



Name : **MR. ASHISH YADAV**  
 Age/Gender : **25YEARS/MALE**  
 Sample Type : **SERUM**  
 Ref By : **DR.SELF**  
 TypedBy : Bharat Saini

Bill Number : **M2698**  
 Bill Date : 28-Jun-2024 02:04 PM  
 Sample Collection : 28-Jun-2024 02:25 PM  
 Sample Received : 28-Jun-2024 02:31 PM  
 Reporting Date : 28-Jun-2024 09:34 PM

### THYROID PROFILE ( TFT )

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
TOTAL TRIIODOTHYRONINE ( T3 ) (Method: CLIA)	1.20	ng/ml	0.87 - 1.78
TOTAL THYROXINE ( T4 ) (Method: CLIA)	8.8	ug/dL	4.82 - 11.72
THYROID STIMULATING HORMONE (TSH) (Method: CLIA)	1.89	uIU/mL	0.34 - 5.60

#### Pregnancy Reference Ranges for TSH:

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.0

3rd Trimester : 0.20 - 3.0

(Ref: Guidelines of American Association for the diagnosis and management of Thyroid Disease during pregnancy and Postpartum, Thyroid, 2011,21:1-46).

Primary malfunction of the thyroid gland may result in excessive (Hyper) or below normal (Hypo) release of T3 or T4. In Addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good. It is especially useful in the differential diagnosis of primary (Thyroid) from secondary (Pituitary) and tertiary (Hypothalamus)hypothyroidism. In primary Hypothyroidism, TSH levels are significantly elevated, While in secondary and tertiary hypothyroidism, TSH levels are low. A TSH level between 6-12 mIU/L with normal T4 may represent subclinical or compensated Hypothyroidism. Suppressed TSH may be seen in elderly patients who do not have thyrotoxicosis (Since the T3 is low or normal). TSH may also be suppressed in depression.

\*A synchronous diurnal rhythm is found in serum TSH with low levels in the day time and higher levels at night. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH Concentrations.

-----End of the Report-----



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Authorized Signatory

LAB INCHARGE



Name : **MR. ASHISH YADAV**  
Age/Gender : **25YEARS/MALE**  
Sample Type : **SERUM**  
Reff By : **DR.SELF**  
TypedBy : Md Masud Ansari

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### LIPID PROFILE

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
TOTAL CHOLESTROL (Method: CHOD/POD)	259	mg/dl	Desirable Level: < 200 Borderline : 200 - 239 Undesirable : Above 239
HDL CHOLESTROL (Method: DIRECT/ENZYME ASSAY)	51	mg/dl	Desirable : > 60 Optimal : 40-59 Undesirable : < 40
LDL CHOLESTROL (Method: Calculated)	207	mg/dl	Optimal : < 100 Near Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : Above 190
VLDL CHOLESTROL (Method: Calculated)	25	mg/dl	< 30
TRIGLYCERIDES (Method: GPO-PAP)	129	mg/dl	Desirable Level : < 150 Borderline High : 150 - 199 High : 200 - 499 Very High : >= 500
CHOL/HDL RATIO (Method: Calculated)	5.1		Low Risk:3.3-4.4 Average Risk :4.5-7.1 Moderate Risk :7.2-11.0

\*National Cholesterol Education Programme Adult Treatment Panel III Guidelines (US)

-----End of the Report-----

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**THYROID ANTIBODY (ANTI TPO)**

<b>INVESTIGATION</b>	<b>RESULT</b>	<b>UNITS</b>	<b>NORMAL RANGE</b>
THYROID AB ANTI TPO (Method: Chemiluminescence)	16.0	IU/mL	0 - 45 : Negative 45 - 55 : Borderline > 55 : Positive

Sugessted Clinical Correlation If necesarry Kindly Discuss.

-----End of the Report-----

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