



Laboratory Investigation Report

Patient NameCentreAge/GenderOP/IP No/UHIDMaxID/Lab IDCollection Date/TimeRef DoctorReporting Date/Time

Cytopathology CSF Profile



**CSF for Malignant Cells** 

**Cytopathology Number:** 

C-323/22

Material: CSF for malignant cells. Received 12 ml of colourless clear fluid.

**Clinical Data / Impression:** 

<u>Microscopic Examination</u>: CSF sediment smears are paucicellular showing occasional lymphocyte and monocyte with few squames in the background. No malignant cells are seen.

**IMPRESSION**: CSF Cytology: Negative for malignant cells.

Advise:

Kindly correlate with clinical findings

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

Dr. Komal Singla, M.D.(Path) Consultant Pathologist

Test Performed at :1110 - Max Hospital Bathinda, Mansa Road, Near District Civil Hospital, Bathinda, Punjab 151001 Booking Centre :1110 - Max Hospital Bathinda, Mansa Road, Near District Civil Hospital, Bathinda, Punjab 151001 The authenticity of the report can be verified by scanning the Q R Code on top of the page Page 1 of 2







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Hematology CSF Profile

SIN No PHA 0160807

Result Unit Bio Ref Interval

CSF-Cell Type& Count, Glucose, Protein

Volume. 12.00 mL

Colorless Colorless

Visual Observation

Appearance Transparent
Viscosity Normal
Clot/Cob Web ABSENT

CSF Glucose 59 mg/dL 40 - 70

Pyrogallol red

**Test Name** 

CSF TLC 02 Cells/cumm

Manual -Neubar Chamber

**Differential Cell Count** 

CSF Lymphocytes 100 %

Light Microscopy

Kindly correlate with clinical findings

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

Dr. Komal Singla, M.D.(Path) Consultant Pathologist



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L86 - HOME TRAIL BUILDTECH PVT LTD CIVIL LINES BHATINDA

Name

Lab No.

Gender:

Gender:

Reported

Report Status

Test Name	Results	Units	Bio. Ref. Interval
MULTIPLE SCLEROSIS PANEL 2			

IMMUNOGLOBULIN IgG SYNTHESIS INDEX & RATE (BCG, Nephelometry, Immunoturbidimetry)			
Albumin Serum	3.87	g/dL	3.50 - 5.20
Immunogloublin IgG, Serum**	1407.00	mg/dL	650.00 - 1600.00
Immunoglobulin IgG, CSF**	27.70	mg/L	<34.00
Albumin, CSF**	160.00	mg/L	<350.00
Immunoglobulin Synthesis Index**	0.48		0.30 - 0.70
Immunoglobulin Synthesis Rate**	-4.6	mg/day	-9.9 - 3.3

## Interpretation

IMMUNOGLOBULIN SYNTHESIS INDEX	IMMUNOGLOBULIN SYNTHESIS RATE
Value > 0.70 is indicative of   increased IgG synthesis	Value > 8mg/day is indicative     of increased rate

## Comments

Multiple sclerosis is a demyelinating disease involving the white matter of brain and spinal cord. It occurs more frequently in females usually during young adulthood with a wide variety of clinical manifestations. About 50 % of these patients undergo alternating periods of active disease and remission whereas the remaining have a chronic progressive course. These patients show increased synthesis of IgG abnormally within the CNS. However increased Immunoglobulins and Oligoclonal bands may also be found in other chronic inflammatory diseases of CNS like Meningo-encephalitis due to bacteria / viruses / fungi / parasites, Sub acute Sclerosing Panencephalitis and Guillain-Barre syndrome.



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L-A CE

Autoimmunity Centre for Excellence

L86 - HOME TRAIL BUILDTECH PVT LTD

CIVIL LINES

BHATINDA

Name

Collected
Received
Reported

A/c Status

Report Status

Test Name	Results	Units	Bio. Ref. Interval	
OLIGOCLONAL BANDS IgG, CSF & SERUM (Immunoturbidimetry, Nephelometry, Isoelectric focusing	g)			
Immunoglobulin IgG, CSF**	27.70	mg/L	<34.00	
Oligoclonal Bands, CSF**	Absent			
Immunogloublin IgG, Serum**	1407.00	mg/dL	650.00 - 1600.00	
Oligoclonal Bands, Serum	Absent			
Interpretation:- Oligoclonal bands not seen in both cerebrospinal fluid and serum.				

**Note:** Isoelectric focusing is the gold standard technique with greatest sensitivity & specificity for diagnosis of Multiple sclerosis

# Interpretation

# Comment

Increased intrathecal synthesis of immunoglobulins, particularly IgG, occurs in demyelinating diseases like Multiple sclerosis. Oligoclonal bands are present in 90% of patients with clinically diagnosed Multiple sclerosis. Simultaneous Isoelectric focusing of serum and CSF samples helps to distinguish between the production of oligoclonal bands due to Peripheral gammopathy from that due to local production in the CNS. Oligoclonal bands are also seen in Subacute sclerosing panencephalitis, Inflammatory polyneuropathy, CNS lupus & brain tumors.



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L86 - HOME TRAIL BUILDTECH PVT LTD CIVIL LINES BHATINDA

Name

Lab No.

A/c Status

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Received Reported

**Report Status** 

Test Name Results Units Bio. Ref. Interval

Gender:

**MYELIN BASIC PROTEIN; MBP\*\*** 

\_Please Repeat Sample

Dr Himangshu Mazumdar

MD, Biochemistry Sr. Consultant Biochemist NRL - Dr Lal PathLabs Ltd Dr.Kamal Modi MD, Biochemistry Consultant Biochemist

NRL - Dr Lal PathLabs Ltd

Dr Manisha Sharma MD, Pathology Chief of Laboratory

Dr Lal PathLabs Ltd

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



of Kunst

Dr Nimmi Kansal MD, Biochemistry Technical Director - Clinical Chemistry

& Biochemical Genetics NRL - Dr Lal PathLabs Ltd

\*\* Test conducted under NABL scope MC-2113,LPL-NATIONAL REFERENCE LAB at NEW DELHI

#### **IMPORTANT INSTRUCTIONS**

•Test results released pertain to the specimen submitted. •All test results are dependent on the quality of the sample received by the Laboratory. 
•Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician. •Sample repeats are accepted on request of Referring Physician within 7 days post reporting. •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. •Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting. •Test results may show interlaboratory variations. •The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s). •Test results are not valid for medico legal purposes. 
•Contact customer care Tel No. +91-11-39885050 for all queries related to test results.

(#) Sample drawn from outside source.



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