

BASIC DETAILS OF CARE FOR HAPPINESS TRUST

CARE FOR HAPPINESS TRUST REG NO

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CARE FOR HAPPINESS TRUST PAN CARD NO

CAR FOR HAPPINESS TRUST 80G NO

CAR FOR HAPPINESS TRUST 12A NO

CAR FOR HAPPINESS TRUST 12A NO

CAR FOR HAPPINESS TRUST MSME NO

CAR FOR HAPPINESS TRUST MSME NO

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Kidney lospital & Lifeline Medica Institutions

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DEPARTMENT OF LABORATORY

REPORTS

Collected: 03-AUG-2025 08:00 AM CR.NO. : 1061459 Patient Name : B/O SANDEEP KAUR Reported: 03-AUG-2025 09:25 AM Lab No : 3287260 Gender : MALE

4 DAYS Age: Room No : NICU BED NO: 31C Status : FINAL Doctor Incharge: DR.PRABAKARAN.G,MD,DM

TEST

OBSERVED VALUE

BIOLOGICAL REFERENCE

INTERPRETATIONS:

The complete blood count, CBC is often used as a broad screening test that evaluates the three types of cells that circulate in the blood & helps to determine an individual's general health status. It can be used to :

- Screen for a wide range of conditions and diseases.
- Help diagnose various conditions, such as anemia, infection, inflammation, bleeding disorder or leukemia.
- Monitor the condition and/or effectiveness of treatment after a diagnosis is established.
- Monitor treatment that is known to affect blood cells, such as chemotherapy or radiation therapy.

C. REACTIVE PROTEIN, QUANTITATIVE : 4.78

METHOD: NEPHELOMETRIC ASSAY

BIOLOGICAL REFERENCE :

0 - 6 MG/L

INTERPRETATIONS:

CRP is one of the proteins commonly referred to as the Acute Phase reactants. CRP is distinguished by its rapid response to infection or trauma. Testing for CRP is indicated in following situations monitoring recovery from Surgery, MI, Organ Transplant, IBD, RA & other Infectious Diseases. CRP in Autoimmune disease may show little or an Increase unless infection is present. Level may not increase in pregnancy, angina, seizures, asthma and Common cold due to viral conditions.

Elevated CRP are associated with Inflammatory Disorders, tissue necrosis or infections & can be used to detect & monitor Septicemia with follow up values to response to therapy.

- End of Report ----

Sulphili

DR. SURABHI (CONSULTANT PATHOLOGIST)

Prepared By: NAVEEN KUMAR (1210)

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mg/L







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Doctor Incharge: DR.PRABAKARAN.G,MD,DM Room No : NICU BED NO: 31C Status : INTERIM

| TEST | OBSERVED VALUE | | |
|-----------------------------------|----------------|--------|--|
| SEPTIC SCREEN ANALYSIS | | | |
| RBC | | | |
| NUCLEATED RBC | | | |
| WBC | | /Cu mm | |
| CORRECTED WBC ON SMEAR | | | |
| NEUTROPHILS+BANDS | | % | |
| IMMATURE CELLS | 4 | % | |
| LYMPHOCYTES | | % | |
| EOSINOPHILS+MONOCYTES | | % | |
| PLATELET COUNTS | | /Cu mm | |
| ANALYSIS | | | |
| ANC | 1 | /Cu mm | |
| C. REACTIVE PROTEIN, QUANTITATIVE | | mg/l | |
| IMMATURE CELLS:TOTAL RATIO | | | |
| I.T. RATIO | | | |
| | | | |

INTERPRETATIONS:

IMPRESSION ADVISED

Septic screen is a panel of hematology/biochemical tests (including total leukocyte counts, C-Reactive protein, absolute neutrophil counts, and immature-to-mature neutrophil ratio) which helps in increasing or decreasing the clinical probability of Neonatal sepsis.

To increase the accuracy, result of septic screen should be used in association with clinical condition of the baby and associated risk factors.

















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| TEST | OBSERVED VALUE | | BIOLOGICAL REFERENCE |
|-----------------------------|----------------|--------|----------------------|
| COMPLETE BLOOD COUNT, CBC : | 1 | | |
| Нь | ; 18.7 | GM/DL | 12.0 - 16.0 |
| WBC COUNT : | : | | |
| TLC | ; 5570 | /Cu mm | 4000-11000 |
| DIFFERENTIAL COUNT : | | | |
| NEUTROPHIL | ; 56.4 | % | 40.0 - 75.0 |
| LYMPHOCYTE | : 23.4 | % | 15.0 - 45.0 |
| MONOCYTE | : 19.9 | % | 4.0 - 13.0 |
| EOSINOPHIL | : 0.3 | % | 0.5 -7.0 |
| BASOPHIL | ; 0.0 | % | 0.0 - 2.0 |
| RBC INDICES | | | |
| RBC | : 4.55 | ut | 3.9 - 5.8 |
| нст | ; 48.1 | % | 35.0 - 49.0 |
| MCV | : 105.8 | 1L | 75.0 - 97.0 |
| MCH | : 41.0 | pg | 26.5 - 33.0 |
| MCHC | : 38.8 | g/dL | 32.0 - 36.0 |
| RDW-CV | : 19.3 | % | 12.0 - 18.0 |
| RDW-SD | : 75.8 | fL. | 37.0 - 56.0 |
| PLATLET INDICES | 2 | | |
| PLT | : 166000 | /Cu mm | 150000 - 450000 |
| MPV | : 9.1 | fL. | 7.4 - 11.0 |
| PCT | : 0.151 | % | 0.150-0.400 |
| PDW | : 16.1 | 11. | 11.0 - 20.0 |

METHOD: PHOTOMETRY, ELECTRICAL IMPEDANCE, OPTICAL/IMPEDANCE & CALCULATED

INTERPRETATIONS:















SUBJECT TO CONDITIONS OF REPORTING GIVEN OVERLEAF



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