A positive result indicates the presence of Hepatitis C virus (HCV) – specific IgG antibodies due to past (resolved) or chronic Hepatitis C. CDC recommendation on anti-HCV testing includes the use of method specific optimal signal-to-cut-off ratio in interpretation & reporting results. For s/co ratio - between 1 to 6- further supplemental tests are suggested for confirmation, while s/co ratio > or = 6 associated with 95% or more high probability of being true positive.

• Suggested supplemental test for confirmation are direct detection of HCV RNA by the reverse transcriptase-PCR (RT-PCR)

• An indeterminate result indicates that HCV-specific IgG antibodies may or may not be present.Indeterminate results should be interpreted along with patient's risk factors for HCV infection and clinical findings. Individuals at risk for HCV infection with indeterminate results should be retested with an HCV antibody confirmatory test in 1 to 2 months to determine the definitive HCV antibody status.

• A non-reactive result does not exclude the possibility of exposure to or infection with HCV.Patients with auto-immune liver diseases, renal disorders may show falsely reactive results.

*** End Of Report ***

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