


<b>Organization Name &amp; Address :</b> KRISHNA CARE CENTER Vijay Khand-2 Gomti Nagar Lucknow	<b>Lab Address :</b> 17/675 - Near A.L.S School, Sect-17, Indira Nagar, Lucknow-U.P
<b>Patient Name :</b> ANUPAMA SRIVASTAVA	<b>Collection Time :</b> Oct 09, 2022, 03:19 p.m.
<b>Age / Gender :</b> 57 years / Female	<b>Receiving Time :</b> Oct 09, 2022, 03:29 p.m.
<b>Patient ID :</b> 32088	<b>Reporting Time :</b> Oct 09, 2022, 05:26 p.m.
<b>Referral :</b> Dr. A K Chawla	<b>Sample ID :</b>  012028222

Test Description	Value(s)	Unit(s)	Reference Range
<b>Dengue IgG, IgM, NS1 ELISA</b>			
<b>Dengue Antibody - IgM</b> Method : ELISA	28.22	Index	Negative?: < 9 Equivocal : 9-11 Positive: > 11
<b>Dengue Antibody - IgG</b> Method : ELISA	0.03	Index	Negative: < 18 Equivocal: 18-22 Positive: > 22
<b>DENGUE NS1 ANTIGEN *</b> Method : ELISA	0.16	Panbio Units	Negative : <9.0 Equivocal : 9.0 - 11.0 Positive : >11.0 Kindly note reference value changes based on Kit

**Remarks:**

**IgG:** The presence of IgG-class antibodies to dengue virus is consistent with exposure to this virus sometime in the past. By 3 weeks following exposure, nearly all immunocompetent individuals will develop IgG antibodies to DV.


**IgM:** The presence of IgM-class antibodies to Dengue virus is consistent with acute-phase infection. IgM antibodies become detectable 3 to 7 days following infection and may remain detectable for up to 6 months or longer following disease resolution. The absence of IgM-class antibodies to DV is consistent with lack of infection.

**Non-structural protein 1 (NS1):** The presence of dengue NS1 antigen is consistent with acute-phase infection with dengue virus. The NS1 antigen is typically detectable within 1 to 2 days following infection and up to 9 days following symptom onset. False-positive results, particularly with the dengue virus enzyme-linked immunosorbent assay (ELISA), may occur in persons infected with other flaviviruses, including Zika virus, West Nile virus, and St. Louis encephalitis virus.

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Test Description	Value(s)	Unit(s)	Reference Range
<b>Complete Blood Count</b>			
Hemoglobin (Hb)* Method : Cynmeth Photometric Measurement	8.1	gm/dL	12.0 - 15.0
Erythrocyte (RBC) Count* Method : Electrical Impedence	3.37	mil/cu.mm	3.8 - 4.8
Packed Cell Volume (PCV)* Method : Calculated	26.2	%	36 - 46
Mean Cell Volume (MCV)* Method : Electrical Impedence	77.6	fL	83 - 101
Mean Cell Haemoglobin (MCH)* Method : Calculated	24	pg	27 - 32
Mean Corpuscular Hb Conc. (MCHC)* Method : Calculated	30.9	gm/dL	31.5 - 34.5
Red Cell Distribution Width (RDW)* Method : Electrical Impedence	14.8	%	11.6 - 14.0
Total Leucocytes (WBC) Count* Method : Electrical Impedence	1900	cell/cu.mm	4000-10000
<b>Differential Count</b>			
Neutrophils* Method : VCSn Technology	87	%	40 - 80
Lymphocytes* Method : VCSn Technology	10	%	20 - 40
Monocytes* Method : VCSn Technology	02	%	2 - 10
Eosinophils* Method : VCSn Technology	01	%	1 - 6
Basophils* Method : VCSn Technology	00	%	1-2
Platelet Count	70	10 <sup>3</sup> /ul	150 - 450
Mean Platelet Volume (MPV)* Method : Electrical Impedence	10.9	fL	7.2 - 11.7
PCT* Method : Calculated	0.042	%	0.2 - 0.5
PDW* Method : Calculated	11.7	%	9.0 - 17.0

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Test Description	Value(s)	Unit(s)	Reference Range
<b>CRP Titre quantitative</b>			
CRP (C-REACTIVE PROTEIN)* Method : Immuno-turbidimetric	31.81	mg/L	0 - 5.0
<b>Interpretation</b>			
1. Elevated test results can occur in patients with hypertension, elevated body mass index, metabolic syndrome/ diabetes mellitus, chronic infection (e.g., gingivitis, bronchitis), chronic inflammation ( e.g. rheumatoid arthritis ) and low HDL/high triglycerides			
2. Cigarette smoking can cause increased levels.			
3. Decreased test levels can results from moderate alcohol consumption, weight loss, and increased activity or endurance exercise			

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