Redcliffe labs

Healthy India Ki Trusted Lab

smart Health Report

An Insightful Health Analytics Report for Easier Understanding

Prepared For

Mr MR.DUMMY

M 23

Name	Patient ID	Gender	Age
Mr MR.DUMMY	8052620	M	23

Health Summary

All Lab results are subject to clinical interpretation by qualified medical professional and this report is not subject to use for any medico-legal purpose.

LABORATORY REPORT

Redcliffe labs

Patient Name	: **Mr MR.DUMMY**		
DOB/Age/Gender	: 23 Y/Male	Sample Collected	: Apr 26, 2024, 01:00 PM
Patient ID / UHID	: 8052620/RCL7248955	Report Date	: May 25, 2024, 06:38 PM.
Referred By	: Dr. Dr. X	Barcode No	: SI484628
Sample Type	: Serum	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range

STD Panel Essential Plus

Chlamydia Trachomatis IgG Antibodies

Chlamydia Trachomatis IgG *(Serum,EIA)*	6	Ratio	<0.8

Interpretation:

RESULT (RATIO)	REMARKS
<0.8	Negative
>=0.8 - <1.1	Equivocal
>=1.1	Positive

Note

1. Equivocal results do not rule out the possibility of Chlamydial infection. Retesting is recommended after 7 days.
2. Results must be correlated with clinical findings and other diagnostic investigations.

Comments

Chlamydia trachomatis is implicated in a wide variety of infections in humans. It is a common cause of Non-gonococcal urethritis and Cervicitis. In females it causes Pelvic Inflammatory disease, Salpingitis & Endometritis. In males it leads to Epididymitis & Reiter's syndrome. Lymphogranuloma venereum (LGV) is a sexually transmitted infection caused by Chlamydia trachomatis. It can also cause ophthalmologic infections like Trachoma and Inclusion Conjunctivitis.

Herpes Simplex Virus (HSV) 1 + 2 IgG Antibody

Herpes simplex virus 1+2, IgG *EIA, SERUM*	**5**	INDEX	NEGATIVE: < 0.8 EQUIVOCAL: 0.8 and 1.2. POSITIVE: > 1.2

Interpretation:

RESULT IN INDEX	REMARKS
< 0.8	Negative
0.8 and 1.2.	Equivocal
≥ 1.2	Positive

The Herpes simplex virus (HSV) is a member of the Herpesviridae family, of which two types are known: type 1 (HSV-1) and type 2 (HSV-2) which present slight antigenic differences. HSV-1 causes chiefly oral-facial lesions, while HSV-2 is mainly responsible for genital lesions, but this distinction is not binding, both types occasionally causing infection in either anatomical site. HSV may also cause a form of ocular cheratitis, and lesions of the central nervous system.HSV can affect practically the whole population. The primary infection is often in a subclinical form and is rarely diagnosed. After a latency period of variable duration, reactivation may occur and viral replication may or may not give rise to clinical lesions. Infection contracted during birth is of particular interest, this being an important cause of morbidity and mortality. It is therefore important to determine the immunitary state of women during pregnancy in order to detect serum conversion.

Dr. Dummy

Patient Name	**: Mr MR.DUMMY**		
DOB/Age/Gender	: 23 Y/Male	Sample Collected	: Apr 26, 2024, 01:00 PM
Patient ID / UHID	: 8052620/RCL7248955	Report Date	: May 25, 2024, 06:38 PM.
Referred By	: Dr. Dr. X	Barcode No	: SI484628
Sample Type	: Serum	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range

Herpes Simplex Virus (HSV) 1 + 2 IgM Antibody

Herpes simplex virus 1+2, IgM *EIA, SERUM*	**4**	Index	

Interpretation:

RESULT IN INDEX	REMARKS
< 0.9	Negative
0.9 and 1.1	Equivocal
> 1.1	Positive

The Herpes simplex virus (HSV) is a member of the Herpesviridae family, of which two types are known: type 1 (HSV-1) and type 2 (HSV-2) which present slight antigenic differences. HSV-1 causes chiefly oral-facial lesions, while HSV-2 is mainly responsible for genital lesions, but this distinction is not binding, both types occasionally causing infection in either anatomical site. HSV may also cause a form of ocular cheratitis, and lesions of the central nervous system.HSV can affect practically the whole population. The primary infection is often in a subclinical form and is rarely diagnosed. After a latency period of variable duration, reactivation may occur and viral replication may or may not give rise to clinical lesions. Infection contracted during birth is of particular interest, this being an important cause of morbidity and mortality. It is therefore important to determine the immunitary state of women during pregnancy in order to detect serum conversion. The assay of specific IgM is important for the diagnosis of neonatal infection and encephalitis caused by HSV. Moreover, the presence of specific IgM indicates viral activity in progress, although it is not possible to distinguish between primary infection and reactivation.

