



LABORATORY REPORT

NAME	: MR.SI0653	REFERRED BY	: SELF	VISIT NO	: VAMP26148100
AGE	: 40Y 0M 0D	ZERO TARIFF CLIENT CODE		COLLECTED ON	: 21-04-2026 10:00
GENDER	: Male	LAB MR#	: AAMP01479379	RECEIVED ON	: 21-04-2026 18:11
OP / IP / DG #	:			APPROVED ON	: 22-04-2026 16:36
				REPORT STATUS	: Final Report



Test Name	Result	Biological Ref. Interval	Unit
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Hepatitis B Panel - Chronic

SEROLOGY AND IMMUNOLOGY

Hepatitis B Envelope Antigen (HBeAg) (Serum)

Hepatitis B Envelope Antigen ELISA	0.04	Negative : <0.9 Equivocal : 0.9-1.1 Positive : >1.1	Index
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Interpretation:

HBeAg is a marker of active HBV replication in the liver indicating a highly infectious state. It appears within 1 week after appearance of HBsAg and is found only when HBsAg is present. HBeAg appears early in disease before biochemical changes and disappears after liver enzymes peak which is usually after 3-6 weeks. Persistence for more than 20 weeks suggests progression to Chronic carrier state and possible Chronic Hepatitis. It is the best predictor of maternal infectivity (90%) to untreated neonates at the time of delivery. The presence of HBeAg in chronic infection usually indicates active hepatic replication of the virus and also a higher probability of liver damage and infectivity. However certain wild type strains with pre-core mutation may undergo active replication even in the absence of HBeAg.

Hepatitis B Envelope Antibody (Anti-HBe) (Serum)

Hepatitis B envelope Antibody ELISA	0.02	Negative : <0.9 Equivocal : 0.9-1.1 Positive : >1.1	Index
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Interpretation:

Anti HBe appears after HBeAg disappears and remains detectable for several years. Persistence indicates decreasing infectivity suggesting good prognosis for resolution of acute infection. Association of Anti HBe with Anti HBe in the absence of HBsAg and Anti HBs confirms recent acute infection. Anti HBe is an indicator for resolution of acute infection and reduced level of infectivity.

Hepatitis B surface antigen (HBsAg) - Screening (Serum)

HBsAg CLIA	0.01	Non-reactive : <0.05 Reactive : >0.05	IU/mL
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Interpretation:

HBsAg is the first marker to appear after Hepatitis B infection and may be observed 2 or 3 weeks before the clinical and biological symptoms of the disease appear. Its period of presence may be very short (a few days) or very long (several years). HBs Ag persisting beyond 6 months in the serum denotes "chronic hepatitis". Because of the existence of numerous asymptomatic chronic carriers, hepatitis B represents an important transfusion hazard and the prevention of the transmission is based upon the detection of the HBs Ag at the time of each blood donation. This is a screening test and all positive samples must be confirmed by confirmatory tests like Neutralization assay or PCR.

False positive results can be obtained due to the presence of other antigens or elevated levels of Rheumatoid factor (RF), although this is seen in less than 1% of the samples tested.





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Hepatitis B Panel - Chronic

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Disclaimer:

1. 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.
2. 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.
3. 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.
4. Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
5. Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.
6. 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.
7. 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.
8. 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.

