

**SHREE VEERABHADRESHWARA DIAGNOSTICS****ಶ್ರೀ ವೀರಭದ್ರೇಶ್ವರ ಡಯಾಗ್ನೋಸ್ಟಿಕ್ಸ್**

Near 5 road circle opposite Marikamba Tyres and Rayappa Hulekal School

Sirsi (U.K) 581 401

Ph:7892637060 / 9845753744 Email id:shreevd45@gmail.com

Patient Name : MRS. SUMITRA B TALAVAR

Age / Gender : 67 years / Female

Patient ID :7184

Client : Veerabhadreswra Laboratory Sirsi-UI217

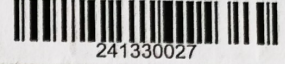
Referral : Dr. GOVT DIALYSIS

Collection Time : May 12, 2024, 09:35 a.m.

Receiving Time : May 12, 2024, 10:23 a.m.

Reporting Time : May 12, 2024, 02:36 p.m.

Sample ID :



241330027

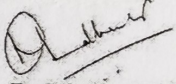
Test Description	Value(s)	Reference Range	Unit(s)
<b>HIV 1 &amp; 2 Antibodies (ELISA)</b>			
HIV 1 & 2 Antibodies Method : ELISA	Non Reactive: 0.30	>1.0 reactive <1.0 Non reactive	

**Interpretation**

1. A non-reactive result implies that no anti HIV I or Anti II antibodies have been detected in the sample by this method. This means that either the patient has not been exposed to HIV or HIV II infection or the sample has tested during the window phase (before the development of detectable levels of antibodies).
2. A provisionally reactive or borderline reactive result suggests the possibility of HIV I / HIV II infection and confirmatory diagnosis should be done by WESTERN BLOT tests.

**\*\*END OF REPORT\*\***

Verified By : Imran

  
**Dr Madhumati**  
MBBS MD Microbiology  
67106  
Consultant Microbiologis

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Test Description	Value(s)	Reference Range	Unit(s)
<b>HCV ANTIBODIES -ELISA</b>			
HCV ANTIBODIES Method : ELISA	Non Reactive: 0.04	>1.0 reactive <1.0 Non reactive	

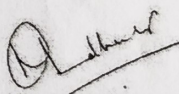
**Comments:**

Hepatitis C Virus was identified in 1989 as the main aetiological agent of non-A, non-B hepatitis (NANBH) accounting for greater than 90% of posttransfusion hepatitis cases. HCV is a spherical virus of about 30-60 nm in diameter with single positive stranded RNA and is related to the family flaviviridae. It is considered to be the major cause of acute chronic hepatitis, liver cirrhosis and hepatocellular carcinoma throughout the world. Antibodies to HCV can be detected throughout virtually the total infection period. Therefore, the use of highly sensitive antibody assays is the primary approach in serodiagnosis of HCV infection. The diagnosis of hepatitis C can be easily made by finding elevated serum ALT levels and presence of anti HCV in serum/plasma.

Specimens with Sample cut of OD values 1.00 are considered reactive. This is an Antibody detection test and results might depend on immune response of the individual. Patients with auto-immune liver diseases may show false reactive results. HCV Antibodies might take 2 weeks to 5 months to appear after acquiring HCV infection. This antibody may never become detectable in 5-10% of patients with acute hepatitis C, and levels of anti-HCV may rarely become undetectable after recovery. In patients with chronic hepatitis C, anti-HCV is detectable in >95% of cases.

**\*\*END OF REPORT\*\***

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Test Description	Value(s)	Reference Range	Unit(s)
<b>HEPATITIS B SURFACE ANTIGEN (HBSAg) (ELISA)</b>			
HEPATITIS B SURFACE ANTIGEN (HBSAg) Method : ELISA	Non Reactive: 0.36	<1.0 Non Reactive >1.0 Reactive	

**Remark:**

All Reactive results must be confirmed by Neutralizing confirmatory test or by HBV DNA detection assay.

