

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

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

: Ms.KAVITA SONKAR Patient Name

Age/Gender : 43 Y/F

Lab No : 10138871 Referred By : Dr.MV HOSPITAL Refer Lab/Hosp · CHARAK NA Doctor Advice : TSH,LH,FSH,USG TVS Visit No : CHA250041576

Registration ON : 08/Mar/2025 09:04AM : 08/Mar/2025 09:06AM

Sample Collected ON Sample Received ON : 08/Mar/2025 09:22AM

Report Generated ON : 08/Mar/2025 11:37AM

Test Name	Result	Unit	Bio. Ref. Range	Method
TSH				
TSH	4.68	uIU/ml	0.47 - 4.52	ECLIA

Note

P.R.

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

1.20

LH

LUTEINIZING HORMONE

mIU/mI

20-70 years: 1.5-9.3 ~> 70

years: 3.1-34.6 ~Children:<

0.1 - 6.0





18:37:01



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Test Name	Result	Unit	Bio. Ref. Range	Method
FOLLICLE STIMULATING HORMONE FSH				

FOLLICLE STIMULATING HORMONE FSH serum

mIU/ml

1.60

Women (mIU/mI)~1) CLIA Follicular phase: 2.5-10.2

~2) Midcycle peak : 3.4-33.4 ~3) Luteal phase : 1.5-9.1 ~4) Pregnant : < 0.3~5) Postmenopausal:23.0-

116.3

INTERPRETATION:

Normally Menstruating Females	£.	Biological Reference Range
Follicular	AC .	2.5-10.2
Mid - Cycle	W	3.4-33 <mark>.4</mark>
Luteal		1.5-9.1
Post-menopausal Females		23-1 <mark>16.3</mark>
Male		1.4-1 <mark>8.1 (13-70 years)</mark>

-Circulating levels of follicle stimulating hormone vary throughout the menstrual cycle in response to estradiol and progesterone. A small but significant increase in FSH accompanies the mid-cycle LH surge, while FSH declines in the luteal phase in response to estradiol and progesterone production by the developing corpus luteum.

-At menopause FSH and LH increase sufficiently in response to diminished feedback inhibition of gonadotropin release

-In males, FSH, LH and testosterone regulate spermatogenesis by sertoli cells in seminiferous tubules of the testis. FSH may also be elevated in Klinefelter's syndrome or as a consequence of sertoli cell failure.

ophorectomy, in polycystic ovarian syndrome the LH/FSH ratio may be increased. Abnormal FSH concentrations may indicate dysfunction of the hypothalamic-pituitary axis. In sexually mature adults, FSH deficiency together with low concentrations of LH and sex steroids may indicate panhypopituitarism.

LIMITATIONS:

-Specimens from patients who have received preparations of mouse monoclonal antibodies for diagnosis or therapy may show either false positive or depressed values.

*** End Of Report ***



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TRANSVAGINAL ULTRASOUND

- <u>Uterus</u> is normal in size, measures 75 x 35 mm and **shows a small well defined rounded hypoechoic lesion of size 6 x 6 mm in anterior wall.** Endometrial thickness measures 7.5 mm. **Mild heamorrhagic fluid is noted in endometrium**.
- **Cervix** is normal in size measures 28 x 27mm & echotexture.
- **Both ovaries** are normal in size & echotexture. Right ovary measures 24 x 11 x 20 mm vol. 2.8 cc. Left ovary measures 18 x 17 x 27 mm vol. 4.5 cc.
- No adnexal mass lesion is seen.
- No free fluid is seen in Cul-de-Sac.

OPINION:

- SMALL INTRAMURAL UTERINE FIBROID.
- MILD HEAMORRHAGIC FLUID IN ENDOMETRIUM.

Clinical correlation is necessary.

DR. NISMA WAHEED MD, RADIODIAGNOSIS

(Transcribed by Rachna)

*** End Of Report ***

