REF. BY

D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS
AMYLASE	PHOTOMETRY	85.6	U/L

Reference Range :-

Adults: 30-118 U/L

Interpretation:

Lipemic Sera (Hypertriglyceridemia) may contain inhibitors, Which falsely depress results. About 20% of patients with Acute Pancreatitis have abnormal lipids. Normal serum amylase may occur in Pancreatitis, Especially relapsing and chronic pancreatitis. Moderate increases may be reported in normal pregnancy.

Clinical Significance:

Causes of high Serum Amylase include Acute Pancreatitis, Pancreatic Pseudocyst, Pancreatic Ascites, Pancreatic Abscess, Neoplasm in or adjacent to Pancreas, Trauma to Pancreas, and common Duct Stones. Nonpancreatic Causes include inflammatory salivary lesions (Eg, Mumps), Perforated Peptic Ulcer, Intestinal Obstruction, Biliary Tract Disease, Peritonitis, Acute Appendicitis, Diabetic Ketoacidosis, and Extrapancreatic Carcinomas. Amylase levels more than 25-fold the upper limit of normal are often found when metastatic tumors produce Ectopic Amylase.

Specifications:

Precision: Within run %CV has been recorded 1% and between run %CV of 1.5%. Analytical sensitivity (Lower Detection Limit) 3 U/I

Kit Validation References:

Tietz Nw, Huang WY, Rauh DF ET Al. Laboratory tests in the differential diagnosis of Hyperamylasemia. Clin Chem 1986;32: 301–307

Please correlate with clinical conditions.

Method:- ENZYMATIC PHOTOMETRIC TEST.

Sample Collected on (SCT) : 02 Jul 2016 08:30 Sample Received on (SRT) : 02 Jul 2016 18:52

Report Released on (RRT) : 03 Jul 2
Sample Type : SERUM

Labcode : 020725551/DSA00

: 03 Jul 2016 02:36

Barcode : 72156312

3R2).

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Dr.Caesar Sengupta MD

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Method:

D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

: MARY ROBINKUMAR (31Y/F) NAME

REF. BY : WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

TEST NAME	TECHNOLOGY	VALUE	UNITS
CHLORIDE	I.S.E	103.8	mmol/l
Reference Range :			·
Adults: 98 - 106 mmol/l			

Ion selective electrode Please correlate with clinical conditions.

: 02 Jul 2016 08:30 Sample Collected on (SCT) Sample Received on (SRT) : 02 Jul 2016 18:52 Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type

: SERUM : 020725551/DSA00 Labcode

Barcode : 72156312

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Dr.Caesar Sengupta MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS
HOMOCYSTEINE	C.L.I.A	14.5	μmol/L

Reference Range :-

Adult : < 30

Clinical Significance:

Homocysteine is linked to increased risk of premature coronary artery disease, stroke and thromboembolism. Moreover, alzheimer's disease, osteoporosis, venous thrombosis, schizophrenia, cognitive deficiency and pregnancy complications also elevates Homocysteine levels.

High Values:

Elevated homocysteine levels might be due to increasing age, genetic traits, drugs, renal dysfunction and dietary deficiency of vitamins or smoking. To lower your homocysteine, eat more green vegetables, stop smoking, alcohol. Folic acid helps lowering elevated levels.

Caution While Interpretation:

To get most accurate results, it is mandatory to separate serum immediately. In separated serum, homocysteine remains stable for at least 48 hours at room temperature.

Please correlate with clinical conditions.

Method:- COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY

 Sample Collected on (SCT)
 : 02 Jul 2016 08:30

 Sample Received on (SRT)
 : 02 Jul 2016 18:52

 Report Released on (RRT)
 : 03 Jul 2016 02:36

Report Released on (RRT)
Sample Type

Labcode : 020725551/DSA00

: SERUM

Barcode : 72156312

3R27.

