



स्पार्श क्लिनिकल लॅब

► Fully Computerised Laboratory ► Biochemistry ► Analyzer ► Cell Counter ► Serology

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TEST REPORT

Reg. No. : 202608160187

Patient Name : Miss. GUNJAN JADHAV
Age/Sex : 2.5 Years/Female
Referred by : Dr. AAROGYA M HOSPITAL

Registered on: 16/08/2026
Reported on : 16/08/2026
Printed on : 16/08/2026 20:44

HAEMATOLOGY

Test Name	Patient Value	Unit	Reference Range
CBC			
Haemoglobin.	10.0	gm%	12-16
RBC Count	3.85	Millions/cumm	3.8 - 5.8
Total WBC Count	8100	/cumm	4000-11000
Platelet Count	283000	/cumm	150000-450000
RED CELL ABSOLUTE VALUES			
Packed Cell Volume (HCT)	29.1	%	37 - 47
Mean Corpuscular Volume	75.58	fl	76 - 100
Mean Corpuscular Hemoglobin	25.97	pg	27 - 32
Mean Corpuscular HB Con. (MCHC)	34.36	g/dl	32 - 36
DIFFERENTIAL COUNT			
Neutrophils	80	%	40 - 70
Lymphocytes	16	%	20 - 45
Eosinophils	02	%	1 - 6
Monocytes	02	%	1 - 10
Basophil	00	%	0 - 1

BIOCHEMISTRY

Test Name	Patient Value	Unit	Reference Range
SGPT	22.40	IU/L	0 - 40

Kindly correlate clinically !

Thanks for referral !

Address :- On The Right Side Infront Of Hanuman Mandir Near Dharashive Hospital Main Road Ausa - Pin 413520



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SEROLOGY

Test Name	Patient Value	Unit	Reference Range
CRP (C - Reactive Protein)			
Observation : -	11.54		0 - 6
Method : -	Turbidmetric		
Normal Value	0 - 6 mg/l		
RESULT :-	Positive		

Description : C-reactive protein (CRP) is a protein made by the liver. CRP levels in the blood increase when there is a condition causing inflammation somewhere in the body. A CRP test measures the amount of CRP in the blood to detect inflammation due to acute conditions or to monitor the severity of disease in chronic conditions. CRP is a non-specific indicator of inflammation and one of the most sensitive acute phase reactants. That means that it is released into the blood within a few hours after an injury, the start of an infection, or other cause of inflammation. Markedly increased levels can occur, for example, after trauma or a heart attack, with active or untreated autoimmune disorders, and with serious bacterial infections, such as in sepsis. The level of CRP can jump as much as a thousand-fold in response to bacterial infection, and its rise in the blood can precede pain, fever, or other signs and symptoms. The CRP test is not diagnostic, but it provides information to your healthcare practitioner as to whether inflammation is present, without identifying the source of the inflammation. This information can be used in conjunction with other factors such as signs and symptoms, physical exam, and other tests to determine if you have an acute inflammatory condition or are experiencing a flare-up of a chronic inflammatory disease. Your healthcare practitioner may then follow up with further testing and treatment.

*****End Of Report*****

Kindly correlate clinically !

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