



Mr. SITSO KWASI KORNU

PID NO: P36180008163

Age: 33 Year(s) Sex: Male

**Reference:**

Sample Collected At:  
GILEAD MEDICAL & DENTAL CENTER  
HOUSE NO BALB NO C896/3,KANDA  
HIGHWAY NORTH RIDGE,ACCRA-  
14911.  
014911

VID: 36180108469

Registered On:

10/07/2018 05:00 PM

Collected On:

10/07/2018

Reported On:

17/07/2018 07:11 PM

Investigation	Observed Value	Unit	Biological Reference Interval
<b>Thyroid panel-1 (T3/T4/TSH)</b> (Serum)			
<b>T3 (Total)</b> (CMIA)	0.43	ng/dL	Male: <= 3 Days : 100-740 Male: 3 - 365 Days : 105 - 245 Male: 1 - 5 Years : 105 - 269 Male: 5 - 10 Years : 94 - 241 Both: > 10 Years : 0.52-1.85 : 0.52 - 1.85
<b>T4 (Total)</b> (CMIA)	<b>3.39</b>	µg/dL	4.4-10.8
<b>TSH(Ultrassensitive)</b>	0.73	µIU/mL	0.45-4.5

**INTERPRETATION**

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	•Chronic Autoimmune Thyroiditis •Post thyroidectomy,Post radioiodine •Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	•Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness •Subclinical Hyperthyroidism •Thyroxine ingestion"
Decreased	Decreased	Decreased	•Central Hypothyroidism •Non-Thyroidal illness •Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	•Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

**References:** 1. Interpretation of thyroid function tests. Dayan et al. THE LANCET • Vol 357 • February 24, 2001  
2. Laboratory Evaluation of Thyroid Function, Indian Thyroid Guidelines, JAPI, January 2011,vol. 59

**Mr. David Adjei Adu**  
Bsc.Biomedical Scientists



Mr. SITSO KWASI KORNU

PID NO: P36180008163

Age: 33 Year(s) Sex: Male

**Reference:**

Sample Collected At:  
GILEAD MEDICAL & DENTAL CENTER  
HOUSE NO BALB NO C896/3,KANDA  
HIGHWAY NORTH RIDGE,ACCRA-  
14911.  
014911

**VID: 36180108469**

Registered On:

10/07/2018 05:00 PM

Collected On:

10/07/2018

Reported On:

17/07/2018 07:11 PM

**Investigation**

**Cortisol, Serum (8AM)**

(Serum 8AM,CLIA)

**Observed Value**

**2.70**

**Unit**

ug/dl

**Biological Reference Interval**

5-23

**-- End of Report --**

**Dr. Anuya Badwe**  
MD(Path)  
Clinical Pathologist