|                       | arak dhar                        | 9415577933, 933<br><b>E-mail</b> : charak19  | ,                     |  |
|-----------------------|----------------------------------|--|-----------------------|--|
| DIAGNOSTICS Pvt. Ltd. |                                  | CMO Reg. No. RMEE 2445133<br>NABLReg. No. MC-2491<br>Certificate No. MIS-2023-0218 |                       |  |
| Patient Name          | : Ms.ALIYA                       | Visit No   | : CHA250046353        |  |
| Age/Gender            | : 70 Y/F                         | <b>Registration ON</b>   | : 16/Mar/2025 12:42PM |  |
| Lab No                | : 10143648                       | Sample Collected ON  | : 16/Mar/2025 12:47PM |  |
| Referred By           | : Dr.RAJIV RASTOGI               | Sample Received ON   | : 16/Mar/2025 01:16PM |  |
| Refer Lab/Hosp        | : CHARAK NA                      | Report Generated ON  | : 16/Mar/2025 02:50PM |  |
| Doctor Advice         | TSH,CREATININE,BILIRUBIN,SGPT,HB |  |                       |  |
|                       |                                  |  |                       |  |

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

PR

| Test Name   | Result | Unit | Bio. Ref. Range | Method      |
|-------------|--------|------|-----------------|-------------|
| HAEMOGLOBIN |        |      |                 |             |
| Hb          | 14.1   | g/dl | 12 - 15         | Non Cyanide |

Comment:

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

| SERUM CREATININE | 100 m |        |             |                              |
|------------------|-------|--------|-------------|------------------------------|
| CREATININE       | 0.60  | mg/dl  | 0.50 - 1.40 | Alkaline picrate-<br>kinetic |
| BILIRUBIN        |       |        |             |                              |
| TOTAL BILIRUBIN  | 0.94  | mg/dl  | 0.4 - 1.1   | Diazonium Ion                |
| SGPT             |       |        |             |                              |
| SGPT             | 32.0  | U/L    | 5 - 40      | UV without P5P               |
| TSH              |       |        |             |                              |
| TSH              | 1.52  | ulU/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 TECHINIQUE BY ELECSYSYS -E411)



\*\*\* End Of Report \*\*\*



DR. NISHANT SHARMA DR. SHADAB PATHOLOGIST PATHOLOGIS

DR. SHADAB Dr. SYED SAIF AHMAD PATHOLOGIST MD (MICROBIOLOGY) Page 1 of 2

MC-2491 Print.Date/Time: 16-03-2025 15:25:18 \*Patient Identity Has Not Been Verified. Not For Medicolegal

[Checked By]

| Charak dhar<br>AGNOSTICS PVI. Ltd.                                     |                                       |         | E-mail : charak19<br>CMO Reg. No.<br>NABL Reg. No.<br>Certificate No. | RMEE 244513<br>MC-2491 | 3            |
|--|---------------------------------------|---------|---|------------------------|--------------|
| atient Name : Ms.ALIYA   |                                       | Visit N |   | : CHA2500              |              |
| ge/Gender : 70 Y/F   |                                       | -       | tration ON  |                        | 2025 12:42PM |
| ab No : 10143648   |                                       | -       | le Collected ON   |                        | 2025 12:47PM |
| eferred By : Dr.RAJIV RASTOGI  |                                       | -       | le Received ON  |                        | 2025 01:16PM |
| efer Lab/Hosp : CHARAK NA<br>octor Advice : TSH,CREATININE,BILIRUBIN,S | СРТИВ                                 | Repor   | rt Generated ON   | : 16/Mar/2             | 2025 02:50PM |
|  | , , , , , , , , , , , , , , , , , , , |         |   |                        |              |
|  |                                       | 11-24   | Bio. Ref. F   | Range                  | Method       |
| Test Name  | Result                                | Unit    |   |                        |              |
| lest Name  | Result                                |         |   |                        |              |





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MC-2491 Print.Date/Time: 16-03-2025 15:25:19 \*Patient Identity Has Not Been Verified. Not For Medicolegal

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Dr. SYED SAIF AHMAD PATHOLOGIST MD (MICROBIOLOGY) Page 2 of 2

