PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : **Thyrocare Technologies Limited,** D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : HbA1c,HEMOGRAM

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM ,
JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

PATIENTID : NM21881251

TEST NAME	TECHNOLOGY	VALUE	UNITS
HbA1c - (HPLC)			
	H.P.L.C	5.1	%

Reference Range :

Reference Range: As per ADA Guidelines	Guidance For Known Diabetics
Below 5.7% : Normal 5.7% - 6.4% : Prediabetic >=6.5% : Diabetic	Below 6.5% : Good Control 6.5% - 7% : Fair Control 7.0% - 8% : Unsatisfactory Control >8% : Poor Control

Method : Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	100	mg/dL

Reference Range :

90 - 120 mg/dl : Good Control
121 - 150 mg/dl : Fair Control
151 - 180 mg/dl : Unsatisfactory Control
> 180 mg/dl : Poor Control

Method : Derived from HBA1c values

Please correlate with clinical conditions.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 14:59
Sample Type : EDTA
Labcode : 2506075010/CHE33
Barcode : AS338462

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : HbA1c,HEMOGRAM
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	VALUE	UNITS	REFERENCE RANGE
TOTAL LEUCOCYTES COUNT (WBC)	8.47	X 10³ / µL	4.0 - 10.0
NEUTROPHILS	42.3	%	40-80
LYMPHOCYTE	**48.4**	**%**	**20-40**
MONOCYTES	2.1	%	2-10
EOSINOPHILS	**6.8**	**%**	**1-6**
BASOPHILS	0.2	%	0-2
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.2	%	0.0-0.4
NEUTROPHILS - ABSOLUTE COUNT	3.58	X 10³ / µL	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	**4.1**	**X 10³ / µL**	**1.0-3.0**
MONOCYTES - ABSOLUTE COUNT	**0.18**	**X 10³ / µL**	**0.2 - 1.0**
BASOPHILS - ABSOLUTE COUNT	**0.02**	**X 10³ / µL**	**0.02 - 0.1**
EOSINOPHILS - ABSOLUTE COUNT	**0.58**	**X 10³ / µL**	**0.02 - 0.5**
IMMATURE GRANULOCYTES(IG)	0.02	X 10³ / µL	0.0-0.3
TOTAL RBC	4.12	X 10^6/µL	3.8-4.8
NUCLEATED RED BLOOD CELLS	0.01	X 10³ / µL	0.0-0.5
NUCLEATED RED BLOOD CELLS %	0.01	%	0.0-5.0
HEMOGLOBIN	12.1	g/dL	12.0-15.0
HEMATOCRIT(PCV)	39.9	%	36.0-46.0
MEAN CORPUSCULAR VOLUME(MCV)	96.8	fL	83.0-101.0
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	29.4	pq	27.0-32.0
MEAN CORP.HEMO.CONC(MCHC)	**30.3**	**g/dL**	**31.5-34.5**
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	**50.9**	**fL**	**39.0-46.0**
RED CELL DISTRIBUTION WIDTH (RDW-CV)	**14.2**	**%**	**11.6-14.0**
PLATELET DISTRIBUTION WIDTH(PDW)	10.7	fL	9.6-15.2
MEAN PLATELET VOLUME(MPV)	10	fL	6.5-12
PLATELET COUNT	380	X 10³ / µL	150-410
PLATELET TO LARGE CELL RATIO(PLCR)	23.5	%	19.7-42.4
PLATELETCRIT(PCT)	0.38	%	0.19-0.39

Remarks : Alert!!! Predominantly normocytic normochromic with ovalocytes. Platelets:Appear adequate in smear.

Please Correlate with clinical conditions.
Method : Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)
(This device performs hematology analyses according to the Hydrodynamic Focussing (DC method), Flow Cytometry Method (using a semiconductor laser), and SLS- hemoglobin method)

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 14:59
Sample Type : EDTA
Labcode : 2506075010/CHE33
Barcode : AS338462

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS
25-OH VITAMIN D (TOTAL)	**C.L.I.A**	**15.98**	**ng/mL**

Reference Range :
DEFICIENCY : <20 ng/ml || INSUFFICIENCY : 20-<30 ng/ml
SUFFICIENCY : 30-100 ng/ml || TOXICITY : >100 ng/ml

Clinical Significance:

Vitamin D is a fat soluble vitamin that has been known to help the body absorb and retain calcium and phosphorous; both are critical for building bone health. Decrease in vitamin D total levels indicate inadequate exposure of sunlight, dietary deficiency, nephrotic syndrome. Increase in vitamin D total levels indicate Vitamin D intoxication.

