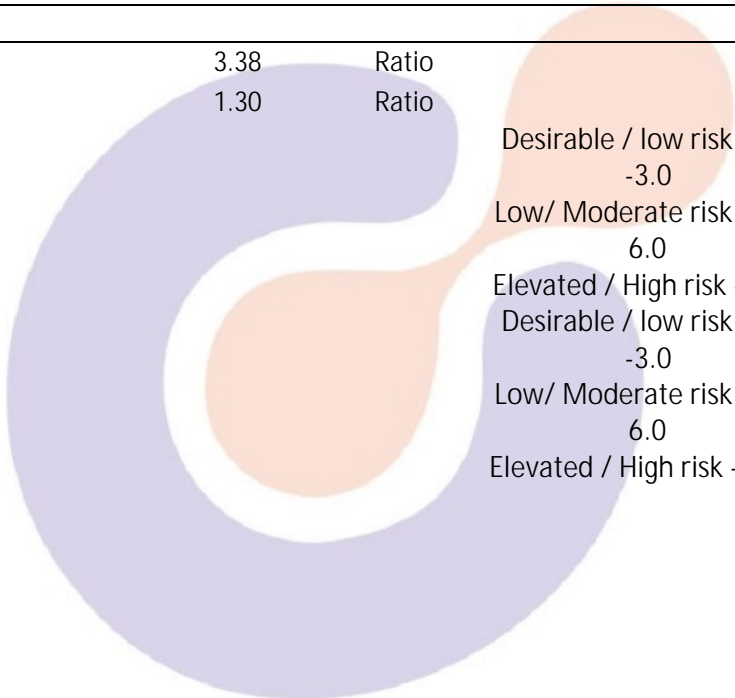


Patient Name : Ms. POONAM SRIVASTAVA	Visit No : CHA250042227
Age/Gender : 61 Y/F	Registration ON : 09/Mar/2025 08:47AM
Lab No : 10139522	Sample Collected ON : 09/Mar/2025 08:48AM
Referred By : Dr. BIMAL CHHAJER	Sample Received ON : 09/Mar/2025 09:19AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 09/Mar/2025 10:56AM
Doctor Advice : LIPID-PROFILE, TSH, CALCIUM, NA+K+, RANDOM	



Test Name	Result	Unit	Bio. Ref. Range	Method
SERUM CALCIUM				
CALCIUM	10.2	mg/dl	8.8 - 10.2	dapta / arsenazo III

LIPID-PROFILE				
Cholesterol/HDL Ratio	3.38	Ratio		Calculated
LDL / HDL RATIO	1.30	Ratio		Calculated
			Desirable / low risk - 0.5 - 3.0	
			Low/ Moderate risk - 3.0 - 6.0	
			Elevated / High risk - >6.0	
			Desirable / low risk - 0.5 - 3.0	
			Low/ Moderate risk - 3.0 - 6.0	
			Elevated / High risk - > 6.0	



CHARAK

[Checked By]

Print.Date/Time: 09-03-2025 11:46:01

*Patient Identity Has Not Been Verified. Not For Medicolegal



Sharma

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

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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD SUGAR RANDOM				
BLOOD SUGAR RANDOM	103.4	mg/dl	70 - 170	Hexokinase
NA+K+				
SODIUM Serum	137.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.6	MEq/L	3.5 - 5.5	ISE Direct
LIPID-PROFILE				
TOTAL CHOLESTEROL	174.60	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-239 mg/dl High: >=240 mg/dl	CHOD-PAP
TRIGLYCERIDES	277.40	mg/dL	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high: >=500 mg/dl	Serum, Enzymatic, endpoint
H D L CHOLESTEROL	51.70	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	67.42	mg/dL	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >= 190 mg/dl	CO-PAP
VLDL	55.48	mg/dL	10 - 40	Calculated



[Checked By]



Sham

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

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Test Name	Result	Unit	Bio. Ref. Range	Method
TSH	6.05	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 Dxl-600 2. ELECTRO-CHEMILUMINESCENCE TECHNIQUE BY ELECSYS -E411)

*** End Of Report ***

CHARAK



Sharma