

Mr. KLEDO MAWULI

Tel No: 2345678764567 PID NO: P36170021977 Age: 39 Year(s) Sex: Male Reference: Dr.GILEAD MEDICAL

Sample Collected At:

Ghana

TEST REPORT

VID: 36170122191

Registered On: 11/01/2018 04:57 PM Collected On: 11/01/2018 10:27PM Reported On: 11/01/2018 10:24 PM

<u>Investigation</u>	Observed Value	<u>Unit</u>	Biological Reference Interval
Thyroid panel-1 (T3/T4/TSH) (Serum)			
T3 (Total) (CMIA)	0.46	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
T4 (Total) (CMIA)	6.65	μg/dL	4.4-10.8
TSH(Ultrasensitive)			

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

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