Specifications: Precision: Intra assay (%CV):5.3%, Inter assay (%CV):11.9% ; Sensitivity:3.2 ng/ml.

Kit Validation Reference: Holick MF. Vitamin D Deficiency. N Engl J Med. 2007;357:266–81.

Method : FULLY AUTOMATED CHEMI LUMINESCENT IMMUNO ASSAY

VITAMIN B-12	C.L.I.A	260	pg/mL

Reference Range :

Normal : 211 - 911 pg/ml

Clinical significance :
Vitamin B12 or cyanocobalamin, is a complex corrinoid compound found exclusively from animal dietary sources, such as meat, eggs and milk. It is critical in normal DNA synthesis, which in turn affects erythrocyte maturation and in the formation of myelin sheath. Vitamin-B12 is used to find out neurological abnormalities and impaired DNA synthesis associated with macrocytic anemias. For diagnostic purpose, results should always be assessed in conjunction with the patients medical history, clinical examination and other findings.

Specifications: Intra assay (%CV):5.0%, Inter assay (%CV):9.2 %;Sensitivity:45 pg/ml

Kit Validation reference:
Chen IW, Sperling MI, Heminger LA. Vitamin B12. In: Pesce AJ, Kaplan LA, eds. Methods in Clinical Chemistry. St. Louis: CV Mosby; 1987:569–73.

Method : COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY

Please correlate with clinical conditions.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :

Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

Thyrocare
Tests you can trust

Corporate office : **Thyrocare Technologies Limited,** D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

PATIENTID : NM21881251

TEST NAME	TECHNOLOGY	VALUE	UNITS
HIGH SENSITIVITY C-REACTIVE PROTEIN (HS-CRP)	**IMMUNOTURBIDIMETRY**	**4.6**	**mg/L**

Reference Range :-

< 1.00 - Low Risk
1.00 - 3.00 - Average Risk
>3.00 - 10.00 - High Risk
> 10.00 - Possibly due to Non-Cardiac Inflammation

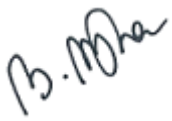
Disclaimer: Persistent unexplained elevation of HSCRP >10 should be evaluated for non-cardiovascular etiologies such as infection , active arthritis or concurrent illness.

Clinical significance:
High sensitivity C- reactive Protein (HSCRP) can be used as an independent risk marker for the identification of Individuals at risk for future cardiovascular Disease. A coronary artery disease risk assessment should be based on the average of two hs-CRP tests, ideally taken two weeks apart.

Kit Validation Reference:
1.Clinical management of laboratory date in medical practice 2003-3004, 207(2003).
2.Tietz : Textbook of Clinical Chemistry and Molecular diagnostics :Second edition :Chapter 47:Page no.1507- 1508.

Please correlate with clinical conditions.
Method:- FULLY AUTOMATED LATEX AGGLUTINATION – BECKMAN COULTER

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463



Dr Anusha B, MD (Path)

PROCESSED AT :

Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

PATIENTID : NM21881251

TEST NAME	TECHNOLOGY	VALUE	UNITS
TESTOSTERONE	C.L.I.A	18.84	ng/dL

Reference Range :-

Adult Male
21 - 49 Yrs : 164.94 - 753.38 || 50 - 89 Yrs : 86.49 - 788.22
Adult Female
Pre-Menopause : 12.09 - 59.46 || Post-Menopause: < 7.00 - 48.93
Boys
2-10 Years : < 7.00 - 25.91
11 Years : < 7.00 - 341.53
12 Years : < 7.00 - 562.59
13 Years : 9.34 - 562.93
14 Years : 23.28 - 742.46
15 Years : 144.15 - 841.44
16-21 Years : 118.22 - 948.56
Girls
2-10 Years : < 7.00 - 108.30
11-15 Years : < 7.00 - 48.40
16-21 Years : 17.55 - 50.41

Clinical Significance: Clinical evaluation of serum testosterone, along with serum LH, assists in evaluation of Hypogonadal males. Major causes of lowered testosterone in males include Hypogonadotropic hypogonadism, testicular failure Hyperprolactinema, Hypopituitarism some types of liver and kidney diseases and critical illness.

Specifications: Precision: Intra assay (%CV): 8.5 %, Inter assay (%CV): 12.6%; Sensitivity: 7 ng/dL.

Kit Validation Reference: Kicklighter EJ, Norman RJ. The gonads. In: Kaplan LA, Pesce AJ, eds. Clinical Chemistry: Theory, Analysis, Correlation. 2nd ed. St. Louis: CV Mosby; 1989:657–662.

