

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

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

Patient Name : Ms.TAUFEEQ RIZVI

Age/Gender : 60 Y/F

P.R.

Lab No: 10139232Referred By: Dr.AHMAD AYAZ**Refer Lab/Hosp: CHARAK NADoctor Advice: T3T4TSH,RF FACTOR

Visit No : CHA250041937

Registration ON : 08/Mar/2025 02:14PM Sample Collected ON : 08/Mar/2025 02:16PM

Sample Received ON : 08/Mar/2025 02:25PM

Report Generated ON : 08/Mar/2025 03:18PM

Test Name	Result	Unit	Bio. Ref. Range	Method	
RF FACTOR					
RHFUMATOID FACTOR	6.00	IU/ml	0 - 14		

SUMMARY: Rheumatoid factors (RF) group of autoantibodies belonging to all immunoglobulin classes directed against the FC fragment of altered or complexed Igg. Diagnostic test for RF determination identify mainly RF of the IgM class which are detectable in several rheumatic diseases, mainly of inflammatory origin.

RF occur in approx 70 -80 % of patients with rheumatoid arthritis (RA), but they are not specific for RA as elevated concentrations are also observed in various non rheumatic disease & in approx 10 % of the elederly population without clinical symptoms of RA. High RF concentrations in RA are often associated with a more progressive clinical course of the disease . However, a positive RF value has to be confirmed by clinical & other laboratory findings.





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Test Name	Result	Unit	Bio. Ref. Range	Method
T3T4TSH				
T3	1.99	nmol/L	1.49-2.96	ECLIA
T4	91.80	n mol/l	63 - 177	ECLIA
TSH	1.60	ulU/ml	0.47 - 4.52	ECLIA

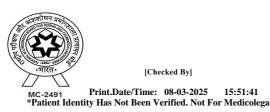
Note

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- (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
- (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)

End Of Report





DR. ADITI D AGARWAL

PATHOLOGIST