

## Laboratory Investigation Report

Patient Name	(	Centre	
Age/Gender	(	OP/IP No/UHID	
MaxID/Lab ID	(	Collection Date/Time	
Ref Doctor	Reporting Date/Time		
	Serology		SIN No:MBB378280
Test Name	Result	Unit	Bio Ref Interval
Widal Test (Tube Method), Serum Tube Agglutination			
Salmonella Typhi, (O)	<1:80	Titre	<1:80
Salmonella Typhi, (H)	<1:80	Titre	<1:160
Salmonella Paratyphi (A,H)	<1:80	Titre	< 1:160
Salmonella Paratyphi (B, H)	<1:80	Titre	<1:160
Comment			

Negative

## Interpretation

- 1. This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli.
- 2. The antibodies usually appear at the end of the first week of infection and increase steadily till third / fourth week after which the decline starts.
- 3. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases.
- 4. Non specific febrile disease may cause this titre to increase (anamnestic reaction).
- 5. The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages.
- 6. The recommended test in the first week of infection is Blood Culture.
- 7. Titres 1:80 and above of "O" antigen & 1:160 and above of "H" antigen are significant. Rising titres are significant
- 8. A definitive clinical diagnosis should not be made by result of a single test only, but should be made by taking clinical history and other laboratory findings in to account.

## Kindly correlate with clinical findings

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

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Dr. Suchitra Jain, M.D. Clinical Administrator & Principal Consultant

Test Performed at :969 - Max Hospital, Patparganj, 108A, IP Ext, I.P.Extension, Patparganj, Delhi, 11 Booking Centre :3144 - Max Lab IP Extention Patparganj, Shop No 8 Rishabh Ipex Mall, Patparganj Opp Max Hospital, 8377877959 The authenticity of the report can be verified by scanning the Q R Code on top of the page

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Conditions of Reporting: 1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient name as identified in the bill/test request form. 2. Th relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory. 3. 1 results are for the information and interpretation by the referring doctor only. 4. Some tests are referred to other laboratories to provide a wider test menu to the customer. 5. Ma shall in no event be liable for accidental damages loss, or destruction of specimen which is not attributable to any direct and male fide act or omission of Max Healthcare or its Liability of Max Healthcare for deficiency of services, or other errors and omissions shall be limited to fee paid by the patient for the relevant laboratory services.



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