

**Report for** Sachin(23Y/M)

**Tests asked** Ftes, Liver Function Tests + 6 Others

Test date 27 Jul 2024 Report status Complete Report





# quality control to ensure 100% report accuracy



Qualified and trained technicians



Temperature-controlled containers to store samples



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Name : SACHIN(23Y/M)

Ref. By : SELF

## **ADDRESS:**

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL NANGAL RAYA DELHI

## **Report Availability Summary**

Full Report Available

Note: This is summary page. Please refer to the table below for the details

Test	Report Status
CARDIAC RISK MARKERS	Available
ERYTHROCYTE SEDIMENTATION RATE (ESR)	Available
FREE TESTOSTERONE	Available
HEMOGRAM - 6 PART (DIFF)	Available
KIDPRO	Available
LIVER FUNCTION TESTS	Available
T3-T4-USTSH	Available
TOTAL THYROXINE (T4)	Available
TOTAL TRIIODOTHYRONINE (T3)	Available
TSH - ULTRASENSITIVE	Available
VITAMIN D AND B12 COMBO	Available
25-OH VITAMIN D (TOTAL)	Available
VITAMIN B-12	Available

Note: Underlined values are Critical Values, Clinician's attention required.

**(**) 7022 000 900

Clinically Tested by: Thyrocare Technologies Ltd.





REF. BY : SELF

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA

HOSPITAL NANGAL RAYA DELHI

TEST NAMETECHNOLOGYVALUEUNITSERYTHROCYTE SEDIMENTATION RATE (ESR)MODIFIED WESTERGREN15mm / hr

Bio. Ref. Interval. :-

Male : 0-15 Female : 0-20

Please correlate with clinical conditions.

Method:- MODIFIED WESTERGREN

Sample Collected on (SCT)
Sample Received on (SRT)
Report Released on (RRT)

Sample Type
Labcode
Barcode



Note:- Underlined values are Critical Values, Clinician's attention required.

: 27 Jul 2024 08:03

: 27 Jul 2024 12:11 : 27 Jul 2024 16:27

**:** EDTA Whole Blood **:** 2707040796/PE003

: CM688019

Dr Saakshi Mittal MD(Path)

Saakshir

Page : 1 of 12

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)





: SELF **REF. BY** 

**TEST ASKED** CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

#### **HOME COLLECTION:**

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL NANGAL RAYA DELHI

TEST NAME	METHODOLOGY	VALUE	UNITS	Bio. Ref. Interval
TOTAL LEUCOCYTES COUNT (WBC)	HF & FC	7.35	X 10 <sup>3</sup> / μL	4.0 - 10.0
NEUTROPHILS	Flow Cytometry	51.1	%	40-80
LYMPHOCYTE	Flow Cytometry	42.3	%	20-40
MONOCYTES	Flow Cytometry	4.5	%	2-10
EOSINOPHILS	Flow Cytometry	1.6	%	1-6
BASOPHILS	Flow Cytometry	0.4	%	0-2
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	Flow Cytometry	0.1	%	0-0.5
NEUTROPHILS - ABSOLUTE COUNT	Calculated	3.76	$X~10^3$ / $\mu L$	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	Calculated	3.11	X 10 <sup>3</sup> / μL	1.0-3.0
MONOCYTES - ABSOLUTE COUNT	Calculated	0.33	$X~10^3$ / $\mu L$	0.2 - 1.0
BASOPHILS - ABSOLUTE COUNT	Calculated	0.03	$X~10^3$ / $\mu L$	0.02 - 0.1
EOSINOPHILS - ABSOLUTE COUNT	Calculated	0.12	$X~10^3$ / $\mu L$	0.02 - 0.5
IMMATURE GRANULOCYTES(IG)	Calculated	0.01	$X~10^3$ / $\mu L$	0-0.3
TOTAL RBC	HF & EI	4.76	X 10^6/μL	4.5-5.5
NUCLEATED RED BLOOD CELLS	Calculated	0.01	$X~10^3$ / $\mu L$	0.0-0.5
NUCLEATED RED BLOOD CELLS %	Flow Cytometry	0.01	%	0.0-5.0
HEMOGLOBIN	SLS-Hemoglobin Method	14.6	g/dL	13.0-17.0
HEMATOCRIT(PCV)	CPH Detection	44.6	%	40.0-50.0
MEAN CORPUSCULAR VOLUME(MCV)	Calculated	93.7	fL	83.0-101.0
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	Calculated	30.7	pq	27.0-32.0
MEAN CORP.HEMO.CONC(MCHC)	Calculated	32.7	g/dL	31.5-34.5
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	Calculated	48.4	fL	39-46
RED CELL DISTRIBUTION WIDTH (RDW-CV)	Calculated	13.9	%	11.6-14
PLATELET DISTRIBUTION WIDTH(PDW)	Calculated	20.7	fL	9.6-15.2
MEAN PLATELET VOLUME(MPV)	Calculated	<u>13.3</u>	fL	6.5-12
PLATELET COUNT	HF & EI	174	$X~10^3$ / $\mu L$	150-410
PLATELET TO LARGE CELL RATIO(PLCR)	Calculated	<u>51.9</u>	%	19.7-42.4
PLATELETCRIT(PCT)	Calculated	0.23	%	0.19-0.39