Please correlate with clinical conditions.
Method:- COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS
IRON	PHOTOMETRY	61.68	µg/dL
Reference Range : Male : 65 - 175 Female : 50 - 170 **Method :** FERROZINE METHOD WITHOUT DEPROTEINIZATION			
TOTAL IRON BINDING CAPACITY (TIBC)	PHOTOMETRY	404.58	µg/dL
Reference Range : Male: 225 - 535 µg/dl Female: 215 - 535 µg/dl **Method :** SPECTROPHOTOMETRIC ASSAY			
% TRANSFERRIN SATURATION	CALCULATED	15.25	%
Reference Range : 13 - 45 **Method :** DERIVED FROM IRON AND TIBC VALUES			
UNSAT.IRON-BINDING CAPACITY(UIBC)	PHOTOMETRY	342.9	µg/dL
Reference Range : 162 - 368 **Method :** SPECTROPHOTOMETRIC ASSAY			

Please correlate with clinical conditions.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
TOTAL CHOLESTEROL	**PHOTOMETRY**	**211**	**mg/dL**	**< 200**
HDL CHOLESTEROL - DIRECT	**PHOTOMETRY**	**38**	**mg/dL**	**40-60**
HDL / LDL RATIO	**CALCULATED**	**0.24**	**Ratio**	**> 0.40**
LDL CHOLESTEROL - DIRECT	**PHOTOMETRY**	**158**	**mg/dL**	**< 100**
TRIG / HDL RATIO	CALCULATED	1.96	Ratio	< 3.12
TRIGLYCERIDES	PHOTOMETRY	74	mg/dL	< 150
TC/ HDL CHOLESTEROL RATIO	**CALCULATED**	**5.6**	**Ratio**	**3 - 5**
LDL / HDL RATIO	**CALCULATED**	**4.2**	**Ratio**	**1.5-3.5**
NON-HDL CHOLESTEROL	**CALCULATED**	**173.2**	**mg/dL**	**< 160**
VLDL CHOLESTEROL	CALCULATED	14.78	mg/dL	5 - 40

Please correlate with clinical conditions.

Method :

CHOL - CHOLESTEROL OXIDASE, ESTERASE, PEROXIDASE
HCHO - DIRECT ENZYMATIC COLORIMETRIC
HD/LD - Derived from HDL and LDL values.
LDL - DIRECT MEASURE
TRI/H - Derived from TRIG and HDL Values
TRIG - ENZYMATIC, END POINT
TC/H - DERIVED FROM SERUM CHOLESTEROL AND HDL VALUES
LDL/ - DERIVED FROM SERUM HDL AND LDL VALUES
NHDL - DERIVED FROM SERUM CHOLESTEROL AND HDL VALUES
VLDL - DERIVED FROM SERUM TRIGLYCERIDE VALUES

***REFERENCE RANGES AS PER NCEP ATP III GUIDELINES:**

TOTAL CHOLESTEROL	(mg/dl)	HDL	(mg/dl)	LDL	(mg/dl)	TRIGLYCERIDES	(mg/dl)
DESIRABLE	<200	LOW	<40	OPTIMAL	<100	NORMAL	<150
BORDERLINE HIGH	200-239	HIGH	>60	NEAR OPTIMAL	100-129	BORDERLINE HIGH	150-199
HIGH	>240			BORDERLINE HIGH	130-159	HIGH	200-499
				HIGH	160-189	VERY HIGH	>500
				VERY HIGH	>190		

Alert !!! 10-12 hours fasting is mandatory for lipid parameters. If not, values might fluctuate.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : **Thyrocare Technologies Limited,** D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS
FOLLICLE STIMULATING HORMONE (FSH)	C.L.I.A	8.13	mIU/mL

Reference Range :
Females :
Normally Menstruating :
Follicular Phase : 2.5-10.2 | Midcycle Peak: 3.4 - 33.4 | Luteal Phase :1.5-9.1
Pregnant : < 0.3 | Postmenopausal : 23.0 - 116.3
Males (13 - 70 Years) : 1.4-18.1
Method : Fully Automated Bidirectionally Interfaced Chemi Luminescent Immuno Assay

