

## KPME Reg. No: UKA00513ALMDL

# ಲಕ್ಷ್ಮೀ ಕ್ಲಿನಿಕಲ್ ಲ್ಯಾಬೊರೇಟರಿ, ಮುಂಡಗೋಡ

### **COMPUTERIZED LABORATORY**

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

94485 71171 

ikanade123@gmail.com

i

Name Age / Gender Referred By

: Mr. HEMANNAGOUDA PATIL Reg No

:67Years /Male : Dr. SELF

Lab Serial No

R-0012014 07-Jun-2024

/12:15:17 pm

Referring Customer Sample Tested In Collection Center

Collected On Received On Reported On

07-Jun-2024 07-Jun-2024 /12:15:17 pm

: Whole Blood : MAIN LAB

Report Status

: Final Report

/ 8:46:56 pm

#### HAEMATOLOGY

**Test Description** 

Result

Units

**Biological Reff Intervals** 

**HB %** 

Hameoglobin

6.9

ams/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

Londa

LAB TECHNICIAN Analyzed & Reported by

Page 1 of 1

NOT FOR MEDICO-LEGAL PURPOSE. EACH REPORT NEEDS TO BE CORRELATED CLINICALLY FOR A FINAL DIAGNOSIS. IN CASE OF ANY DISCREPANCY IN REPORT DUE TO TYPING ERROR KINDLY GET IT RECTIFIED IMMEDIATLY.





Patient Name

: Mr.HEMANNAGOUDA PATIL

Age/Gender

:67YOMOD/M UHID/MR No : DHL1.0000163929

Visit ID Ref Doctor : DHLIOPV172344

IP/OP NO

: Dr.SELF

Collected

: 07/Jun/2024 06:33PM

Received

: 08/Jun/2024 09:56AM

Reported

: 08/Jun/2024 11:30AM

Status

: Final Report

Client Name

: PUP SHREYA DIAGNOSTIC CENTER

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	CLIA
,	0.09	3/00	>=~1 0 Reactive	

#### 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 Al). 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.

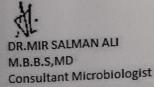
A negative test result does not exclude the possibility of exposure to or infection with HIV. Levels of HIV antibodies may be undetectable in the early stages of infection

Test Name	Result	Unit	Bio. Ref. Range	Method
HBsAq, SERUM	0.11/4/0	S/C UNITS		ECLIA

#### Comment:

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

- 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.



COLLEGE of AMERICAN PATHOLOGISTS



SIN No:SE02164375

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad





**Patient Name** 

: Mr.HEMANNAGOUDA PATIL

Age/Gender

:67YOMOD/M

UHID/MR No Visit ID

: DHLI.0000163929 : DHLIOPV172344

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Center location

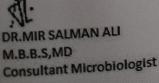
: Hubli, Hubli

#### **DEPARTMENT OF SEROLOGY**

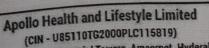
• It is recommended that a positive result of HBsAg must be be confirmed using a different enzyme immunoassay kit or by using a confirmatory assay based on neutralisation with human anti hepatitis B surface antibody and/or HBV PCR

• Based upon clinical history it may become necessary to test for presence of other markers of hepatitis B virus infection.

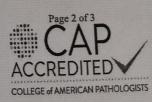




This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



\*\* Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana











Patient Name

: Mr.HEMANNAGOUDA PATIL

Age/Gender

:67YOMOD/M

UHID/MR No Visit ID

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Reported

: 08/Jun/2024 11:32AM

Status

: Final Report

Client Name

: PUP SHREYA DIAGNOSTIC CENTER

: Hubli, Hubli Center location

#### DEPARTMENT OF SEROLOGY

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

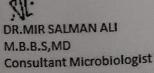
#### Comment:

VALUE IN S/C UNITS	RESULTS	
<0.99	NON-REACTIVE	, civinia interestro
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 \*\*\*



This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

