

श्री गणेश मेमोरियल अस्पताल, सदर, सागर

मोबा. 9893825341

रांजीव मुखारया
स्पेशलिस्ट इन्फार्मेटिस्ट
स्पेशलिस्ट एंड लेपरोस्कोपिक सर्जन
बी.बी.एस., एम.एस. (सर्जन)
रजि.नं. बी.एस.सी. 8123
समय अस्पताल-
सुबह 8 से सायं 7 बजे तक

डॉ. जान्हवी मुखारया
स्त्री रोग एवं प्रसूति विज्ञान विशेषज्ञ
स्पेशलिस्ट-हिस्ट्रोस्कोपी एवं लेपरोस्कोपिक सर्जरी
फेलोशिप मिनिमल एक्सेस सर्जरी
फेलोशिप गेस्टेशनल डायबिटीज
पूर्व सीनियर रेसिडेंट मुंदेलखण्ड मेडीकल कॉलेज, सागर
पूर्व सहायक प्रोफेसर मेडीकल कॉलेज, वर्धा (एम.एस.)
एम.बी.बी.एस., एम.एस., एफ.एम.एस.
रजि.नं.: एम.पी. 24557

डॉ. भीमति सिग्मी मुखारया
स्त्री रोग एवं प्रसूति विज्ञान विशेषज्ञ
स्पेशलिस्ट इनफर्टिलिटी माइक्रोसर्जरी
हिस्ट्रोस्कोपी एवं लेपरोस्कोपिक सर्जरी
एम.बी.बी.एस., एम.एस. (गायनेक एण्ड आब्स्टेट)
रजि.नं. बी.एस.सी. 7902
समय अस्पताल-
सुबह 10 से सायं 7 बजे तक
रजि.नं. अंकित

विना जायजी डॉ. अनुराग सेन

Date: 26/7/25
OH
लवना 4

1 tab 22/7/25-

1- 28/7/25

30 जीव

After 28/7/25

11/6/25

9/7/25

7/7/25

M. diet 41/6/25 / 11/7/25

1 tab 10/7/25

after 10/7/25

1 tab 10/7/25

00

42

1 tab 21/7/25

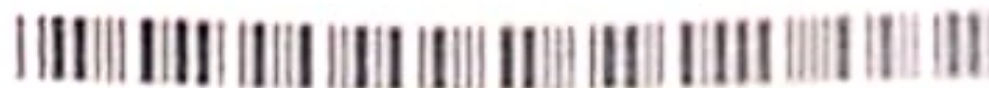
00

आधुनिक उपकरणों से सभी प्रकार की चिकित्सा, प्रसूति चिकित्सा, शल्य चिकित्सा, हिस्ट्रोस्कोपी, लेपरोस्कोपी एवं इन्डोस्कोपी, कम्प्यूटाईज्ड कार्डिओटोकोग्राफी, कोलोनोस्कोपी, इनफर्टिलिटी, माइक्रोसर्जरी एवं आई.यू.आई.

Interpretation

TEST TIME (h)	ANTIGEN TIME MINUS NIL TIME (h)	FINAL RESULT	INTERPRETATION
< 8.00	< 0.15	Negative	M. tuberculosis infection unlikely
	> = 0.15 & < 25% of nil tube	Negative	M. tuberculosis infection unlikely
	> = 0.15 & > = 25% of nil tube	Positive	M. tuberculosis infection likely
8.00	Any result	Indeterminate	This may be due to excessive levels of circulating gamma interferon or presence of heterophile antibodies

1. This assay cannot differentiate between Latent infection and Active Tuberculosis.
2. Magnitude of measured Gamma Interferon cannot be correlated with stage or degree of infection, or of immune responsiveness or likelihood of progression to active disease.
3. False negative results may be obtained if sample is taken prior to development of immune response. CDC recommends repeat test after 6 - 10 weeks in case of high suspicion of tuberculosis.
4. Immunocompromised patients can also show false negativity.
5. Negative result does not preclude the possibility of *Mycobacterium tuberculosis* infection.



