

Patient Name : Ms.AFREEN	Visit No : CHA250042710
Age/Gender : 25 Y/F	Registration ON : 10/Mar/2025 08: 25AM
Lab No : 10140005	Sample Collected ON : 10/Mar/2025 08: 27AM
Referred By : Dr.GULFISHA MUJTABA	Sample Received ON : 10/Mar/2025 08: 27AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 12: 40PM
Doctor Advice : NA+K+,CREATININE,UREA,LFT,BLOOD GROUP,BTCT,HB,HBsAg	(QUANTITATIVE),HCV,TSH,RANDOM,VDRL,HIV,URINE R/M (DR.RNS)



ANC PROFILE

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

BLOOD GROUP

Blood Group	"B"			
Rh (Anti -D)	POSITIVE			

HBsAg (HEPATITIS B SURFACE ANTIGEN)

HEPATITIS B SURFACE ANTIGEN	NON REACTIVE		< 1.0 : NON REACTIVE~> (Sandwich Assay) 1.0 : REACTIVE	
-----------------------------	--------------	--	--	--

HIV

HIV-SEROLOGY	NON REACTIVE		<1.0 : NON REACTIVE >1.0 : REACTIVE	
--------------	--------------	--	--	--

HCV

Anti-Hepatitis C Virus Antibodies.	NON REACTIVE		< 1.0 : NON REACTIVE > 1.0 : REACTIVE	Sandwich Assay
------------------------------------	--------------	--	--	----------------

VDRL

VDRL	NON REACTIVE			Slide Agglutination
------	--------------	--	--	---------------------



[Checked By]



Sharma

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

Patient Name : Ms.AFREEN	Visit No : CHA250042710
Age/Gender : 25 Y/F	Registration ON : 10/Mar/2025 08: 25AM
Lab No : 10140005	Sample Collected ON : 10/Mar/2025 08: 27AM
Referred By : Dr.GULFISHA MUJTABA	Sample Received ON : 10/Mar/2025 08: 27AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 12: 40PM
Doctor Advice : NA+K+.CREATININE,UREA,LFT,BLOOD GROUP,BTCT,HB,HBsAg	(QUANTITATIVE),HCV,TSH,RANDOM,VDRL,HIV,URINE R/M (DR.RNS)



ANC PROFILE				
Test Name	Result	Unit	Bio. Ref. Range	Method

URINE R/M (DR.RNS)				
Color	STRAW			
Appearance	CLEAR		Clear	
Specific Gravity	1.005		1.005 - 1.025	
Reaction (pH)	7.0		4.5-8.0	
Urine Protein	Absent		Absent	
Sugar	Absent		Absent	
Ketones	Absent		Absent	
Bilirubin	Absent	mg/dl	ABSENT	
Blood	Absent		Absent	
Urobilinogen	0.20		0.2-1.0 EU/dl	
Leukocytes	Absent		Absent	
Nitrite	Absent		Absent	
MICROSCOPIC EXAMINATION				
Leukocytes (Pus Cells)/hpf	Nil		<5/hpf	by an azo-coupling reaction
Epithelial Cells	1-2	/hpf	0 - 5	
Red Blood Cells / hpf	Nil	/hpf	<3/hpf	

BT/CT				
BLEEDING TIME (BT)	3 mint 15 sec	mins	2 - 8	
CLOTTING TIME (CT)	6 mint 30 sec		3 - 10 MINS.	



[Checked By]

Print.Date/Time: 10-03-2025 13:24:37

*Patient Identity Has Not Been Verified. Not For Medicolegal

Sharma

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

Patient Name : Ms.AFREEN	Visit No : CHA250042710
Age/Gender : 25 Y/F	Registration ON : 10/Mar/2025 08: 25AM
Lab No : 10140005	Sample Collected ON : 10/Mar/2025 08: 27AM
Referred By : Dr.GULFISHA MUJTABA	Sample Received ON : 10/Mar/2025 09: 05AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 10: 41AM
Doctor Advice : NA+K+,CREATININE,UREA,LFT,BLOOD GROUP,BTCT,HB,HBsAg	(QUANTITATIVE),HCV,TSH,RANDOM,VDRL,HIV,URINE R/M (DR.RNS)



ANC PROFILE				
Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN

Hb	12.5	g/dl	12 - 15	Non Cyanide
----	------	------	---------	-------------

Comment:

Hemoglobin screening helps to diagnose conditions that affect RBCs such as anemia or polycythemia.

BLOOD SUGAR RANDOM

BLOOD SUGAR RANDOM	95.3	mg/dl	70 - 170	Hexokinase
--------------------	------	-------	----------	------------

NA+K+

SODIUM Serum	136.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.1	MEq/L	3.5 - 5.5	ISE Direct

BLOOD UREA

BLOOD UREA	18.00	mg/dl	15 - 45	Urease, UV, Serum
------------	-------	-------	---------	-------------------

SERUM CREATININE

CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
------------	------	-------	-------------	--------------------------

LIVER FUNCTION TEST

TOTAL BILIRUBIN	0.76	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.14	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.62	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	80.30	U/L	30 - 120	PNPP, AMP Buffer
SGPT	41.0	U/L	5 - 40	UV without P5P
SGOT	35.0	U/L	5 - 40	UV without P5P



[Checked By]



Sham

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

Patient Name : Ms.AFREEN	Visit No : CHA250042710
Age/Gender : 25 Y/F	Registration ON : 10/Mar/2025 08: 25AM
Lab No : 10140005	Sample Collected ON : 10/Mar/2025 08: 27AM
Referred By : Dr.GULFISHA MUJTABA	Sample Received ON : 10/Mar/2025 09: 05AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 10: 41AM
Doctor Advice : NA+K+,CREATININE,UREA,LFT,BLOOD GROUP,BTCT,HB,HBsAg	(QUANTITATIVE),HCV,TSH,RANDOM,VDRL,HIV,URINE R/M (DR.RNS)



ANC PROFILE				
Test Name	Result	Unit	Bio. Ref. Range	Method

TSH				
-----	--	--	--	--

TSH	2.68	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 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 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 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 TECHNIQUE BY ELECSYSYS -E411)

*** End Of Report ***

CHARAK



[Checked By]



Sham

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