Clinical history is asked for all the relevant abnormalities detected and in absence / failure of receiving of clinical history, results are rechecked twice and released. Advised clinical correlation.

Method: Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)

(Reference: \*FC- flowcytometry, \*HF- hydrodynamic focussing, \*EI- Electric Impedence, \*Hb- hemoglobin, \*CPH- Cumulative pulse height)

Sample Collected on (SCT) : 27 Jul 2024 08:03 Sample Received on (SRT) : 27 Jul 2024 12:11 Report Released on (RRT) : 27 Jul 2024 16:27 **Sample Type** : EDTA Whole Blood

**Barcode** : CM688019 Saakshir

Dr Saakshi Mittal MD(Path)

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Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited) Note:- Underlined values are Critical Values, Clinician's attention required.

: 2707040796/PE003



Labcode



REF. BY : SELF

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA

HOSPITAL NANGAL RAYA DELHI

TEST NAMETECHNOLOGYVALUEUNITSFREE TESTOSTERONEE.L.I.S.A1.24pg/mL

Bio. Ref. Interval. :-

Male

< 12 Yrs: < 4.60 12-18 Yrs: 0.18 - 23.08 19-55 Yrs: 1.00 - 28.28 > 55 Yrs: 0.70 - 21.45

Female

< 12 Yrs : < 1.46 12-18 Yrs : < 2.24 19-55 Yrs : < 2.85 > 55 Yrs : < 1.56

Please correlate with clinical conditions.

Method:- SOLID PHASE ENZYME IMMUNOASSAY

Sample Collected on (SCT): 27 Jul 2024 08:03Sample Received on (SRT): 27 Jul 2024 12:25Report Released on (RRT): 27 Jul 2024 18:48

Sample Type

: SERUM

**Labcode** : 2707040992/PE003

Note:- Underlined values are Critical Values, Clinician's attention required.

: CJ809182

Dr Saakshi Mittal MD(Path)

Saakshir

Clinically Tested by :Thyrocare Technologies Ltd

PharmEasy

Labs

**Barcode** 

Registered Address: DOCON TECHNOLOGIES PRIVATE LIMITED, Office No 208, 209 & 210 Second floor, A wing, 'Dattani Plaza', Near East West Industrial Estate, Safed Pool, Saki Naka, Andheri (East), Mumbai - 400072

**Lab Address:** Plot No.428, 2nd flr, Phase-IV, Udyog| Vihar, Gurgaon, Haryana - 122015 7022 000 900

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REF. BY : SELI

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL NANGAL RAYA DELHI

TEST NAME	TECHNOLOGY VALUE		UNITS	
25-OH VITAMIN D (TOTAL)	E.C.L.I.A	32.2	ng/mL	

Bio. Ref. Interval. :

Deficiency : <=20 ng/ml || Insufficiency : 21-29 ng/ml Sufficiency : >=30 ng/ml || Toxicity : >100 ng/ml

Clinical Significance:

Vitamin D is a fat soluble vitamin that has been known to help the body absorb and retain calcium and phosphorous;

both are critical for building bone health.

Decrease in vitamin D total levels indicate inadequate exposure of sunlight, dietary deficiency, nephrotic syndrome.

Increase in vitamin D total levels indicate Vitamin D intoxication.