No. : 482907439
By : Dr. SIMMI MUKHARYA M.S.
cted : 26/7/2025 3:15:00PM
itatus : P
cted at : SAGAR CC 4, SHEETAL MISHRA
SANKAT MOCHAN HANUMAN MANDIR PARAS
TALKIES BADA BAZAR SAGAR-470002
SAGAR

Age : 22 Years
Gender : Female
Reported : 30/7/2025 6:53:25PM
Report Status : Final
Processed at : LPL-NATIONAL REFERENCE LAB
National Reference Laboratory, Block E,
Sector 18, Rohini, New Delhi -110085



Test Report

Test Name	Results	Units	Bio. Ref. Interval
QuantIFERON®-TB Gold (QFT), INTERFERON GAMMA RELEASE ASSAY (IGRA), PLASMA (EA)			
Gamma Interferon, Antigen tube	1.34	IU/mL	
Gamma Interferon, Nil tube	0.05	IU/mL	
Final Result	Positive		

*This test has been performed on QuantIFERON®-TB Gold (QFT) ELISA test kit (FDA approved)

Interpretation

NIL TUBE in IU/mL	ANTIGEN TUBE MINUS NIL TUBE in IU/mL	FINAL RESULT	INTERPRETATION
< = 8.00	<0.35	Negative	M. tuberculosis infection unlikely
	> = 0.35 & <25% of Nil tube	Negative	M. tuberculosis infection unlikely
	> = 0.35 & > = 25% of Nil tube	Positive	M. tuberculosis infection likely
>8.00	Any result	Indeterminate	This may be due to excessive levels of circulating gamma interferon or presence of heterophile antibodies

Note

1. This assay cannot differentiate between Latent Infection and Active Tuberculosis.
2. Magnitude of measured Gamma Interferon cannot be correlated with stage or degree of infection, level of immune responsiveness or likelihood of progression to active disease.
3. False negative results maybe obtained if sample is taken prior to development of immune response. CDC recommends repeat test after 8 - 10 weeks in case of high suspicion of tuberculosis.
4. Immunocompromised patients can also show false negativity.
5. Negative result does not preclude the possibility of *Mycobacterium tuberculosis* infection / disease.



No. : 482907439
 By : Dr. SIMMI MUKHARYA M.S.
 ected : 26/7/2025 3:15:00PM
 Status : P
 ected at : SAGAR CC 4-SHEETAL MISHRA
 SANKAT MOCHAN HANUMAN MANDIR PARAS
 TALKIES BADA BAZAR SAGAR-470002
 SAGAR

Age : 22 Years
 Gender : Female
 Reported : 30/7/2025 5:53:25PM
 Report Status : Final
 Processed at : LPL-NATIONAL REFERENCE LAB
 National Reference Laboratory, Block E,
 Sector 18, Rohini, New Delhi -110085



Test Report

Test Name

Results

Units

Bio. Ref. Interval

QuantIFERON®-TB Gold (QFT), INTERFERON GAMMA RELEASE ASSAY (IGRA), PLASMA (EIA)

Gamma Interferon, Antigen tube

1.34

IU/mL

Gamma Interferon, Nil tube

0.05

IU/mL

Final Result

Positive

*This test has been performed on QuantIFERON®-TB Gold (QFT) ELISA test kit (FDA approved)

Interpretation

NIL TUBE in IU/mL	ANTIGEN TUBE MINUS NIL TUBE in IU/mL	FINAL RESULT	INTERPRETATION
< = 8.00	<0.35	Negative	M. tuberculosis infection unlikely
	> = 0.35 & <25% of Nil tube	Negative	M. tuberculosis infection unlikely
	> = 0.35 & > = 25% of Nil tube	Positive	M. tuberculosis infection likely
>8.00	Any result	Indeterminate	This may be due to excessive levels of circulating gamma interferon or presence of heterophile antibodies

Note

1. This assay cannot differentiate between Latent infection and Active Tuberculosis.
2. Magnitude of measured Gamma Interferon cannot be correlated with stage or degree of infection, level of immune responsiveness or likelihood of progression to active disease.
3. False negative results maybe obtained if sample is taken prior to development of immune response CDC recommends repeat test after 8 - 10 weeks in case of high suspicion of tuberculosis.
4. Immunocompromised patients can also show false negativity.
5. Negative result does not preclude the possibility of *Mycobacterium tuberculosis* infection / disease



Page 1 of 2

If results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.
 Tel: 011-4988-5050, Fax: +91-11-2788-2134, E-mail: customer.care@lalpathlabs.com