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

: MARY ROBINKUMAR (31Y/F) NAME

REF. BY : WELLNESS - DSA

TEST ASKED : AAROGYAM

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

TEST NAME	TECHNOLOGY	VALUE	UNITS	
IRON	PHOTOMETRY	46.5	μg/dl	
Reference Range :				
Male: 70 - 180 Female: 60 - 180 Method: FERROZINE METHOD WITHOUT I	DEPROTEINIZATION			
TOTAL IRON BINDING CAPACITY (TIBC) Reference Range:	PHOTOMETRY	342	μg/dl	
Male: 225 - 535 μ g/dl Female: 215 - 535 μ g/dl Method: SPECTROPHOTOMETRIC ASSAY				
% TRANSFERRIN SATURATION	CALCULATED	13.6	%	
Reference Range :				
13 - 45 Method: DERIVED FROM IRON AND TIBC	VALUES			

Please correlate with clinical conditions.

: 02 Jul 2016 08:30 Sample Collected on (SCT) Sample Received on (SRT) : 02 Jul 2016 18:52 Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type

: SERUM

: 020725551/DSA00 Labcode

Barcode : 72156312

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited 9 D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
BLOOD UREA NITROGEN (BUN)	PHOTOMETRY	11.87	mg/dl	7.9 - 20
CREATININE - SERUM	PHOTOMETRY	0.58	mg/dl	Male: 0.6 - 1.1 Female: 0.5 - 0.8
URIC ACID	PHOTOMETRY	3.6	mg/dl	Male: 3.5 - 7.2 Female: 2.6 - 6.0
CALCIUM	PHOTOMETRY	8.82	mg/dl	8.8 - 10.6
BUN / SR.CREATININE RATIO	CALCULATED	20.47	Ratio	9:1 - 23:1
SODIUM	I.S.E	139	mmol/l	136 - 146

Please correlate with clinical conditions.

Method:

BUN - KINETIC UV ASSAY.

SCRE - CREATININE ENZYMATIC METHOD

URIC - Uricase / Peroxidase Method

CALC - ARSENAZO III METHOD, END POINT.

B/CR - DERIVED FROM SERUM BUN AND CREATININE VALUES

SOD - Ion Selective Electrode in Olympus AU2700

 Sample Collected on (SCT)
 : 02 Jul 2016 08:30

 Sample Received on (SRT)
 : 02 Jul 2016 18:52

 Report Released on (RRT)
 : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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Dr.Caesar Sengupta MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♀ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS
LIPASE	PHOTOMETRY	40.8	U/L

Reference Range :-

Adults: 13 - 60 U/L

Interpretation:

REF. BY

For diagnostic purposes, the results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings like serum amylase. Serum Lipase is usually normal in patients with elevated serum amylase, having peptic ulcer, salivary adenitis, inflammatory bowel disease, intestinal obstruction, and macroamylasemia. Lipemic sera may interfere with results.

Clinical Significance:

High serum Lipase is a specific marker for pancreatitis; after acute pancreatitis the Lipase activity increases within 4–8 hours, reaches a peak after 24 hours and decreases after 8 to 14 days. However, there is no correlation between the Lipase activity determined in serum and the extent of damage to the pancreas.

Specifications:

Precision: Within run %CV has been recorded 1.16 % and between run %CV of 0.65 %. Analytical sensitivity (lower detection limit) 3 U/I

Kit Validation References:

Tietz Nw Et Al. Lipase In Serum - The Elusive Enzyme: An Overview. Clin Chem 1993; 39:746-756.

Please correlate with clinical conditions.

Method:- ENZYMATIC COLORIMETRIC ASSAY

Sample Collected on (SCT) : 02 Jul 2016 08:30 Sample Received on (SRT) : 02 Jul 2016 18:52

Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited 9 D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME: MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED : AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME TECHNOLOGY VALUE UNITS

FOLLICLE STIMULATING HORMONE (FSH) C.L.I.A 6.05 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 4.77 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 11.09 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) : 02 Jul 2016 08:30

Sample Received on (SRT) : 02 Jul 2016 18:52

Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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Dr.Durgaprasad N Agrawal MD Dr.Caesar Sengupta MD

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Thyrocare D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703





REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3,HOMO,TSH-LH-FSH-PRL,AMYL,LASE,CHL,SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
TOTAL CHOLESTEROL	PHOTOMETRY	187	mg/dl	125 - 200
HDL CHOLESTEROL - DIRECT	PHOTOMETRY	45	mg/dl	35-80
TRIGLYCERIDES	PHOTOMETRY	103	mg/dl	25 - 200
LDL CHOLESTEROL - DIRECT	PHOTOMETRY	130	mg/dl	85 - 130
TC/ HDL CHOLESTEROL RATIO	CALCULATED	4.2	Ratio	3.0 - 5.0
LDL / HDL RATIO	CALCULATED	2.9	Ratio	1.5 - 3.5
VLDL CHOLESTEROL	CALCULATED	20.6	mg/dl	5 - 40
NON-HDL CHOLESTEROL	CALCULATED	142.1	mg/dl	< 160

Please correlate with clinical conditions.

Method:

CHOL - CHOD POD METHOD

HCHO - ENZYME SELECTIVE PROTECTION METHOD

TRIG - ENZYMATIC COLORIMETRIC METHOD (GPO) [HIGHLY INFLUENCED BY LEVEL OF FASTING]

LDL - HOMOGENOUS ENZYMATIC COLORIMETRIC ASSAY

TC/H - DERIVED FROM SERUM CHOLESTEROL AND HDL VALUES

LDL/ - Derived from serum HDL and LDL Values

VLDL - DERIVED FROM SERUM TRIGLYCERIDE VALUES

NHDL - Derived from serum Cholesterol and HDL values

*REFERENCE RANGES AS PER NCEP ATP III GUIDELINES:

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

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

Sample Collected on (SCT) : 02 Jul 2016 08:30

Sample Received on (SRT) : 02 Jul 2016 18:52 Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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Dr.Caesar Sengupta MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited 9 D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	NORMAL RANGE
ALKALINE PHOSPHATASE	PHOTOMETRY	105.6	U/I	M:53 to 128 - F:42 to 98
BILIRUBIN -DIRECT	PHOTOMETRY	0.1	mg/dl	0 - 0.30
BILIRUBIN - TOTAL	PHOTOMETRY	0.31	mg/dl	0.30 - 1.20
BILIRUBIN (INDIRECT)	CALCULATED	0.21	mg/dl	0 - 0.9
GAMMA GLUTAMYL TRANSFERASE (GG1	T) PHOTOMETRY	44.8	U/I	M: 0 to 55 - F:0 to 38
ASPARTATE AMINOTRANSFERASE (SGC	T PHOTOMETRY	35.1	U/I	M: 0 to 37 - F: 0 to 31
ALANINE TRANSAMINASE (SGPT)	PHOTOMETRY	42.4	U/I	M: 13 to 40 - F: 10 to 28
PROTEIN - TOTAL	PHOTOMETRY	7	gm/dl	5.7 - 8.2
ALBUMIN - SERUM	PHOTOMETRY	4	gm/dl	3.2 - 4.8
SERUM GLOBULIN	PHOTOMETRY	3	gm/dL	2.50-3.40
SERUM ALBUMIN/GLOBULIN RATIO	CALCULATED	1.33	Ratio	0.9 - 2.0

Please correlate with clinical conditions.

Method:

ALKP - Modified IFCC method

BILD - Vanadate Oxidation

BILT - Vanadate Oxidation

BILI - DERIVED FROM SERUM TOTAL AND DIRECT BILIRUBIN VALUES

GGT - Modified IFCC method

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) : 02 Jul 2016 08:30

Sample Received on (SRT) : 02 Jul 2016 18:52 Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

SPA.

Dr.Durgaprasad N Agrawal MD

Dr.Caesar Sengupta MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT :

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS
TESTOSTERONE	C.L.I.A	48.7	ng/dl

Reference Range :-

Adult male 241 - 827 Adult female 14 - 76

Boys

< 1 year 12 - 21 1 - 6 years 3 - 32 7 - 12 years 3 - 68 13 - 17 years 28 - 1110

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): 2.6 %, Inter assay (%CV): 4.3%; Sensitivity: 10 ng/dl

External quality control program participation:

College of American pathologists: Ligand assay (special) survey; cap number: 7193855-01

Please correlate with clinical conditions.

