| Charak dhar<br>IAGNOSTICS Pvt. Ltd.                              |                             | 292/05, Tulsidas Marg, Basement Chowk, Lucknow-2:<br>Phone: 0522-4062223, 9305548277, 8400888844<br>9415577933, 9336154100, Tollfree No.: 868836036<br>E-mail: charak1984@gmail.com<br>CMO Reg. No. RMEE 2445133<br>NABL Reg. No. MC-2491<br>Certificate No. MIS-2023-0218 |                            |                       |  |
|--|-----------------------------|--|----------------------------|-----------------------|--|
| Patient Name : Mr.KIRAMUDDIN                                     |                             |  |                            | : CHA250036968        |  |
| Age/Gender : 48 Y/M  |                             |  | 0                          | : 01/Mar/2025 12:23PM |  |
| Lab No : 10134264  |                             |  | 1                          | : 01/Mar/2025 12:25PM |  |
| Referred By : Dr.RAJIV RASTOGI                                   |                             |  | I                          | : 01/Mar/2025 12:43PM |  |
| Refer Lab/Hosp : CHARAK NA Doctor Advice : T3T4TSH,LIPID-PROFILE |                             |  | Report Generated ON        | : 01/Mar/2025 02:13PM |  |
|  |                             |  |                            |                       |  |
| Test Name  | Result                      | Unit   | Bio. Ref. Ran              | ge Method             |  |
| LIPID-PROFILE  |                             |  |                            |                       |  |
| Cholesterol/HDL Ratio  | 3.92                        | Ratio  |                            | Calculated            |  |
| LDL / HDL RATIO  | 2.16 Ratio                  |  |                            | Calculated            |  |
|  |                             | Desirable / low risk - 0.5   |                            |                       |  |
|  |                             | -3.0<br>Low/ Moderate risk - 3.0-  |                            |                       |  |
|  | 6.0                         |  |                            |                       |  |
|  | Elevated / High risk - >6.0 |  |                            |                       |  |
|  |                             |  | Desirable / low risk - 0.5 |                       |  |
|  | -3.0                        |  |                            |                       |  |
|  | Low/ Moderate risk - 3.0-   |  | sk - 3.0-                  |                       |  |
|  | 6.0                         |  |                            |                       |  |
|  |                             |  | Elevated / High ris        | k - > 6.0             |  |
|  |                             |  |                            |                       |  |
|  |                             |  |                            |                       |  |
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|  | CH/                         |  |                            |                       |  |
|  | UU/                         | AK   | AN                         |                       |  |



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DR. SHADAB Dr. SYED SAIF AHMAD PATHOLOGIST MD (MICROBIOLOGY) Page 1 of 3

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|---|---|-------------|---|
| Patient Name: Mr.KIRAMUDDINAge/Gender: 48 Y/MLab No: 10134264Referred By: Dr.RAJIV RASTOGIRefer Lab/Hosp: CHARAK NADoctor Advice: "3T4TSH,LIPID-PROFILE |   | F<br>S<br>S | Visit No: CHA250036968Registration ON: 01/Mar/2025 12:23PMSample Collected ON: 01/Mar/2025 12:25PMSample Received ON: 01/Mar/2025 12:43PMReport Generated ON: 01/Mar/2025 02:13PM |
|   |   |             |   |
| Test Name   | Result  | Unit        | Bio. Ref. Range Method  |
| TOTAL CHOLESTEROL   | 180.00  | mg/dL       | Desirable: <200 mg/dl CHOD-PAP<br>Borderline-high: 200-239<br>mg/dl<br>High:>/=240 mg/dl  |
| TRIGLYCERIDES   | 175.00  | mg/dL       | Normal: <150 mg/dl Serum, Enzymatic,<br>Borderline-high:150 - 199 endpoint<br>mg/dl<br>High: 200 - 499 mg/dl<br>Very high:>/=500 mg/dl  |
| H D L CHOLESTEROL   | 45.90   | mg/dL       | 30-70 mg/dl CHER-CHOD-PAP   |
| L D L CHOLESTEROL   | 99.10   | mg/dL       | Optimal:<100 mg/dl CO-PAP<br>Near Optimal:100 - 129<br>mg/dl<br>Borderline High: 130 - 159<br>mg/dl<br>High: 160 - 189 mg/dl<br>Very High:>/= 190 mg/dl                           |
| VLDL  | 35.00   | mg/dL       | 10 - 40 Calculated  |

**CHARAK** 



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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

|                |                         | Certificate No. I   | Certificate No. MIS-2023-0210 |  |  |
|----------------|-------------------------|---------------------|-------------------------------|--|--|
| Patient Name   | : Mr.KIRAMUDDIN         | Visit No            | : CHA250036968                |  |  |
| Age/Gender     | : 48 Y/M                | Registration ON     | : 01/Mar/2025 12:23PM         |  |  |
| Lab No         | : 10134264              | Sample Collected ON | : 01/Mar/2025 12:25PM         |  |  |
| Referred By    | : Dr.RAJIV RASTOGI      | Sample Received ON  | : 01/Mar/2025 12:43PM         |  |  |
| Refer Lab/Hosp | : CHARAK NA             | Report Generated ON | : 01/Mar/2025 02:13PM         |  |  |
| Doctor Advice  | . T3T4TSH,LIPID-PROFILE |                     |                               |  |  |
|                |                         |                     |                               |  |  |

Test Name Bio. Ref. Range Method Unit Result T3T4TSH T3 1.91 nmol/L 1.49-2.96 **ECLIA** Τ4 160.75 n mol/l 63 - 177 **ECLIA** TSH 0.88 ulU/ml 0.47 - 4.52 **ECLIA** 

Note

(1) Patients having low T3 & T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile mysedema or autoimmune disorders.

(2) Patients having low T3 & T4 levels but high TSH levels suffer from grave-s disease, toxic adenoma or sub-acute thyroiditis.

(3) Patients having either low or normal T3 & T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

(4) Patients having high T3 & T4 levels but normal TSH levels may suffer from toxic multinodular goitre. This condition is mostly asymptomatic and may cause transient hyperthyroidism but no persistent symptoms.

(5) Patient with high or normal T3 & T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 Toxicosis respectively.

(6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the cacabolic state and may revert tonormal when the patient recovers.

(7) There are many drugs for eg.Glucocorticoids ,dopamine,Lithium,iodides ,oral radiographic dyes,ets.Which may affect the thyroid function tests.

(8) Generally when total T3& T4 results are indecisive then Free T3 & Free T4 test are recommended for further confirmation along with

(1 Beckman DxI-600 2. ELECTRO-CHEMILUMINISCENCE TECHINIQUE BY ELECSYSYS -E411)









DR. NISHANT SHARMA DR. SHADAB PATHOLOGIST PATHOLOGIST

Dr. SYED SAIF AHMAD MD (MICROBIOLOGY) Page 3 of 3

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