Specifications: Precision: Intra assay (%CV):9.20%, Inter assay (%CV):8.50%

Kit Validation Reference: Holick M. Vtamin D the underappreciated D-Lightful hormone that is important for Skeletal

and cellular health Curr Opin Endocrinol Diabetes 2002:9(1)87-98.

Method: Fully Automated Electrochemiluminescence Compititive Immunoassay

VITAMIN B-12 E.C.L.I.A 456 pg/mL

Bio. Ref. Interval. :

Normal: 197-771 pg/ml

Clinical significance:

Vitamin B12 or cyanocobalamin, is a complex corrinoid compound found exclusively from animal dietary sources, such as meat, eggs and milk. It is critical in normal DNA synthesis, which in turn affects erythrocyte maturation and in the formation of myelin sheath. Vitamin-B12 is used to find out neurological abnormalities and impaired DNA synthesis associated with macrocytic anemias. For diagnostic purpose, results should always be assessed in conjunction with the patients medical history, clinical examination and other findings.

Specifications: Intra assay (%CV):2.6%, Inter assay (%CV):2.3 %

Kit Validation Reference : Thomas L.Clinical laborator Diagnostics : Use and Assessment of Clinical laboratory Results 1st

Edition, TH Books-Verl-Ges, 1998: 424-431

Method: Fully Automated Electrochemiluminescence Compititive Immunoassay

Please correlate with clinical conditions.

Sample Collected on (SCT) : 27 Jul 2024 08:03
Sample Received on (SRT) : 27 Jul 2024 12:25
Report Released on (RRT) : 27 Jul 2024 18:48

Sample Type : SERUM

Labcode : 2707040992/PE003 Dr Saakshi Mittal MD(Path)

Barcode : CJ809182

Note:- Underlined values are Critical Values, Clinician's attention required.

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)



Lab Address: Plot No.428, 2nd flr, Phase-IV, Udyog| Vihar, Gurgaon, Haryana - 122015

Saakshi

7022 000 900

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REF. BY

**TEST ASKED** : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL NANGAL RAYA DELHI

TEST NAME	TECHNOLOGY	VALUE	UNITS	
APOLIPOPROTEIN - A1 (APO-A1)	IMMUNOTURBIDIMETRY	122	mg/dL	
Bio. Ref. Interval. :				
Male : 86 - 152 Female : 94 - 162				
Method: FULLY AUTOMATED RATE IMMUNOTURBIDI	METRY - BECKMAN COULTER			
APOLIPOPROTEIN - B (APO-B)	IMMUNOTURBIDIMETRY	62	mg/dL	
Bio. Ref. Interval. :				
Male : 56 - 145				
Female : 53 - 138				
Method: FULLY AUTOMATED RATE IMMUNOTURBIDI	METRY - BECKMAN COULTER			
APO B / APO A1 RATIO (APO B/A1)	CALCULATED	0.5	Ratio	
Bio. Ref. Interval. :				
Male : 0.40 - 1.26				
Female : 0.38 - 1.14				
Method: Derived from serum Apo A1 and Apo B val	lues			

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**Sample Type** : SERUM

Please correlate with clinical conditions.

Labcode : 2707040992/PE003

: CJ809182 **Barcode** 

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Dr Saakshi Mittal MD(Path)

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)



7022 000 900

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Saakshir



REF. BY : SELF

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA

HOSPITAL NANGAL RAYA DELHI

TEST NAMETECHNOLOGYVALUEUNITSHIGH SENSITIVITY C-REACTIVE PROTEIN (HS-CRP)IMMUNOTURBIDIMETRY0.54mg/L

Bio. Ref. Interval. :-

< 1.00 - Low Risk 1.00 - 3.00 - Average Risk >3.00 - 10.00 - High Risk

> 10.00 - Possibly due to Non-Cardiac Inflammation

Disclaimer: Persistent unexplained elevation of HSCRP >10 should be evaluated for non-cardiovascular etiologies such as infection , active arthritis or concurrent illness.

#### Clinical significance:

High sensitivity C- reactive Protein ( HSCRP) can be used as an independent risk marker for the identification of Individuals at risk for future cardiovascular Disease. A coronary artery disease risk assessment should be based on the average of two hs-CRP tests, ideally taken two weeks apart.

