

Visit ID	: ITD1255			Registration	: 12/Jan/2023 03:21PM		
UHID/MR No	: ITD.000000736			Collected	: 12/Jan/2023 03:22PM		
Patient Name	: MR. DUMMY3			Received	: 12/Jan/2023 03:22PM		
Age/Gender	: 23 Y 1 M 4 D /M			Reported	: 12/Jan/2023 03:23PM		
Ref Doctor	: Dr.SELF		5	Status	: Final Report		
Client Name	: STANDARD			Client Code	: 78		
Client Add	: D 159, 1st Floor, Sector 7, No			Barcode No	: 10059911		
		DEPA	ARTMENT OF H	AEMATOLOGY			
ERYTHROCYTE SEDIMENTATION RATE							
Sample Type : WH	IOLE BLOOD EDTA						
ERYTHROCYTE SEDIMENTATION RATE 6			L	mm/1st hr	1-12	Westergren	
of a specific diseas of malignancy, her nephritis, nephrosi	e. It is used to monitor f natologic diseases, colla is), malignant diseases (	he course or r gen disorders, e.g., multiple r	esponse to trea and renal dise nyeloma, Hodg	atment of certain ases. • Increase kin disease, adva	diseases. Extremely hig d levels may indicate: C anced Carcinomas), bact	ess. It is never diagnostic h levels are found in cases hronic renal failure (e.g., rerial infections (e.g., loral arteritis, polymyalgia	

abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency). Falsely decreased levels may indicate Sickle cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

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

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Luneitre

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