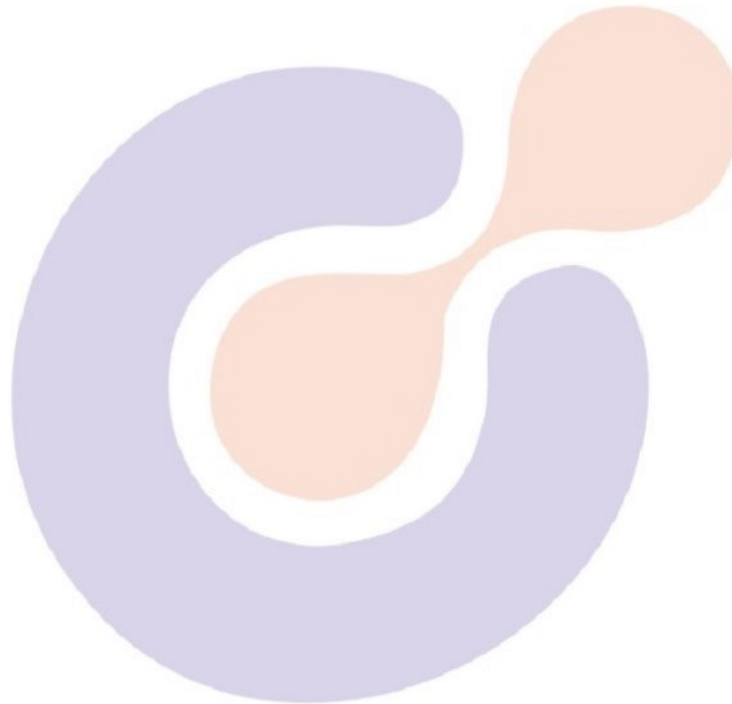


Patient Name	: Ms. ANJU DEVI	Visit No	: CHA250037465
Age/Gender	: 45 Y/F	Registration ON	: 02/Mar/2025 09:02AM
Lab No	: 10134760	Sample Collected ON	: 02/Mar/2025 09:04AM
Referred By	: Dr. NIRUPAM PRAKASH	Sample Received ON	: 02/Mar/2025 09:22AM
Refer Lab/Hosp	: CGHS (DEBIT)	Report Generated ON	: 02/Mar/2025 10:18AM
Doctor Advice	: CBC+ESR,HBA1C (EDTA),PP,FASTING,T3T4TSH		



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC+ESR (COMPLETE BLOOD COUNT)</b>				
Erythrocyte Sedimentation Rate ESR	20.00		0 - 15	Westergreen



CHARAK

[Checked By]

Print.Date/Time: 02-03-2025 12:55:09

\*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD  
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

Patient Name : Ms. ANJU DEVI	Visit No : CHA250037465
Age/Gender : 45 Y/F	Registration ON : 02/Mar/2025 09:02AM
<b>Lab No : 10134760</b>	Sample Collected ON : 02/Mar/2025 09:04AM
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Refer Lab/Hosp : CGHS (DEBIT)	Report Generated ON : 02/Mar/2025 11:22AM
Doctor Advice : CBC+ESR,HBA1C (EDTA),PP,FASTING,T3T4TSH	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C</b>				
Glycosylated Hemoglobin (HbA1c)	<b>7.3</b>	%	4 - 5.7	HPLC (EDTA)

**NOTE:-**

Glycosylated Hemoglobin Test (HbA1c) is performed in this laboratory by the Gold Standard Reference method, ie: HPLC Technology (High performance Liquid Chromatography D10) from Bio-Rad Laboratories. USA.

**EXPECTED ( RESULT ) RANGE :**

Bio system	Degree of normal
4.0 - 5.7 %	Normal Value (OR) Non Diabetic
5.8 - 6.4 %	Pre Diabetic Stage
> 6.5 %	Diabetic (or) Diabetic stage
6.5 - 7.0 %	Well Controlled Diabet
7.1 - 8.0 %	Unsatisfactory Control
> 8.0 %	Poor Control and needs treatment

**CHARAK**

[Checked By]

Print.Date/Time: 02-03-2025 12:55:11

\*Patient Identity Has Not Been Verified. Not For Medicolegal



*Sharma*

DR. NISHANT SHARMA PATHOLOGIST  
DR. SHADAB PATHOLOGIST  
Dr. SYED SAIF AHMAD MD (MICROBIOLOGY)

Patient Name : Ms. ANJU DEVI	Visit No : CHA250037465
Age/Gender : 45 Y/F	Registration ON : 02/Mar/2025 09:02AM
<b>Lab No : 10134760</b>	Sample Collected ON : 02/Mar/2025 09:04AM
Referred By : Dr. NIRUPAM PRAKASH	Sample Received ON : 02/Mar/2025 09:22AM
Refer Lab/Hosp : CGHS (DEBIT)	Report Generated ON : 02/Mar/2025 10:18AM
Doctor Advice : CBC+ESR,HBA1C (EDTA),PP,FASTING,T3T4TSH	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC+ESR (COMPLETE BLOOD COUNT)</b>				
Hb	12.9	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	<b>5.00</b>	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	41.9	%	36 - 45	Pulse hieght detection
MCV	83.8	fL	80 - 96	calculated
MCH	<b>25.8</b>	pg	27 - 33	Calculated
MCHC	30.8	g/dL	30 - 36	Calculated
RDW	<b>15.1</b>	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	9740	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	70	%	40 - 75	Flowcytometry
LYMPHOCYTE	26	%	20-40	Flowcytometry
EOSINOPHIL	1	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	<b>0</b>	%	00 - 01	Flowcytometry
PLATELET COUNT	196,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	196000	/cmm	150000 - 450000	Microscopy .
Mentzer Index	17			
Peripheral Blood Picture	:			

.Red blood cells are normocytic normochromic, anisocytosis +. Platelets are adequate. No immature cells or parasite seen.



[Checked By]



*Sham*

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PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

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Age/Gender : 45 Y/F	Registration ON : 02/Mar/2025 09:02AM
<b>Lab No : 10134760</b>	Sample Collected ON : 02/Mar/2025 09:04AM
Referred By : Dr. NIRUPAM PRAKASH	Sample Received ON : 02/Mar/2025 11:25AM
Refer Lab/Hosp : CGHS (DEBIT)	Report Generated ON : 02/Mar/2025 12:19PM
Doctor Advice : CBC+ESR,HBA1C (EDTA),PP,FASTING,T3T4TSH	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>FASTING</b>				
Blood Sugar Fasting	<b>148.6</b>	mg/dl	70 - 110	Hexokinase
<b>PP</b>				
Blood Sugar PP	<b>189.1</b>	mg/dl	up to - 170	Hexokinase



[Checked By]



DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADAB  
PATHOLOGIST

*Dr. Aditi D Agarwal*  
DR. ADITI D AGARWAL  
PATHOLOGIST



Patient Name : Ms. ANJU DEVI	Visit No : CHA250037465
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>T3T4TSH</b>				
T3	1.60	nmol/L	1.49-2.96	ECLIA
T4	167.00	n mol/l	63 - 177	ECLIA
TSH	<b>0.22</b>	uIU/ml	0.47 - 4.52	ECLIA

**Note**

- (1) Patients having low T3 & T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema 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 catabolic state and may revert to normal when the patient recovers.
- (7) There are many drugs for eg. Glucocorticoids, dopamine, Lithium, iodides, oral radiographic dyes, etc. 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-CHEMILUMINESCENCE TECHNIQUE BY ELECSYS -E411 )

\*\*\* End Of Report \*\*\*

CHARAK



[Checked By]



*Sham*

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PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)