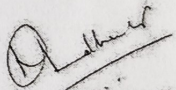
**Note**

- 1.Reactive test result indicates presence of Hepatitis B Surface Antigen. It cannot differentiate between the stages of Hepatitis B viral infection.
2. Non-Reactive test result indicates absence of Hepatitis B Surface Antigen.
3. False positive results may be observed in patients receiving mouse monoclonal antibodies, on heparin therapy, on biotin supplements for diagnosis or therapy, presence of heterophilic antibodies in serum or after HBV vaccination for transient period of time.
4. False negative reaction may be due to processing of sample collected early in the course of disease or presence of mutant forms of HBsAg.
5. For monitoring HBsAg levels, Quantitative HBsAg assay is recommended

\*\*END OF REPORT\*\*



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Vishwa Seva Samiti  
**Dr. Lalita R. Kamat Memorial Pathological Laboratory**  
 Rotary Charitable Hospital, SIRSI – 581 401  
 Ph: 08384 – 226980, 228490

NAME	SUMITRA TALWAR	RECEIVED TIME	12.30 PM
AGE	55 YRS	REPORTED TIME	1.45 PM
SEX	FEMALE	DATE	29.05.2024
REF DR	RAJESH SHET	LAB NO	1898

<u>TEST DESCRIPTION</u>	<u>OBSERVED VALUE</u>	<u>REFERENCE RANGE</u>
HAEMOGLOBIN	: 9.9 gm/dl	: 11.5-16.0 gm/dl(F) 12.0 – 18.0 gm/dl(M)
RED BLOOD CELLS COUNT	: 3.37 millions/cu.mm	: 3.8-5.8 millions/cu.mm
TOTAL LEUCOCYTE COUNT	: 9,000 Cells/cu.mm	: 4000-11,000 Cells/cu.mm
P C V	: 25.5 %	: 33 – 45 %
M C V	: 75.6 fL	: 78.0-94.0 fL
M C H	: 29.5 picogram	: 27.0-32.0 picograms
M C H C	: 39.0 g/dl	: 32.0-38.0 g/dl
PLATELET COUNT	: 1.14 Lakh/cu.mm	: 1.50-4.5 Lakh/cu.mm
<b>DIFFERENTIAL COUNT</b>		
NEUTROPHILS	: 86 %	: 40-75 %
LYMPHOCYTES	: 11 %	: 20-45 %
EOSINOPHILS	: 01 %	: 01-06 %
MONOCYTES	: 02 %	: 01-10 %
BASOPHILS	: 00 %	: 00-01 %

**DENGUE TEST**

(Screening Method)


NS1Ag	:	NEGATIVE
IgG	:	NEGATIVE
IgM	:	NEGATIVE

**TYPHI TEST**

(Screening Method)

IgG	:	NEGATIVE
IgM	:	NEGATIVE

SODIUM	: 139.5 mmol/L	: 135-145 mmol/L
POTTASIAM	: 4.89 mmol/L	: 3.5-5.5 mmol/L

  
 TECHNOLOGIST

Vishwa Seva Samiti  
**Dr. Lalita R. Kamat Memorial Pathological Laboratory**  
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 Ph: 08384 - 226980, 228490

NAME	SUMITRA TALWAR	RECEIVED TIME	12.30 PM
AGE	55 YRS	REPORTED TIME	
SEX	FEMALE	DATE	29.05.2024
REF DR	RAJESH SHET	LAB NO	18/58

TEST DESCRIPTION	OBSERVED VALUE	REFERENCE RANGE
RANDOM BLOOD SUGAR	: 108.0 mg/dl	: 80.0-140.0 mg/dl
SERUM CREATININE	: 9.1 mg/dl	: Male 0.5-1.4 mg/dl : Female 0.6 - 1.1 mg/dl
SERUM TOTAL BILIRUBIN	: 0.9 mg/dl	: UP TO 1.2 mg/dl
SERUM DIRECT BILIRUBIN	: 0.2 mg/dl	: UP TO 0.4 mg/dl
S.G.O.T (A.S.T)	: 48.0 U/L	: 10-35 U/L
S.G.P.T (A.L.T)	: 53.0 U/L	: 0-38.0 U/L

**URINE ANALYSIS**

**PHYSICAL EXAMINATION**

Colour : Pale yellow  
 Appearance : S TURBID  
 PH : 7.0  
 Specific Gravity : 1.015

**CHEMICAL EXAMINATION**

Sugar : NIL  
 Albumin : PRESENT(+)  
 Bile salt : ABSENT  
 Bile pigment : ABSENT

**MICROSCOPIC EXAMINATION**

Pus cells : 6 - 8 cells/hpf  
 Epithelial cells : NUMEROUS cells/hpf  
 RBC'S : 10 - 12 cells/hpf  
 Casts : Not Seen  
 Crystals : Not Seen  
 Bacilli : Not Seen  
 Others : Not Seen

  
 TECHNOLOGIST