Name	: Mr. VIPIN YADAV	Collected	: 28/3/2016 10:40:00AM
Lab No.	: 124433186 Age: 5 Years Gender: Male	Received	: 28/3/2016 10:47:20AM
		Reported	: 28/3/2016 2:44:10PM
A/c Status	: P Ref By : A.I.I.M.S. HOSPITAL	Report Status	: Final

Test Name	Results	Units	Bio. Ref. Interval
CYTOMEGALOVIRUS (CMV) ANTIBODIES PANEL, IgG & IgM, SERUM (CLIA)			
Cytomegalovirus, IgG @	**130.00**	U/mL	<12.00
Cytomegalovirus, IgM @	<5.00	U/mL	<18.00

Interpretation

CMV IgG RESULT IN U/mL	CMV IgM RESULT IN U/mL	REMARKS
<12.00	<18.00	Non Reactive
12.00-14.00	18.00-22.00	Equivocal
>14.00	>22.00	Reactive

Note: 1. Non reactive results do not always exclude the possibility of infection. Patients with non reactive results in suspected early disease cases should be retested after 3 weeks
2. Equivocal CMV IgM result should be retested after 2 weeks
3. Reactive CMV IgM results indicate primary infection, reinfection or reactivation of latent virus
4. CMV IgG values between 12.00-14.00 U/mL should be retested after 2 weeks
5. Rise in titre in sequential samples for CMV IgG indicates active infection
6. It is recommended to confirm the clinical relevance of reactive results by CMV IgG avidity testing

Comments

Cytomegalovirus (CMV) is a member of the Herpes virus family. Infections are usually mild and asymptomatic but may pose a significant medical risk in pregnant women, new borns and immunocompromised individuals. In utero infection can lead to varying degrees of mental retardation, chorioretinitis, hearing loss and neurologic problems.

Since the risk of in utero transmission and CMV related damage to the fetus is highly likely during primary infection, reliable recognition of primary infection is of high importance in pregnant women.

It is recommended to test for CMV IgG and CMV IgG avidity to exclude primary infection. Positive CMV IgM in association with low CMV IgG avidity is a strong indicator of primary infection within the last 4 months.

CMV IgG	CMV IgM	CMV Avidity	Remarks
Non Reactive	Non Reactive	Not applicable	Infection unlikely
Reactive	Non Reactive	High avidity	Past infection
Reactive	Reactive	Low avidity	Primary infection
Reactive	Reactive	High avidity	Non-primary infection; Low risk for in-utero

If test results are alarming or unexpected, Client is advised to contact the laboratory immediately for possible remedial action.
@ Tests conducted at National Reference Lab, New Delhi, a CAP (7171001), ISO (FS 60411) and NABL (M-0061) accredited laboratory

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Test Name	Results	Units	Bio. Ref. Interval
transmission			

Dr. Ritu Nayar
MD, Microbiology
Consultant Microbiologist

Dr. Nimmi Kansal
MD (Biochemistry)
HOD Biochem & IA

----------End of report ----------

If test results are alarming or unexpected, Client is advised to contact the laboratory immediately for possible remedial action.
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UHID:	101041627	Reg Date :	11/06/2015 09:13 AM
Patient Name :	Mr. VIPIN YADAV		
Sex :	Male	Age :	5 years 9 months 6 days
Department :	Paediatrics	Unit Name :	Unit-III
Unit Incharge :	Dr. S. K. KABRA	Sample Collection Date:	17/03/2016 08:44 AM
Lab Name:	CN Centre	Lab Sub Centre:	Lipids And Enzymes (CNC)
Sample Received Time:	17/03/2016 10:04 AM	Report Generated Date:	17/03/2016 02:50 PM
Dept / IRCH No:	20160440002473	Recommended By:	Dr. S. KABRA
Lab Reference No:	204		
Ward Name:	C5 DAY CARE /5		

Sample Details : LPC-170316037 (Serum)

Test Name	Observation Result	Normal Range	Verification Comment(s)
LDH-TOTAL	382	200.00 - 420.00	

Authorized Signatory

Department Of Pathology
All India Institute Of Medical Sciences
Delhi
Tel:+91-11-26588500/26588700;Fax:+91-11-26588500/26588700

Patient Name:	**Vipin Yadav**	Acc. No:	**169275**
F/H Name:	Digvijay Yadav	Hosp. Reg. No.:	**184720**
Age/Sex:	5 Y/Male	UHID No.:	---
Clinic/Dept/Unit:	Dr. B.R. A. IRCH/Unit 1	Consultant Incharge:	Dr. Sameer Bakhshi
Consultant Incharge:	Dr. Sameer Bakhshi	Reporting Date:	19-03-2016
Reg Date:	09-03-2016		

Histopathology Report

Report Findings:

Bone marrow biopsy shows procedural hemorrhage and cellularity of 30-40% with normal hematopoietic cells of all three series. There is no evidence of metastatic neuroblastoma in the sections examined.

Reporting Incharge: Dr. Asit Ranjan Mridha

Reporting SR: Dr. Tripti Nakra
Verify By: Dr. Khushbu Khetan