Treponema Pallidium Hemagglutination Assay (TPHA)

Treponema Pallidium Haemagglutination (TPHA) *LATEX AGGLUTINATION (QUALITATIVE)*	Negative		Negative

Interpretation:

Syphilis is a chronic infection that progresses through stages of infection, primary to quarternary. The typical symptoms initially are sores known as chancres, then syphilitic rash followed by long periods of dormancy. Untreated infection may result in cardiovascular problems and neurosyphilis . The infection is caused by the Spirochaete Treponema pallidum , and is usually acquired by sexual contact, although the disease may be transmitted by transfusion of infected blood. Intrauterine infection also occurs. The organism has proved virtually impossible to culture in artificial media and diagnosis of the infection usually depends on the demonstration of antibodies in the blood, which appear soon after initial infection.

Dr. Dummy

LABORATORY REPORT

Redcliffe labs

Patient Name	: **Mr MR.DUMMY**		
DOB/Age/Gender	: 23 Y/Male	Sample Collected	: Apr 26, 2024, 01:00 PM
Patient ID / UHID	: 8052620/RCL7248955	Report Date	: May 25, 2024, 06:38 PM.
Referred By	: Dr. Dr. X	Barcode No	: SI484628
Sample Type	: Serum	Report Status	: Final Report

Test Description	Value(s)	Unit(s)	Reference Range
HIV 1&2 Antibody, Quantitative			
HIV I & II Quantitative & P24 COMBO *CMIA*	0.1	S/CO	<1.00 :Nonreactive >1.00 :Reactive

Interpretation:
The cutoff is 1.00 S/CO.

S/CO	Reference Ranges
< 1.00	Nonreactive
≥ 1.00	Reactive

Final Interpretation

Initial Interpretation	Results with Retes	Final Interpretation
Nonreactive	No retest required	Nonreactive. HIV p24 Ag and/or HIV-1/HIV-2 Ab not detected.
Reactive	If both retest results are < 1.00	Nonreactive. HIV p24 Ag and/or HIV-1/HIV-2 Ab not detected
	If one or both retest results are ≥ 1.00	Reactive. Presumptive evidence of HIV p24 Ag and/or HIV-1/ HIV-2 Ab; perform a supplemental assay

1. Non-Reactive result implies that no Anti HIV-I OR HIV-II Antibodies have been detected in the sample by this method. This means that either the patient has not exposed to HIV-I or HIV-II infection or the sample has been tested during the "WINDOW PHASE"(before the development of detectable levels of antibodies). Hence negative result does not exclude the possibility of exposure to or infection with HIV-I/HIV-II.
2. Immunoassay for the in vitro qualitative determination of HIV-1 p24 antigen and antibodies to HIV-1, including group O, and HIV-2 in human serum
3. It is a screening test and reactive samples need to confirmed by alternate method like western blot or PCR

*** End Of Report ***

Disclaimer: Method given in report are only indicative and can be changed depending upon type of machine and kit available at time of testing.

Not all tests at all locations are under NABL scope. Availability of tests under NABL scope varies from lab to lab.

Dr. Dummy

Terms and Conditions of Reporting

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.

5. The Customers assume full responsibility for apprising the Company of any factors that may impact the test finding. These factors, among others, includes dietary intake, alcohol, or medication / drug(s) consumption, or fasting. This list of factors is only representative and not exhaustive.

DISCLAIMER

This is a sample report provided for demonstration purposes only and does not represent an actual patient report. Test results, reference ranges, methodologies, instrumentation, and report formats may vary depending on the laboratory performing the test. The format and representation shown are indicative of reports generated by the National Reference Laboratory of Redcliffe Labs, Noida. This sample report should not be used for medical interpretation, diagnosis, or treatment decisions.