#### Kit Validation Reference:

- 1. Clinical management of laboratory date in medical practice 2003-3004, 207(2003).
- 2.Tietz: Textbook of Clinical Chemistry and Molecular diagnostics: Second edition: Chapter 47:Page no.1507-1508.

#### Please correlate with clinical conditions.

Method:- FULLY AUTOMATED LATEX AGGLUTINATION - BECKMAN COULTER

Sample Collected on (SCT): 27 Jul 2024 08:03Sample Received on (SRT): 27 Jul 2024 12:25Report Released on (RRT): 27 Jul 2024 18:48

Sample Type : SERUM

**Labcode** : 2707040992/PE003

Barcode : CJ809182

Saakshir

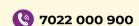
Dr Saakshi Mittal MD(Path)

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)

Note:- Underlined values are Critical Values, Clinician's attention required.

Registered Address: DOCON TECHNOLOGIES PR
LIMITED, Office No 208, 209 & 210 Second floor, A v

**Lab Address:** Plot No.428, 2nd flr, Phase-IV, Udyog| Vihar, Gurgaon, Haryana - 122015



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REF. BY : SELF

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA

HOSPITAL NANGAL RAYA DELHI

TEST NAMETECHNOLOGYVALUEUNITSLipoprotein (a) [Lp(a)]IMMUNOTURBIDIMETRY15mg/dL

Bio. Ref. Interval. :-

Adults: < 30.0 mg/dl

#### Clinical Significance:

Determination of LPA may be useful to guide management of individuals with a family history of CHD or with existing disease. The levels of LPA in the blood depends on genetic factors; The range of variation in a population is relatively large and hence for diagnostic purpose, results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

Specifications:

Precision %CV :- Intra assay %CV- 4.55% , Inter assay %CV-0.86 %

Kit Validation Reference:

Tietz NW, Clinical Guide to Laboratory Tests Philadelphia WB. Saunders 1995: 442-444

Please correlate with clinical conditions.

Method:- LATEX ENHANCED IMMUNOTURBIDIMETRY

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Sample Type

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Barcode : CJ809182

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**Lab Address:** Plot No.428, 2nd flr, Phase-IV, Udyog| Vihar, Gurgaon, Haryana - 122015 7022 000 900

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: SERUM



REF. BY : SELF

TEST ASKED : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION NANGAL RAYA DELHI

#### **HOME COLLECTION:**

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALKALINE PHOSPHATASE	PHOTOMETRY	60.6	U/L	45-129
BILIRUBIN - TOTAL	PHOTOMETRY	<u>1.22</u>	mg/dL	0.3-1.2
BILIRUBIN -DIRECT	PHOTOMETRY	0.29	mg/dL	< 0.3
BILIRUBIN (INDIRECT)	CALCULATED	<u>0.93</u>	mg/dL	0-0.9
GAMMA GLUTAMYL TRANSFERASE (GGT)	PHOTOMETRY	10.3	U/L	< 55
ASPARTATE AMINOTRANSFERASE (SGOT )	PHOTOMETRY	20	U/L	< 35
ALANINE TRANSAMINASE (SGPT)	PHOTOMETRY	21.1	U/L	< 45
SGOT / SGPT RATIO	CALCULATED	0.95	Ratio	< 2
PROTEIN - TOTAL	PHOTOMETRY	7.63	gm/dL	5.7-8.2
ALBUMIN - SERUM	PHOTOMETRY	4.69	gm/dL	3.2-4.8
SERUM GLOBULIN	CALCULATED	2.94	gm/dL	2.5-3.4
SERUM ALB/GLOBULIN RATIO	CALCULATED	1.6	Ratio	0.9 - 2

### Please correlate with clinical conditions.

#### Method:

ALKP - Modified IFCC method

BILT - Vanadate Oxidation

BILD - Vanadate Oxidation

BILI - Derived from serum Total and Direct Bilirubin values

GGT - Modified IFCC method

SGOT - IFCC\* Without Pyridoxal Phosphate Activation

SGPT - IFCC\* Without Pyridoxal Phosphate Activation

OT/PT - Derived from SGOT and SGPT values.

