



Name: MRS.RUCHIKA SONAWANE Age/Gender: 24 Year(s) 0 Month(s) 0 Day(s)/Female
Referred By: DR.POOJA BANSAL Client Name:
Collection Date: 22-11-2025 08:37:00 Report Release Date: 22-11-2025 12:19:21

No.	Investigation	Observed Value	Unit	Biological Reference Interval
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Beta HCG

1 Beta HCG 19407.0 mIU/mL
Serum, Method: CLIA
Non pregnant: ≤ 5.3
Peri & Post menopausal: ≤ 13
Pregnant : Refer Interpretation

Interpretation

Human chorionic gonadotropin (hCG) is produced by the placenta and normally is only present during pregnancy. Some abnormal tissues, tumors, and cancers can also produce hCG, making the hCG test useful as a tumor marker. An increased level of hCG is seen with gestational trophoblastic disease and some germ cell tumors (benign and cancerous). Levels of hCG may also be elevated in other diseases such as liver, breast, lung, skin, and stomach cancers. Increased levels may also be seen in benign conditions such as cirrhosis, duodenal ulcer, inflammatory bowel disease, and marijuana use.

Pregnant Woman - Weeks of gestation	Weeks post Last Menstrual Period (LMP)	Range(mIU/ml)
1.3 to 2	3.3 to 4	16 to 156
2 to 3	4 to 5	101 to 4,870
3 to 4	5 to 6	1,110 to 31,500
4 to 5	6 to 7	2,560 to 82,300
5 to 6	7 to 8	23,100 to 1,51,000
6 to 7	8 to 9	27,300 to 2,33,000
7 to 11	9 to 13	20,900 to 2,91,000
11 to 16	13 to 18	6,140 to 1,03,000
16 to 21	18 to 23	4,720 to 80,100
21 to 39	23 to 41	2,700 to 78,100

End Of Report



Scan For Report

* The analyte is not in the lab scope.
CRM No :13327001
Sample Recd. Time: 22-11-2025 10:00
Report Time: 22-11-2025 12:19
Patient Name: MRS.RUCHIKA SONAWANE
Patient ID: 13327001

Authorized Signatory
Dr. Bubul Kalita
MD (Biochemistry)



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QUALITY POLICY

GENERAL DIAGNOSTICS INTERNATIONAL (P) Ltd. maintains the highest standards of quality control in all aspects of laboratory work. The purpose of our laboratory's Quality Management System is to ensure that:

- Principles of all accreditations, including that of NABL – ISO1518:2012 (National Accreditation Board of Laboratories) are adhered for each test in the scope of the accreditation, and beyond.
- Test methods, processes and control mechanisms are timely updated and fully validated to ensure the accuracy and reliability of our test results.

The objectives of our Quality Control system are:

- Use Bar-Coded operations to enable full traceability throughout the sample flow process and to ensure sample handling procedures and environmental conditions are managed well and there is no or minimal affect on the results.
- Continually improve the practices of our clients, franchise partners, associate doctors, clinics and hospitals and monitor their training needs. Be proactive in identifying gaps in the processes being followed. Guide them to ensure that the patients are served in the best possible way.
- Report the results with accuracy and clarity in a timely manner. Do a root cause analysis whenever there is a deviation against protocols and find solutions to the identified causes.
- Ensure a continual enhancement, implementation and maintenance of the quality system and seek improvement in the effectiveness of the quality system from experts at regular intervals.
- Meet and exceed expectations with respect to turn-around time, sample collection hygiene & reliability of service.
- Ensure that each test is performed by qualified and trained staff. Provide opportunities to the staff so that they can increase their knowledge and use the same for self and organizational betterment.
- Ensure that the equipment used are best in class, properly maintained and calibrated and where possible, measurements are traceable to recognized standards. Also explore methods which may lead to improvement in equipment performance and methodologies used for conducting tests.
- Enable technology upgrades to achieve higher accuracy and reduced complexities.
- Use internal audits and other checks to ensure the quality system complies with requirements; ensure problems are investigated promptly, root cause(s) established and effective action taken to prevent a recurrence.
- Have a smooth communication mechanism to ensure information is made available as rapidly as possible to those who need it, both internal and external to the organization.
- Monitor, help and support our franchise and service partners to be sensitive on all aspects of service delivery and to ensure quality standards are followed with no exceptions.

CONDITIONS of REPORTING

01. It is presumed that the specimen accompanying the TRF (Test Requisition Form where the details of patient are recorded) is of the same patient whose details are there in the TRF.
02. A test requested might not be performed due to the following reasons(s):
 - 2.1 Insufficient quantity of specimen required to conduct the test.
 - 2.2 Poor quality of the Specimen not meeting the quality criteria (hemolysis of sample/clotted.)
 - 2.3 Incorrect specimen type as required to conduct a test.
03. Test(s) may be partly or fully cancelled due to incorrect test code, incorrect name of the test or incorrect type of specimen. A communication shall be made and it is expected that a fresh specimen will be sent to laboratory for analysis of same parameter(s).
04. The results of laboratory investigation are dependent on the quality of the specimen as well as the assay procedures/technologies used. All samples collected for tests are required to be prepared, stored, labeled and brought to processing laboratory as per the prescribed guidelines of GENERAL DIAGNOSTICS.
05. GENERAL DIAGNOSTICS laboratory cannot be held liable for incorrect results of a sample which deviated from the guidelines issued.
06. There can be several factors like sample's unintended exposure to heat or travel through rough terrain which affect the quality of test results. Therefore a 2% chance of error/deviation in results is a possibility.
07. For certain category of tests, the report may carry a "PRELIMINARY" status implying that the results are yet to be reported for one (or more) tests. For example, in the case with certain microbiology tests, a "FINAL" culture, identification or drug susceptibility result might be pending. In such case, the status "RESULT PENDING" will be mentioned on report. The same shall be replaced by the test results whenever it is ready.
08. If the collection date or any other details was not stated in the Test Requisition Form, the same will not be printed on the report. In cases where the missing information is mandatory for report generation or meeting accreditation guidelines, the sample shall not be processed at all.
09. Tests parameters excluded from the "scope" of NABL accreditation shall be marked by asterisks.
10. In case you are not the intended recipient of the report, please immediately inform the same to the issuing entity. Any use, disclosure, copy or distribution of any contents of such report, is unlawful and is strictly prohibited.
11. Some test may be referred to other laboratories to provide a wider test menu to the patients. The details of the laboratory where the sample was referred to, can be obtained from Customer Care department.
12. Claims of comparing results against that from a different laboratory shall be looked into only if it was the same sample which was split and sent in same conditions to all laboratories and processed on the same technology.



The greatness of a NATION is judged by the way it treats its ANIMALS.