LUTEINISING HORMONE (LH)	C.L.I.A	5.22	mIU/mL

Reference Range :
Females:
Normally Menstruating:
Follicular Phase : 1.9 - 12.5 | Midcycle Peak : 8.7 - 76.3
Luteal Phase :0.5 - 16.9 | Pregnant : 0.1 - 1.5
Postmenopausal : 15.9 - 54.0
Children : 0.1 - 6.0
Males (20 - 70 Years) : 1.5 - 9.3
>70 Years : 3.1 - 34.6
Method : Fully Automated Bidirectionally Interfaced Chemi Luminescent Immuno Assay

PROLACTIN (PRL)	C.L.I.A	0.37	ng/mL

Reference Range :
Females :
Normally Menstruating : 2.8 - 29.2
Pregnant : 9.7 - 208.5
Postmenopausal : 1.8 - 20.3
Male : 2.1 - 17.7
Method : Fully Automated Bidirectionally Interfaced Chemi Luminescent Immuno Assay

Please correlate with clinical conditions.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
ALKALINE PHOSPHATASE	PHOTOMETRY	86.78	U/L	45-129
BILIRUBIN - TOTAL	PHOTOMETRY	0.31	mg/dL	0.3-1.2
BILIRUBIN -DIRECT	PHOTOMETRY	0.1	mg/dL	< 0.3
BILIRUBIN (INDIRECT)	CALCULATED	0.21	mg/dL	0-0.9
GAMMA GLUTAMYL TRANSFERASE (GGT)	PHOTOMETRY	19	U/L	< 38
SGOT / SGPT RATIO	CALCULATED	1.1	Ratio	< 2
ASPARTATE AMINOTRANSFERASE (SGOT)	PHOTOMETRY	20.7	U/L	< 31
ALANINE TRANSAMINASE (SGPT)	PHOTOMETRY	18.8	U/L	< 34
PROTEIN - TOTAL	PHOTOMETRY	7.97	gm/dL	5.7-8.2
ALBUMIN - SERUM	PHOTOMETRY	4.35	gm/dL	3.2-4.8
SERUM GLOBULIN	**CALCULATED**	**3.62**	**gm/dL**	**2.5-3.4**
SERUM ALB/GLOBULIN RATIO	CALCULATED	1.2	Ratio	0.9 - 2

Please correlate with clinical conditions.

Method :

ALKP - MODIFIED IFCC METHOD
BILT - VANADATE OXIDATION
BILD - VANADATE OXIDATION
BILI - DERIVED FROM SERUM TOTAL AND DIRECT BILIRUBIN VALUES
GGT - MODIFIED IFCC METHOD
OT/PT - Derived from SGOT and SGPT values.
SGOT - IFCC* WITHOUT PYRIDOXAL PHOSPHATE ACTIVATION
SGPT - IFCC* WITHOUT PYRIDOXAL PHOSPHATE ACTIVATION
PROT - BIURET METHOD
SALB - ALBUMIN BCG¹METHOD (COLORIMETRIC ASSAY ENDPOINT)
SEGB - DERIVED FROM SERUM ALBUMIN AND PROTEIN VALUES
A/GR - DERIVED FROM SERUM ALBUMIN AND PROTEIN VALUES

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :

Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : **Thyrocare Technologies Limited,** D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	99	ng/dL	60-200
TOTAL THYROXINE (T4)	C.L.I.A	7.3	µg/dL	4.5-12
TSH - ULTRASENSITIVE	C.L.I.A	1.378	µIU/mL	0.55-4.78
FREE THYROXINE (FT4)	C.L.I.A	1.03	ng/dL	0.7-1.8

Comments : ***

The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

Method :

T3 - COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY
T4 - COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY
USTSH - Third Generation Ultrasensitive Chemi Luminescent Immuno Assay
FT4 - Competitive Chemi Luminescent Immuno Assay

Pregnancy reference ranges for TSH/USTSH :
Trimester || T3 (ng/dl) || T4 (µg/dl) || TSH/USTSH (µIU/ml)
1st || 83.9-196.6 || 4.4-11.5 || 0.1-2.5
2nd || 86.1-217.4 || 4.9-12.2 || 0.2-3.0
3rd || 79.9-186 || 5.1-13.2 || 0.3-3.5

References :

1. Carol Devilia, C I Parhon. First Trimester Pregnancy ranges for Serum TSH and Thyroid Tumor reclassified as Benign. Acta Endocrinol. 2016; 12(2) : 242 - 243
2. Kulhari K, Negi R, Kalra DK et al. Establishing Trimester specific Reference ranges for thyroid hormones in Indian women with normal pregnancy : New light through old window. Indian Journal of Contemporary medical research. 2019; 6(4)

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS
POTASSIUM	I.S.E	4.14	mmol/L

Reference Range :
ADULTS: 3.5-5.1 MMOL/L

Clinical Significance :
An abnormal increase in potassium (hyperkalemia)can profoundly affect the nervous system and increase the chance of irregular heartbeats (arrhythmias), which ,when extreme ,can be fatal. The assay could be affected mildly and may result in anomalous values if serum samples have heterophilic antibodies, hemolyzed , icteric or lipemic. The concentration of Potassium in a given specimen may vary due to differences in assay methods, calibration and reagent specificity.

