# LABORATORY REPORT

Redcliffe labs

| | | | |
|---|---|---|---|
| Patient NAME : | | | |
| DOB/Age/Gender : | | Report STATUS : | |
| Patient ID / UHID : | | Barcode NO : | |
| Referred BY : | | Sample Type : | |
| Sample Collected : | | Report Date : | |

| Test Description | Value(s) | Unit(s) | Reference Range |
|---|---|---|---|
| **Complete Hemogram (CBC & ESR)** | | | |
| **Complete Blood Count (CBC)** | | | |
| **RBC Parameters** | | | |
| Hemoglobin<br>*Cyanide Free Spectrophotometry* | 15.6 | g/dL | 13.0 - 17.0 |
| RBC Count<br>*Electrical impedance* | 5.4 | 10^6/µl | 4.5 - 5.5 |
| PCV<br>*Electrical impedance* | 47.9 | % | 40 - 50 |
| MCV<br>*Calculated* | 87.8 | fl | 83 - 101 |
| MCH<br>*Calculated* | 28.7 | pg | 27 - 32 |
| MCHC<br>*Calculated* | 32.7 | g/dL | 31.5 - 34.5 |
| RDW (CV)<br>*Calculated* | **11.5 L*** | % | 11.6 - 14.0 |
| RDW-SD<br>*Calculated* | **44.5 H*** | fl | 35.1 - 43.9 |
| **WBC Parameters** | | | |
| TLC<br>*Electrical impedance* | 5.5 | 10^3/µl | 4 - 10 |
| **Differential Leucocyte Count** | | | |
| Neutrophils<br>*Flow cytometry* | 52 | % | 40-80 |
| Lymphocytes<br>*Flow cytometry* | **40.8 H*** | % | 20-40 |
| Monocytes<br>*Flow cytometry* | 3.2 | % | 2-10 |
| Eosinophils<br>*Flow cytometry* | 3.5 | % | 1-6 |
| Basophils<br>*Flow cytometry* | 0.5 | % | <2 |
| **Absolute Leukocyte Counts** | | | |
| Neutrophils. | 2.86 | 10^3/µl | 2 - 7 |
| Lymphocytes. | 2.24 | 10^3/µl | 1 - 3 |
| Monocytes. | **0.18 L*** | 10^3/µl | 0.2 - 1.0 |
| Eosinophils. | 0.19 | 10^3/µl | 0.02 - 0.5 |
| Basophils. | 0.03 | 10^3/µl | 0.02 - 0.5 |
| **Platelet Parameters** | | | |
| Platelet Count<br>*Electrical impedance* | 283 | 10^3/µl | 150 - 410 |

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| Mean Platelet Volume (MPV)<br>*Calculated* | 11.1 | fL | 9.3 - 12.1 |
| PCT<br>*Calculated* | 0.3 | % | 0.17 - 0.32 |
| PDW<br>*Calculated* | 20.7 | fL | 8.3 - 25.0 |
| P-LCR<br>*Calculated* | 46.1 | % | 18 - 50 |
| P-LCC<br>*Calculated* | 130 | 10^9/L | 44 - 140 |
| Mentzer Index<br>*Calculated* | 16.26 | % | > 13 |

**Please correlate clinically.**

**Interpretation:**
CBC provides information about red cells, white cells and platelets. Results are useful in the diagnosis of anemia, infections, leukemias, clotting disorders and many other medical conditions.

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**Erythrocyte Sedimentation Rate (ESR)**

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|---|---|---|---|
| ESR - Erythrocyte Sedimentation Rate<br>*MODIFIED WESTERGREN* | 04 | mm/hr | 0 - 10 |

**Interpretation:**
ESR is also known as Erythrocyte Sedimentation Rate. An ESR test is used to assess inflammation in the body. Many conditions can cause an abnormal ESR, so an ESR test is typically used with other tests to diagnose and monitor different diseases. An elevated ESR may occur in inflammatory conditions including infection, rheumatoid arthritis ,systemic vasculitis, anemia, multiple myeloma , etc. Low levels are typically seen in congestive heart failure, polycythemia ,sickle cell anemia, hypo fibrinogenemia , etc.

**Reference**- Dacie and lewis practical hematology

*** End Of Report ***

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1. The presented findings in the Reports are intended solely for informational and interpretational purposes by the referring physician or other qualified medical professionals possessing a comprehensive understanding of reporting units, reference ranges, and technological limitations. The laboratory shall not be held liable for any interpretation or misinterpretation of the results, nor for any consequential or incidental damages arising from such interpretation.

2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.

3. It is to be noted that variations in results may occur between different laboratories and over time, even for the same parameter for the same Customer. The assays are performed and conducted in accordance with standard procedures, and the reported outcomes are contingent on the specific individual assay methods and equipment(s) used, as well as the quality of the received specimen.

4. This report shall not be deemed valid or admissible for any medico-legal purposes.

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