

3-6-16 & 17, Street No. 19, Himayatnagar, Hyderabad - 500 029

Email: info@vijayadiagnostic.com www.vijayadiagnostic.com

## LABORATORY TEST REPORT

 Regn Date
 : 11/02/2020
 08:21
 Sample Collection
 : 11/02/2020
 08:26

 Name
 : MRS. UMA SAMBU RANI NANDIGAM
 Print Date
 : 11/02/2020
 18:39

 Regn No
 : 59204116
 Age / Sex
 : 52 Years
 / Female

Ref By : Dr. SOUTH CENTRAL RAILWAY Regn Centre : Manikonda - 59

Sample Type : Serum Ref no. :

## **T3,T4 & TSH**

TEST NAME		RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Total T3  Method: Chemiluminescence Immuno Assay (CLIA)	:	3.3	nmol/L	0.90 - 2.76 nmol/L
Total T4  Method: Chemiluminescence Immuno Assay (CLIA)	:	1.7	ng/dL	Infants : $6.0$ - $13.2$ $\mu g/dL$ Children : $5.5$ - $12.1$ $\mu g/dL$ Adolescents : $5.5$ - $11.1$ $\mu g/dL$ Adults : $0.8$ - $1.9$ $ng/dL$ Pregnancy: $6.4$ - $10.7$ $\mu g/dL$
TSH ULTRASENSITIVE	:	0.56	uIU/mL	Infants: 0.87 - 6.15 μIU/mL Children: 0.67 - 4.16 μIU/mL Adolescents: 0.48 - 4.17 μIU/mL Adults: 0.55 - 4.78 uIU/mL

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Pregnancy:
1st Trimester: 0.3 - 4.5 µIU/mL

2nd Trimester : 0.5 -  $4.6 \mu IU/mL$ 3rd Trimester : 0.8 -  $5.2 \mu IU/mL$ 

 $Method: Chemiluminescence\ Immuno\ Assay\ (CLIA)$ 

Comments / Interpretation:

 $\star 5920416$  NABL Accredited

**Released Date** 11/02/2020 15:46



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- Patient preparation is particularly important for hormone studies, results of which may be markedly affected by many factors such as stress, position, fasting state, time of the day, preceding diet and drug therapy.
- The levels of T3 helps in the diagnosis of T3 Thyrotoxicosis and monitoring the course of hyperthyroidism.
- T3 is not recommended for diagnosis of hypothyroidism as decreased values have minimal clinical significance.
- Values below the lower limits can be caused by a number of conditions including non-thyroidal illness, acute and chronic stress and hypothyroidism.
- Elevated level of T4 are seen in hyperthyroidism, pregnancy, euthyroid patients with increased serum Thyroxine Binding Globulin.
- Decreased levels are noted in hypothyroidism, hypoproteinemia, euthyroid sick syndrome, decrease in Thyroxine Binding Globulin.

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- TSH levels are increased in primary hypothyroidism, insufficient thyroid hormone replacement therapy, Hashimotos thyroiditis, use of amphetamines, dopamine antagonists, iodine containing agents, lithium and iodine induced or deficiency goiter.
- Decreased levels of TSH may be seen in Graves Disease, Toxic multinodular Goitre, Thyroiditis, Excessive treatment with thyroid hormone replacement and central Hypothyroidism.



Certificate # MC-2657

DR.BIKASH K CHAUDHURY CONSULTANT BIOCHEMIST



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## LABORATORY TEST REPORT

Regn Date : 11/02/2020 08:21
Name : MRS. UMA SAMBU RANI NANDIGAM

Regn No : **59204116** 

Ref By : Dr. SOUTH CENTRAL RAILWAY

Sample Type : Whole Blood - EDTA

Sample Collection : 11/02/2020 08:26

: 11/02/2020 18:39

: 52 Years / Female

Regn Centre : Manikonda - 59

Ref no.

Print Date

Age / Sex

### **HAEMOGLOBIN (Hb)**

TEST NAME RESULT

13.0

**BIOLOGICAL REFERENCE INTERVAL** 

12.0 - 15.0 g/dL

(2<del>33</del>)

Haemoglobin

Photometric measurement

Certificate # MC-2657

DR.SHASHIKANTH CONSULTANT PATHOLOGIST

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#### LABORATORY TEST REPORT

Regn Date : 11/02/2020 08:21 Sample Collection : 11/02/2020 08:26 Name Print Date : 11/02/2020 : MRS. UMA SAMBU RANI NANDIGAM : 52 Years / Female Regn No : 59204116 Age / Sex

Ref By : Dr. SOUTH CENTRAL RAILWAY : Manikonda - 59 Regn Centre

Sample Type : Serum Ref no.

#### LIPID PROFILE (LP)

TEST NAME RESULT BIOLOGICAL REFERENCE INTERVAL Clear Serum Status

**Triglycerides** 224 Normal: < 150 mg/dL

Borderline high: 150-199 mg/dL

High: 200-499 mg/dL Very high: >/= 500 mg/dL

Method: GPO - POD

**Total Cholesterol** 176 Desirable Level: < 200 mg/dL

> $Borderline: 200-239\ mg/dL$ Undesirable: >/= 240 mg/dL

Method · CHOD - POD

LDL Cholesterol. 105 Optimal : < 100 mg/dL

> Near Optimal: 100 - 129 mg/dL Borderline High: 130 - 159 mg/dL : 160 - 189 mg/dL Very High : > 189 mg/dL

Method: Calculation

Desirable Level : > 60 mg/dL Optimal : 40 - 60**HDL Cholesterol** 26

mg/dL Undesirable : < 40 mg/dL

Method: Elimination-Catalase/CHOD - POD

**VLDL** 45

Method: Calculation

Total Cholesterol/HDL Cholesterol Ratio 6.77 Low Risk : 3.3 - 4.4

> Average Risk : 4.5 - 7.1 Moderate Risk: 7.2 - 11.0

< 30 mg/dL

Method: Calculation

LDL Cholesterol/HDL Cholesterol Ratio 4.05 Desirable Level: 0.5 - 3.0

> Borderline Risk: 3.0 - 6.0 High Risk : > 6.0

Method: Calculation

#### Comments / Interpretation:

- Lipid profile is a panel of blood tests that serves as an initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases.

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