

Apollo Medical Centre

(Promoters : Kurnool Hospital Enterprises Ltd.)

43-67/A,N.R. Peta, Kurnool - 518 004, Phone : (08518) 225888, 225889

| | | |
|--|---|---|
| Name : SHAIK MOHAMMAD ABUTALHA | Bill Date : 19-Nov-2025 7:44 pm |  |
| Age : 6 Years | Sample No : 71 | |
| Gender : Male | Smpl.Time : 19-Nov-2025 07:53 PM | |
| Bill No : CB22458 | Report Date : 19-Nov-2025 8:49 pm | |
| Ref.Dr. : Dr.SAFIYA FATHIMA S, BUMS | CB22458  | |

DEPARTMENT OF HAEMATOLOGY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|----------------------------|----------|------|-----------------|--------|
| MALARIAL PARASITES (RAPID) | NEGATIVE | | - | |

*** END OF REPORT ***

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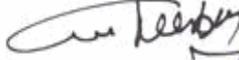
Checked By : RAJESH

CB22458



KINDLY CORRELATE RESULTS WITH CLINICAL FINDINGS & DISCUSS IF NECESSARY.

Page 1 of 3


Dr.C.C.MOHAN REDDY,
M.D (PATHOLOGY)
PATHOLOGIST



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DEPARTMENT OF BIOCHEMISTRY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|------------|--------|-----------------|------------|
| UREA | | | | |
| UREA (BLOOD) | 110 | mg/dL | 14 - 45 | UV-GLDH |
| <p>Urea is the major nitrogen containing metabolic product of protein catabolism. Increased in dehydration, severe vomiting, fever, severe infections, burns, high protein diet, acute GN etc Decreased in low protein intake, starvation, anorexia nervosa, late pregnancy etc.</p> | | | | |
| ELECTROLYTES | | | | |
| SERUM SODIUM | 139 | mmol/L | 135 - 150 | Direct ISE |
| SERUM POTASSIUM | 4.4 | mmol/L | 3.5 - 5.0 | Direct ISE |
| SERUM CHLORIDES | 101 | mmol/L | 94 - 110 | Direct ISE |

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Sreelatha

Dr.SREELATHA. D

M.B.B.S, M.D

Consultant Biochemist



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DEPARTMENT OF SEROLOGY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|-------------|------|-----------------|--------------|
| C-REACTIVE PROTEIN CRP (QUANTITATIVE) , SERUM | 62.2 | mg/L | upto - 6 | Nephelometry |
| | | | - | |

Comment:

C-reactive protein (CRP) is one of the most sensitive acute-phase reactants for inflammation. Measuring changes in the concentration of CRP provides useful diagnostic information about the level of acuity and severity of a disease. Unlike ESR, CRP levels are not influenced by hematologic conditions such as anemia, polycythemia etc. Increased levels are consistent with an acute inflammatory process. After onset of an acute phase response, the serum CRP concentration rises rapidly (within 6-12 hours and peaks at 24-48 hours) and extensively. Concentrations above 100 mg/L are associated with severe stimuli such as major trauma and severe infection (sepsis).

WIDAL

| | | | | |
|-------|----------|--|---|--|
| WIDAL | NEGATIVE | | - | |
|-------|----------|--|---|--|

Comment:

1. Titres 1:80 and above of "O" antigen & 1:160 and above of "H" antigen are significant
2. Rising titers are significant

Comments: This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli. The agglutinins usually appear at the end of the first week of infection and increase steadily till third / fourth week after which they start declining. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases. Non-specific febrile disease may cause this titer to increase. The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages. The recommended test especially in the first week after infection is Blood Culture.

NOTE:

1. This report is issued after performing Slide agglutination method.
2. If positive titres, the result is to be confirmed by Tube agglutination method.

*** END OF REPORT ***

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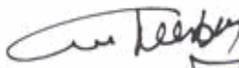
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