Method:- FULLY AUTOMATED BIDIRECTIONALLY INTERFACED CHEMI LUMINESCENT IMMUNO ASSAY

Sample Collected on (SCT) : 02 Jul 2016 08:30

Sample Received on (SRT) : 02 Jul 2016 18:52

Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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Dr.Durgaprasad N Agrawal MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703





Corporate Office: Thyrocare Technologies Limited ♀ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3, HOMO, TSH-LH-FSH-PRL, AMYL, LASE, CHL, SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3)	C.L.I.A	122	ng/dl	60 - 200
TOTAL THYROXINE (T4)	C.L.I.A	8.3	μg/dl	4.5 - 12.0
THYROID STIMULATING HORMONE (TSH)	C.L.I.A	2.04	μIU/ml	0.30 - 5.5

Comments: SUGGESTING THYRONORMALCY **Please correlate with clinical conditions.**

Method:

T3 - COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY
T4 - COMPETITIVE CHEMI LUMINESCENT IMMUNO ASSAY

TSH - ULTRA SENSITIVE SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

Pregnancy reference ranges for TSH

1st Trimester : 0.10 - 2.50 2nd Trimester : 0.20 - 3.00 3rd Trimester : 0.30 - 3.00

Reference:

Guidelines of American Thyroid Association for the Diagnosis and Management of Thyroid Disease During Pregnancy and Postpartum, Thyroid, 2011, 21; 1-46

 Sample Collected on (SCT)
 : 02 Jul 2016 08:30

 Sample Received on (SRT)
 : 02 Jul 2016 18:52

 Report Released on (RRT)
 : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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Dr. Durgaprasad N Agrawal MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited 9 D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME: MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: AAROGYAM

1.3,HOMO,TSH-LH-FSH-PRL,AMYL,LASE,CHL,SOD

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	
25-OH VITAMIN D (TOTAL)	C.L.I.A	11.68	ng/ml	

Reference Range:

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

Vitamin D Total test is analyzed on Siemens ADVIA Centaur, standardized against ID-LC/MS/MS, as per Vitamin D

Standardization Program (VDSP).

Method: FULLY AUTOMATED CHEMI LUMINESCENT IMMUNO ASSAY

VITAMIN B-12 C.L.I.A 334 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):4.0%, Inter assay (%CV):4.4 %; Sensitivity:45 pg/ml

External quality control program participation:

College of American pathologists: ligand assay (general) survey; CAP number: 7193855-01

Kit validation references:

Chen IW, Sperling MI, Heminger IA. Vitamin B12.In: Pesce AJ, Kalpan LA, editors. Methods in clinical chemistry.

St.Louis:CV Mosby,1987.P.569-73.

Method: FULLY AUTOMATED BIDIRECTIONALLY INTERFACED CHEMI LUMINESCENT IMMUNO ASSAY

Please correlate with clinical conditions.

Sample Collected on (SCT) : 02 Jul 2016 08:30
Sample Received on (SRT) : 02 Jul 2016 18:52
Report Released on (RRT) : 03 Jul 2016 02:36

Sample Type : SERUM

Labcode : 020725551/DSA00

Barcode : 72156312

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: HBA, HEMOGRAM - 6 PART (DIFF)

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	TECHNOLOGY	VALUE	UNITS	
DIABETES SCREEN (BLOOD)				
HbA1c	H.P.L.C	5.3	%	
Reference Range :				
Below 6.0% - Normal Value				
6.0% - 7.0% - Good Control				
7.0% - 8.0% - Fair Control				
8.0% - 10% - Unsatisfactory Control				
Above 10% - Poor Control				
Method: Fully Automated H.P.L.C. u	ısing Biorad Variant II Turbo			
AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	105	mg/dl	

Reference Range :

90 - 120 mg/dl : Excellent Control 121 - 150 mg/dl : Good Control 151 - 180 mg/dl : Average Control 181 - 210 mg/dl : Action Suggested > 211 mg/dl : Panic Value

 $(Note:\ Average\ Blood\ Glucose\ value\ is\ calculated\ from\ HBA1c\ value\ and\ it\ indicates\ Average\ Blood\ Sugar\ level$

over past three months.)