PROT - Biuret Method

SALB - Albumin Bcg¹method (Colorimetric Assay Endpoint)

SEGB - DERIVED FROM SERUM ALBUMIN AND PROTEIN VALUES

A/GR - Derived from serum Albumin and Protein values

Sample Collected on (SCT): 27 Jul 2024 08:03Sample Received on (SRT): 27 Jul 2024 12:25Report Released on (RRT): 27 Jul 2024 18:48

Sample Type : SERUM

**Labcode** : 2707040992/PE003

Barcode : CJ809182

Note:- Underlined values are Critical Values, Clinician's attention required.

Dr Saakshi Mittal MD(Path)

Saakshir

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)



Lab Address: Plot No.428, 2nd flr, Phase-IV, Udyog|
Vihar, Gurgaon, Haryana - 122015

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Page: 8 of 12



REF. BY : SELF

**TEST ASKED** : CARDIAC RISK MARKERS, ESR, FREE

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION NANGAL RAYA DELHI

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
BLOOD UREA NITROGEN (BUN)	PHOTOMETRY	17.3	mg/dL	7.94 - 20.07
CREATININE - SERUM	PHOTOMETRY	0.77	mg/dL	0.72-1.18
BUN / SR.CREATININE RATIO	CALCULATED	22.47	Ratio	9:1-23:1
UREA (CALCULATED)	CALCULATED	37.02	mg/dL	Adult: 17-43
UREA / SR.CREATININE RATIO	CALCULATED	48.08	Ratio	< 52
CALCIUM	PHOTOMETRY	9.87	mg/dL	8.8-10.6
URIC ACID	PHOTOMETRY	5.6	mg/dL	4.2 - 7.3

#### Please correlate with clinical conditions.

#### Method:

BUN - Kinetic UV Assay.

SCRE - Creatinine Enzymatic Method

B/CR - Derived from serum Bun and Creatinine values

UREAC - Derived from BUN Value.

UR/CR - Derived from UREA and Sr. Creatinine values.

CALC - Arsenazo III Method, End Point.

URIC - Uricase / Peroxidase Method

: 27 Jul 2024 08:03 Sample Collected on (SCT) Sample Received on (SRT) : 27 Jul 2024 12:25 : 27 Jul 2024 18:48 Report Released on (RRT)

**Sample Type** 

: 2707040992/PE003 Labcode

**Barcode** : CJ809182

Note:- Underlined values are Critical Values, Clinician's attention required.

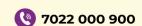
Saakshir

Dr Saakshi Mittal MD(Path)

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)



Lab Address: Plot No.428, 2nd fir, Phase-IV, Udyog| Vihar, Gurgaon, Haryana - 122015



Page: 9 of 12

: SERUM



**REF. BY** : SFLF

: CARDIAC RISK MARKERS, ESR, FREE **TEST ASKED** 

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION NANGAL RAYA DELHI

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA HOSPITAL

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TOTAL TRIIODOTHYRONINE (T3)	E.C.L.I.A	<u>69</u>	ng/dL	80-200
TOTAL THYROXINE (T4)	E.C.L.I.A	5.57	μg/dL	4.8-12.7
TSH - ULTRASENSITIVE	E.C.L.I.A	4.92	μIU/mL	0.54-5.30

#### The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

#### Method:

T3 - Fully Automated Electrochemiluminescence Compititive Immunoassay

T4 - Fully Automated Electrochemiluminescence Compititive Immunoassay

USTSH - Fully Automated Electrochemiluminescence Sandwich Immunoassay

#### Disclaimer:

Results should always be interpreted using the reference range provided by the laboratory that performed the test. Different laboratories do tests using different technologies, methods and using different reagents which may cause difference In reference ranges and hence it is recommended to interpret result with assay specific reference ranges provided in the reports. To diagnose and monitor therapy doses, it is recommended to get tested every time at the same Laboratory.

Sample Collected on (SCT) : 27 Jul 2024 08:03 Sample Received on (SRT) : 27 Jul 2024 12:25 Report Released on (RRT) : 27 Jul 2024 18:48

Sample Type

: SERUM

**Barcode** : CJ809182

Note:- Underlined values are Critical Values, Clinician's attention required.

