



LABORATORY REPORT

NAME	██████████	REFERRED BY	██████████	VISIT NO	: ██████████
AGE	: ██████████		██████████	COLLECTED ON	: ██████████
GENDER	: ██████████	LAB MR#	: ██████████	RECEIVED ON	: ██████████
OP / IP / DG #	:			APPROVED ON	██████████
				REPORT STATUS	: Final Report



Test Name	Result	Biological Ref. Interval	Unit
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Amfit Healthy Womens Check - 2

HAEMATOLOGY

Complete Blood Counts (Whole Blood - EDTA)

(Automated Hematology Analyzer & Microscopy)

Hemoglobin <i>photometric method</i>	12.8	12.0 - 15.0	g/dL
RBC Count <i>coulter principle</i>	4.2	3.8 - 4.8	10 ⁶ /μL
Hematocrit	37.6 L	40 - 50	%
MCV(Mean Corpuscular Volume) <i>Derived from RBC Histogram</i>	88.5	83 - 101	fL
MCH(Mean Corpuscular Hemoglobin) <i>Calculated</i>	30.2	27 - 32	pg
MCHC(Mean Corpuscular Hemoglobin Concentration) <i>Calculated</i>	34.1	31.5 - 34.5	g/dL
RDW <i>Derived from RBC Histogram</i>	13.3	11.6 - 14	%
Total Leukocyte Count <i>coulter principle</i>	7.1	4.0 - 10.0	10 ³ /μl

Differential count % (VCSn Technology & light microscopy)

Neutrophils	62.0	40-80	%
Lymphocytes	30.0	20-40	%
Monocytes	6.0	2-10	%
Eosinophils	3.0	1-6	%
Basophils	1.0	0-1	%

Differential Counts, Absolute(calculated)

Absolute Neutrophil Count <i>VCSn/Calculated</i>	4.40	2.0-7.0	10 ³ /μl
Absolute Lymphocyte Count <i>VCSn/Calculated</i>	2.13	1.0-3.0	10 ³ /μl
Absolute Monocyte Count	0.43	0.2 - 1.0	10 ³ /μl
Absolute Eosinophil Count (AEC) <i>VCSn/Calculated</i>	0.21	0.02-0.5	10 ³ /μl
Absolute Basophil Count	0.00	0.02 - 0.1	10 ³ /μl
Platelet Count <i>coulter principle</i>	299	150 - 410	10 ³ /μl
MPV	8.9	7.5 - 11.5	fL

This is an electronically authenticated laboratory report.

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Amfit Healthy Womens Check - 2			

BIOCHEMISTRY

Ferritin (Serum)

Ferritin ECLIA	150.30	30-400	ng/mL
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Interpretation:

Ferritin is iron storage protein. Determination of ferritin is necessary in iron deficiency anemia , monitoring iron therapy and in differential diagnosis of anemia

Elevation levels seen in

- Hemochromatosis
- Porphyria
- Rheumatoid arthrosis
- Leukaemia
- Hodgkin's lymphoma
- Liver disease
- Multiple blood transfusion
- Acute phase reactant
- Increased in all inflammatory condition

Decreased level

- Iron deficiency anemia

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MC-2751

In collaboration with

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Amfit Healthy Womens Check - 2

Serum Iron (Serum)

Iron	61.9	59-158	µg/dL
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FerroZine Colorimetric Assay

Interpretation:

Iron is an essential trace mineral element which forms an important component of hemoglobin, metallocompounds and Vitamin A. Deficiency of iron, leads to microcytic hypochromic anemia. The toxic effects of iron are deposition of iron in various organs of the body and hemochromatosis.

Iron Binding Capacity - Total (TIBC) (Serum)

Iron	61.9	59-158	µg/dL
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FerroZine Colorimetric Assay

Unsaturated Iron Binding Capacity (UIBC)	189.5	125 - 345	µg/dL
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Direct determination with FerroZine

Iron Binding Capacity - Total (TIBC)	251.4	228-428	µg/dL
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Calculation

Transferrin Saturation Index (TSI)	24.6	16-45	
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Calculation

Vitamin B12 (Serum)

Vitamin B12	342.0	197-771	pg/mL
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ECLIA

Interpretation:

Vitamin B12 also referred to as cobalamin is a water soluble vitamin. The uptake in the gastro intestinal track depends on intrinsic factor, which is synthesised by gastric parietal cells

Deficiency state:

- >Lack of intrinsic factor due to autoimmune atrophic gastritis
- >Mal-absorption due to gastrectomy
- >Inflammatory bowel disease
- >Dietary deficiency (strict vegans)
- >Vit B12 deficiency results in megaloblastic anaemia, peripheral neuropathy, dementia and depression

Increased levels:

- >VIT B12 supplement intake
- >Polycythaemia Vera.



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Amfit Healthy Womens Check - 2

 Consultant- Biochemist	 MBBS/MD (Pathology)
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Disclaimer:

- All results released pertain to the specimen as received by the lab for testing and under the assumption that the patient indicated or identified on the bill/test requisition form is the owner of the specimen.
- Clinical details and consent forms, especially in Genetic testing, histopathology, as well as wherever applicable, are mandatory to be accompanied with the test requisition form. The non-availability of such information may lead to delay in reporting as well as misinterpretation of test results. The lab will not be responsible for any such delays or misinterpretations thereof.
- Test results are dependent on the quality of the sample received by the lab. In case the samples are preprocessed elsewhere (e.g., paraffin blocks), results may be compromised.
- Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
- Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.
- Genetic reports as well as reports of other tests should be correlated with clinical details and other available test reports by a qualified medical practitioner. Genetic counselling is advised in genetic test reports by a qualified genetic counsellor, medical practitioner or both.
- Samples will be discarded post processing after a specified period as per the laboratory's retention policy. Kindly get in touch with the lab for more information.
- If accidental damage, loss, or destruction of the specimen is not attributable to any direct or negligent act or omission on the part of Ampath Labs or its employees, Ampath shall in no event be liable. Ampath lab's liability for a lack of services, or other mistakes and omissions, shall be restricted to the amount of the patient's payment for the pertinent laboratory services.