Method : ION SELECTIVE ELECTRODE

Please correlate with clinical conditions.

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :
Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

Thyrocare
Tests you can trust

Corporate office : **Thyrocare Technologies Limited,** D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)
PATIENTID : NM21881251

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
UREA (CALCULATED)	**CALCULATED**	**16.22**	**mg/dL**	**Adult : 17-43**
BLOOD UREA NITROGEN (BUN)	**PHOTOMETRY**	**7.58**	**mg/dL**	**7.94 - 20.07**
UREA / SR.CREATININE RATIO	CALCULATED	22.85	Ratio	< 52
CREATININE - SERUM	PHOTOMETRY	0.71	mg/dL	0.55-1.02
BUN / SR.CREATININE RATIO	CALCULATED	10.68	Ratio	9:1-23:1
CALCIUM	PHOTOMETRY	9.67	mg/dL	8.8-10.6
URIC ACID	PHOTOMETRY	5.12	mg/dL	3.2 - 6.1
SODIUM	I.S.E	137.7	mmol/L	136 - 145
CHLORIDE	I.S.E	103.4	mmol/L	98 - 107

Please correlate with clinical conditions.

Method :

UREAC - Derived from BUN Value.
BUN - KINETIC UV ASSAY.
UR/CR - Derived from UREA and Sr.Creatinine values.
SCRE - CREATININE ENZYMATIC METHOD
B/CR - DERIVED FROM SERUM BUN AND CREATININE VALUES
CALC - ARSENAZO III METHOD, END POINT.
URIC - URICASE / PEROXIDASE METHOD
SOD - ION SELECTIVE ELECTRODE
CHL - ION SELECTIVE ELECTRODE

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)

PROCESSED AT :

Thyrocare
Seshans Complex, No.140,
Anna Salai, Saidapet,
Chennai - 600 015

MC-5457

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : MRS NIVETHA M (31Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM C PRO WITH UTSH,FSH,FT4,LH,POTASSIUM,PROLACTIN (PRL)

HOME COLLECTION :
1, 1ST FLOOR, THIRUMULLAI ILLAM , JANAKIRAMAN STREET , PERUNGUDI, CHENNAI - 600096

PATIENTID : NM21881251

TEST NAME	TECHNOLOGY	VALUE	UNITS
EST. GLOMERULAR FILTRATION RATE (eGFR)	CALCULATED	113	mL/min/1.73 m2

Reference Range :-

> = 90 : Normal
60 - 89 : Mild Decrease
45 - 59 : Mild to Moderate Decrease
30 - 44 : Moderate to Severe Decrease
15 - 29 : Severe Decrease

Clinical Significance

The normal serum creatinine reference interval does not necessarily reflect a normal GFR for a patient. Because mild and moderate kidney injury is poorly inferred from serum creatinine alone. Thus, it is recommended for clinical laboratories to routinely estimate glomerular filtration rate (eGFR), a "gold standard" measurement for assessment of renal function, and report the value when serum creatinine is measured for patients 18 and older, when appropriate and feasible. It cannot be measured easily in clinical practice, instead, GFR is estimated from equations using serum creatinine, age, race and sex. This provides easy to interpret information for the doctor and patient on the degree of renal impairment since it approximately equates to the percentage of kidney function remaining. Application of CKD-EPI equation together with the other diagnostic tools in renal medicine will further improve the detection and management of patients with CKD.

Reference

Levey AS, Stevens LA, Schmid CH, Zhang YL, Castro AF, 3rd, Feldman HI, et al. A new equation to estimate glomerular filtration rate. Ann Intern Med. 2009;150(9):604-12.

Please correlate with clinical conditions.
Method:- CKD-EPI Creatinine Equation

~~ End of report ~~

Sample Collected on (SCT) : 25 Jun 2023 08:45
Sample Received on (SRT) : 25 Jun 2023 13:32
Report Released on (RRT) : 25 Jun 2023 17:29
Sample Type : SERUM
Labcode : 2506075042/CHE33
Barcode : AS338463

Dr Anusha B, MD (Path)