DR. HARISH B. SALIAN

M.S.

GEN. SURGEON

Reg. No.: 63338 Mob.:9821645884



DR. SUCHITRA H. SALIAN

M.D.D.G.O

OBSTETRICIAN & GYNAECOLOGIST

Reg. No.: 61440 Mob.: 9821045884

MATERNITY SURGICAL & MEDICAL CARE

CONSULTATION TIME: 11 AM TO 1 PM / 7 PM TO 9 PM MONDAY TO SATURDAY

Ref.No.

Date : 8 ///3 ·

Miss Ritike Shelly

5. T3 T4 T3 H WNL Hb 11.5 gul.

> 3 For Thyponorm 75 Mg Idaily x Inda.

Rep S.T3 TyTSH
Time / July
2013

85

TSH red

Tol Thyponorm 100 /p

Idaily BB

Anth

Cap Thypoul Idaily x (18)

8.5. T3 Ty TSH

29 |6 | 17

Dr. Ravindra H. Birajdar

M.B.B.S., D.P.B., M.D. (Path) Reg. No. 77586 Consulting Pathologist



Telephone: 2771 2735 2770 2320

Telefax: 2772 5717

EXCEL Centre of Excellence : Pathology

'Prashanti Nilayam' Plot No. 17, Sector - 21, Phase - 1, Nerul (E), Navi Mumbai. Time: 7.30 a.m. to 10 p.m. Sunday 7.30 a.m. to 2.00 p.m. Email: excelpathologynerul@gmail.com Website: www.excellabs.in

SID: 170110740

TESTS

T3 (TOTAL)

Ref:DR . SALIAN SUCHITRA H.

Reg. On: 27/05/2017 10:43 am

MS. RITIKA SHETTY

Centre: EXCEL PATHOLOGY

Coll. On: 27/05/2017 10:43 arr

Rep. On: 27/05/2017 05:24 pm

Age: 23.00 Years Sex: FEMALE

THYROID FUNCTION TESTS

RESULTS REFERENCE RANGE & UNITS

> Euthyroid: 70-204 ng/dl Hypothyroid: Below 70 ng/dl Hyperthyroid: Above 204 ng/dl

Pregnancy:

1 st Trimester: 81 - 190 ng/dl 2 nd Trimester: 100 - 260 ng/dl 3 rd Trimester : 100 - 260 ng/dl

T4 (TOTAL)

8.60

74.30

Hypothyroid: Below 4.2 ug/dl Hyperthyroid: Above 11.8 ug/dl Euthyroid: 4.2 - 11.8 ug/dl

TSH (Ultrasensitive)

24.616

0.45 - 4.5 uIU/ml : Euthyroid

Pregnancy:-

First Trimester: 0.1 to 2.5 uIU/ml Second Trimester: 0.2 to 3.0 uIU/ml Third Trimester: 0.3 to 3.0 uIU/ml

Reference:

Guidelines of the American Thyroid

Association

During Pregnancy and Postpartum, 2011.

NOTE:

- 1. Decreased T3 (normal T4 & TSH) have minimal clinical significance and are not recommended for diagnosis of hypothyroidism
- 2. Total T3 may be decreased by <25% in healthy older individuals.
- 3. Total T3 & T4 values may also be altered under other conditions like pregnancy, drugs (androgens, estrogens, O C phenytoin) nephrosis etc. In such cases free T3 and free T4 are preferred tests.
- 4. Clinically corelate the results or repeat the tests with fresh sample if TSH values are between 4.5 15 uIU/ml as factors may give falsely high TSH.

METHOD: BY FULLY AUTOMATED ELECTRO CHEMILUMINESCENCE SYSTEM.

FULLY AUTOMATED ABBOTT ARCHITECT SYSTEM i 1000 SR (CMIA)., USA.

End of Report

Page 1 of 1



M.D.Path(Mum.).D.P.B. Checked by Consulting Pathologist

· . .