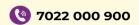
Saakshi

Dr Saakshi Mittal MD(Path)

Clinically Tested by :Thyrocare Technologies Ltd



Labcode



Page: 10 of 12

: 2707040992/PE003



: SELF REF. BY

**TEST ASKED** : CARDIAC RISK MARKERS, ESR, FREE

TESTOSTERONE, HEMOGRAM, KIDPRO, LIVER FUNCTION

TESTS,T3-T4-USTSH,VITAMIN D AND B12 COMBO

**HOME COLLECTION:** 

2ND FLOOR RZ-26 GALI NO 21 VASHISTH PARK NEW DELHI NEAR DESU COLONY BUS STAND NEAR DESU COLONY BUS STAND AND SHAKUNTALA

HOSPITAL NANGAL RAYA DELHI

**TEST NAME TECHNOLOGY VALUE** UNITS

EST. GLOMERULAR FILTRATION RATE (eGFR) mL/min/1.73 m2 128 **CALCULATED** 

Bio. Ref. Interval. :-

> = 90: Normal 60 - 89 : Mild Decrease

45 - 59 : Mild to Moderate Decrease 30 - 44 : Moderate to Severe Decrease

15 - 29 : Severe Decrease

#### Clinical Significance

The normal serum creatinine reference interval does not necessarily reflect a normal GFR for a patient. Because mild and moderate kidney injury is poorly inferred from serum creatinine alone. Thus, it is recommended for clinical laboratories to routinely estimate glomerular filtration rate (eGFR), a "gold standard" measurement for assessment of renal function, and report the value when serum creatinine is measured for patients 18 and older, when appropriate and feasible. It cannot be measured easily in clinical practice, instead, GFR is estimated from equations using serum creatinine, age, race and sex. This provides easy to interpret information for the doctor and patient on the degree of renal impairment since it approximately equates to the percentage of kidney function remaining. Application of CKD-EPI equation together with the other diagnostic tools in renal medicine will further improve the detection and management of patients with CKD.

#### Reference

Levey AS, Stevens LA, Schmid CH, Zhang YL, Castro AF, 3rd, Feldman HI, et al. A new equation to estimate glomerular filtration rate. Ann Intern Med. 2009;150(9):604-12.

Please correlate with clinical conditions.

Method:-**CKD-EPI Creatinine Equation** 

~~ End of report ~~

Sample Collected on (SCT)

: 27 Jul 2024 08:03 : 27 Jul 2024 12:25

Sample Received on (SRT) Report Released on (RRT)

: 27 Jul 2024 18:48

Sample Type

Labcode **Barcode** 

Note:- Underlined values are Critical Values, Clinician's attention required.

: SFRUM

: 2707040992/PE003

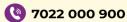
: CJ809182

Dr Saakshi Mittal MD(Path)

Saakshir

Clinically Tested by :Thyrocare Technologies Ltd - (NABL accredited)





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#### CONDITIONS OF REPORTING

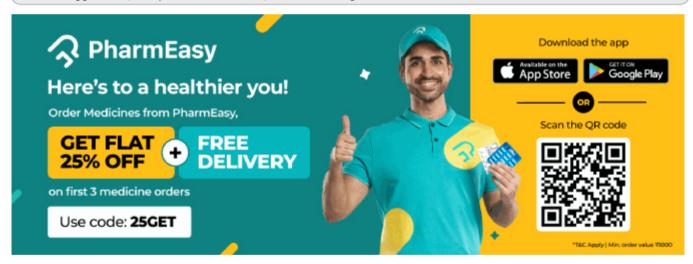
- v The reported results are for information and interpretation of the referring doctor only.
- v It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- v Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- v Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- v Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- v This report is not valid for medico-legal purpose.
- v Docon Technologies Private Limited, Thyrocare Technologies Limited and its employees/representatives do not assume any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report.

#### **EXPLANATIONS**

- v Name The name is as declared by the client and recorded by the personnel who collected the specimen.
- v Ref.By The name of the doctor who has recommended testing as declared by the client.
- v Labcode This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- v **Barcode** This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- v SCT Specimen Collection Time The time when specimen was collected as declared by the client.
- v SRT Specimen Receiving Time This time when the specimen reached our laboratory.
- v RRT Report Releasing Time The time when our pathologist has released the values for Reporting.
- v Reference Range Means the range of values in which 95% of the normal population would fall.

#### **SUGGESTIONS**

- v Values out of reference range requires reconfirmation before starting any medical treatment.
- v Retesting is needed if you suspect any quality shortcomings.
- v For suggestions, complaints or feedback, write to us at grievance-office@docon.co.in or call us on 7022000900.



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