



GURUBANI LAB

Computerised Janch Ghar

Sadar Hospital, Opp. Lepo Road, Hazaribag (Jh.)
Working Hour : 7.00 am to 9.00 pm



Name : RAJENDRA SAW
Sex : M Age : 52 Years
Refd. by : Dr. SELF
GURUBANI LAB HAZARIBAG ID : 20240705007

Received on : 05/07/2024
Reported on : 05/07/2024



| Investigation | Result | Unit | Expected Value |
|---------------|--------|------|----------------|
|---------------|--------|------|----------------|

| | | | |
|------------------------------|---------------------|--|---------------------|
| H.C.V. (Card Test) | NON-REACTIVE | | NON-REACTIVE |
|------------------------------|---------------------|--|---------------------|

HCV Rapid Test is performed for qualitative detection of antibodies to hepatitis C virus (HCV) in human serum, plasma, and whole blood samples. HCV rapid test is used as an aid in the diagnosis of Hepatitis C infection. Hepatitis C is a major cause of liver inflammation, liver disease & liver cancer. HCV is a single stranded positive sense RNA virus belonging to the family of Flaviviridae. Many people who are infected with the hepatitis C virus do not show the symptoms, thus are not aware of the infection. Serological evidence of HCV infection may be obtained by testing for HCV antigens or antibodies in serum of individuals suspected of hepatitis C infection. Antibodies to HCV can be detected throughout infection period. Therefore, the use of highly sensitive antibody assays is the primary approach in serodiagnosis of HCV infection.

| | | | |
|-------------------|-----------------|--------------|---------------------|
| Blood Urea | (H) 83.0 | mg/dl | 0 - 40 mg/dl |
|-------------------|-----------------|--------------|---------------------|

Sample - Serum, Method- CDC UREASE/GLDH

Urea is the major Nitrogen - containing metabolic product of protein catabolism in humans , accounting for more than 75% of the non-protein nitrogen eventually excreted . It is synthesized in the liver from the ammonia produced as a result of deamination of amino acids. Urea is transported by blood to the kidneys from where it is excreted . Increased Urea levels are found in liver diseases , renal diseases , urinary obstruction , shock , congestive heart failure , and burns . Decreased Urea levels are found in malnutrition , hepatic failure and pregnancy .

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Dr. Vikash Kumar
M.B.B.S.

PRAVEEN KUMAR
D.M.L.T. Reg No. 606388
Examined By

For Any Technical or typing error resampling is advised and results will be rectified Not For Medico Legal Purpose

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| | | | |
|--|----------|-------|-----------------|
| Serum Creatinine <small>Sample - Serum, Method- ENZYMATIC JFCC</small> | (H) 7.89 | mg/dl | 0.6 - 1.4 mg/dl |
|--|----------|-------|-----------------|

Serum creatinine levels can be used to diagnose renal insufficiency. Serum creatinine is a more specific and sensitive indicator of renal disease than BUN. It is increased in impaired kidney function, muscle disease, prerenal azotemia, postrenal azotemia.

| | | | |
|--|-----|-------|-----------------|
| Serum Potassium <small>Sample- Serum, Method- ISE Direct</small> | 3.7 | mEq/L | 3.5 - 5.5 mEq/L |
|--|-----|-------|-----------------|

It is used in diagnosis and monitoring hyperkalemia and hypokalemia in various conditions, eg. treatment of diabetic coma, renal failure, severe fluid and electrolyte loss, effect of certain drugs and diagnosis of familial hyperkalemic periodic paralysis and hypokalemic paralysis.

**** End of the report ****

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Dr. Vikash Kumar
MB.B.S.

PRAVEEN KUMAR
D.M.L.T. Reg No - 068008

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