

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

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

Patient Name : Ms.NEELAM YADAV

Age/Gender : 27 Y/F

Lab No : 10138212 Referred By : Dr.CHANDRAWATI **

Refer Lab/Hosp · CHARAK NA . BETA hCG Doctor Advice

P.R.

Visit No : CHA250040917

Registration ON : 07/Mar/2025 08:22AM

Sample Collected ON : 07/Mar/2025 08:24AM Sample Received ON : 07/Mar/2025 08:53AM

Report Generated ON : 07/Mar/2025 10:43AM

Te	est Name	Result	Unit	Bio. Ref. Range	Method
BETA HCG					
Beta HCG		2116	mIU/mL	0.10 - 2.90	CLIA

Weeks of Pregnancy	Ranges HCG mIU/ml	
Ç •	(5-95th percentile)	
3	5.8 -71.2	
4	9.50 -750	
5	217 - 7138	
6	158 - 31795	
7	3697- 163563	
8	32065 - 149571	
9	63803 - 151410	
10	46509 - 1869 <mark>77</mark>	
12	27832 - 210 <mark>612</mark>	
14	13950 - 625 <mark>30</mark>	
15	12039 - 709 <mark>71</mark>	
16	9040 - 56451	
17	8175 - 55868	
18	8099 - 58176	

COMMENTS:

This assay is capable of detecting whole molecule (intact) HCG as well as free \(\beta\)-HCG subunits. For diagnostic purposes, HCG results should always be used in conjunction with clinical findings and other tests. If the HCG levels are inconsistent with clinical impressions, results should be confirmed by an alternate HCG method. Low levels of HCG can occur in apparently healthy, non pregnant subjects. B-HCG values double approximately every 48 hrs in a normal pregnancy; patients with very low levels should be resampled and retested after 48 hrs. Specimens tested as positive during initial days after conception may later be negative due to natural termination of pregnancy. Natural termination occurs in 31% of overall pregnancies. Falsely depressed or falsely elevated results may occur due to presence of interfering substances (such as heterophilic antibodies, non-specific proteins, or HCG like substances).

In men, Increased levels of b-HCG are associated with testicular cancer and should be correlated with other findings.

*** End Of Report ***



DR. NISHANT SHARMA DR. SHADAB **PATHOLOGIST PATHOLOGIST**