



Patient Name : Mrs.RITA DEVI Age/Gender : 55 Y 0 M 0 D /F

UHID/MR No : DADA.0000070275 Visit ID : DADAOPV143412

Ref Doctor : Dr.SELF

IP/OP NO

Collected : 08/Jan/2020 12:16PM Received : 08/Jan/2020 12:54PM Reported : 08/Jan/2020 01:48PM

Status : Final Report

Client Name : RLM ADARSH LABORATORY BETTIAH

Patient location : Hospital Road Bettiah, Bettiah

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DEPARTMENT OF BIOCHEMISTRY						
Test Name	Result	Unit	Bio. Ref. Range	Method		
GLUCOSE, FASTING , NAF PLASMA	158	mg/dL	70 - 100	GOD - POD		
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	254	mg/dL	70 - 140	GOD - POD		









Patient Name : Mrs.RITA DEVI Age/Gender : 55 Y 0 M 0 D /F UHID/MR No : DADA.0000070275

Visit ID : DADAOPV143412 Ref Doctor : Dr.SELF

IP/OP NO :

Collected : 08/Jan/2020 08:54AM Received : 08/Jan/2020 10:15AM Reported : 08/Jan/2020 11:31AM

Status : Final Report

Client Name : RLM ADARSH LABORATORY BETTIAH
Patient location : Hospital Road Bettiah, Bettiah

DEPARTMENT OF IMMUNOLOGY						
Test Name	Result	Unit	Bio. Ref. Range	Method		
THYROID STIMULATING HORMONE (TSH) , SERUM	6.34	μIU/mL	0.34-5.60	CLIA		

Comment:

TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH is a labile hormone & is secreted in a pulsatile manner throughout the day and is subject to several non-thyroidal pituitary influences. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, caloric intake, medication & circulating antibodies.

It is important to confirm any TSH abnormality in a fresh specimen drawn after ~ 3 weeks before assigning a diagnosis, as the cause of an isolated TSH abnormality.

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)		
First trimester	0.1 - 2.5		
Second trimester	0.2 - 3.0		
Third trimester	0.3 – 3.0		

*** End Of Report ***

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