

Patient Name : Ms.PRAMILA DEVI	Visit No : CHA250041292
Age/Gender : 62 Y/F	Registration ON : 07/Mar/2025 02:13PM
<b>Lab No : 10138587</b>	Sample Collected ON : 07/Mar/2025 02:17PM
Referred By : Dr.AJAY KUMAR VERMA	Sample Received ON : 07/Mar/2025 02:31PM
Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 07/Mar/2025 05:29PM
Doctor Advice : TSH,HBA1C (EDTA),CREATININE,SGPT,SGOT,PLAT COUNT,DLC,TLC,HB,ESR	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>ESR</b>				
Erythrocyte Sedimentation Rate ESR	<b>42.00</b>		0 - 20	Westergreen

**Note:**

1. Test conducted on EDTA whole blood at 37°C.
2. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.
3. It indicates presence and intensity of an inflammatory process. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, acute rheumatic fever. It is also increased in multiple myeloma, hypothyroidism.

**HBA1C**

Glycosylated Hemoglobin (HbA1c)	5.2	%	4 - 5.7	HPLC (EDTA)
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**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

[Checked By]

Print.Date/Time: 07-03-2025 18:06:41

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



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Refer Lab/Hosp : CGHS (BILLING) Report Generated ON : 07/Mar/2025 03:25PM  
Doctor Advice : TSH,HBA1C (EDTA),CREATININE,SGPT,SGOT,PLAT COUNT,DLC,TLC,HB,ESR



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HAEMOGLOBIN</b>				
Hb	9.6	g/dl	12 - 15	Non Cyanide
<b>Comment:</b> Hemoglobin screening helps to diagnose conditions that affect RBCs such as anemia or polycythemia.				
<b>TLC</b>				
TOTAL LEUCOCYTES COUNT	3880	/cmm	4000 - 10000	Flocytometry
<b>DLC</b>				
NEUTROPHIL	71	%	40 - 75	Flowcytometry
LYMPHOCYTE	23	%	20-40	Flowcytometry
EOSINOPHIL	2	%	1 - 6	Flowcytometry
MONOCYTE	4	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
<b>PLATELET COUNT</b>				
PLATELET COUNT	211,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	211000	/cmm	150000 - 450000	Microscopy .
<b>SERUM CREATININE</b>				
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
<b>SGPT</b>				
SGPT	27.0	U/L	5 - 40	UV without P5P
<b>SGOT</b>				
SGOT	43.0	U/L	5 - 40	UV without P5P



[Checked By]



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*Dr. Aditi D Agarwal*  
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Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 07/Mar/2025 03: 25PM
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Test Name	Result	Unit	Bio. Ref. Range	Method
TSH				
TSH	2.03	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 \*\*\*

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