Method: Derived from HBA1c values

Please correlate with clinical conditions.

 Sample Collected on (SCT)
 : 02 Jul 2016 08:30

 Sample Received on (SRT)
 : 02 Jul 2016 18:56

 Report Released on (RRT)
 : 03 Jul 2016 00:24

Sample Type

: EDTA

Labcode : 020725818/DSA00

Barcode : 73453812

SPA.

Dr.Durgaprasad N Agrawal MD Dr.Caesar Sengupta MD

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D-37/1,TTC MIDC,Turbhe, Navi Mumbai-400 703



Corporate Office: Thyrocare Technologies Limited ♥ D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703

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wellness@thyrocare.com

www.thyrocare.com

REPORT

NAME : MARY ROBINKUMAR (31Y/F)

REF. BY: WELLNESS - DSA

TEST ASKED: HBA, HEMOGRAM - 6 PART (DIFF)

SAMPLE COLLECTED AT:

2303, TOWER 2, DAHLIA, TROPICAL LAGOON, NEAR MUCHALA COLLEGE, ANAND NAGAR, GHODBUNDER ROAD, -

400615

TEST NAME	VALUE	UNITS	REFERENCE RANGE
TOTAL LEUCOCYTES COUNT	9.16	X 10 ³ / μL	4 - 10
NEUTROPHILS	58.2	%	40-80
LYMPHOCYTE PERCENTAGE	30	%	M:20-40; F:20-40
MONOCYTES	2.9	%	0-10
EOSINOPHILS	8.5	%	0-6
BASOPHILS	0.1	%	< 2
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.3	%	Male: 0-0.5 Female: 0-0.4
NEUTROPHILS - ABSOLUTE COUNT	5.31	X 10 ³ / μL	2.0 - 7.0
LYMPHOCYTES - ABSOLUTE COUNT	2.75	X 10 ³ / μL	1.00 - 3.00
MONOCYTES - ABSOLUTE COUNT	0.27	X 10 ³ / μL	0.20 - 1.00
BASOPHILS - ABSOLUTE COUNT	0.01	X 10 ³ / μ	0.02 - 0.10
EOSINOPHILS - ABSOLUTE COUNT	0.78	X 10 ³ / μ	0.02 - 0.50
IMMATURE GRANULOCYTES(IG)	0.04	X 10 ³ / μL	0.03
TOTAL RBC	4.6	X 10^6/μl	Male: 4.5-5.5 Female: 3.9-4.8
NUCLEATED RED BLOOD CELLS	Nil	X 10 ³ / μL	Nil in adults
NUCLEATED RED BLOOD CELLS %	Nil	%	Nil in adults
HEMOGLOBIN	12.6	g/dL	Male : 13-17 Female : 12-15
HEMATOCRIT(PCV)	40.5	%	Male : 40-50 Female : 36-46
MEAN CORPUSCULAR VOLUME(MCV)	88	fL	83-101
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	27.4	pq	27-32
MEAN CORP.HEMO.CONC(MCHC)	31.1	g/dL	31.5-34.5
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	45.1	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (RDW-CV)	14	%	11.6-14
PLATELET DISTRIBUTION WIDTH(PDW)	13.2	fL	9.6-15.2
MEAN PLATELET VOLUME(MPV)	10.8	fL	6.5-12.0
PLATELET COUNT	445	X 10 ³ / μ	150-400
PLATELET TO LARGE CELL RATIO(PLCR)	30.8	%	19.7 - 42.4
PLATELETCRIT(PCT)	0.48	%	0.19 - 0.39

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)

: 03 Jul 2016 00:24

~~ End of report ~~

Sample Collected on (SCT) : 02 Jul 2016 08:30 Sample Received on (SRT) : 02 Jul 2016 18:56

Sample Type : EDTA

Report Released on (RRT)

Labcode : 020725818/DSA00

Barcode : 73453812

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Dr.Durgaprasad N Agrawal MD Dr.Caes

Dr.Caesar Sengupta MD

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