Ir.AMIT KUMAR			CMO Reg. No. F NABL Reg. No. M Certificate No. M Visit No	MC-2491 IIS-2023-0218	8
			Visit No		
37 Y/M				. UNAZOU	0047203
,, ,,,,,,			Registration ON	: 17/Mar/	/2025 02:17PM
0144498			Sample Collected ON	: 17/Mar/	/2025 02:19PM
Dr. AJANTA HOSPITAL			Sample Received ON	: 17/Mar/	/2025 02:43PM
			Report Generated ON	: 17/Mar	/2025 04:28PM
est Name	Result	Unit	Bio. Ref. R	ange	Method
)	or.AJANTA HOSPITAL HARAK NA 3T4TSH,HBA1C (EDTA)	Dr.AJANTA HOSPITAL HARAK NA 3T4TSH,HBA1C (EDTA)	Dr.AJANTA HOSPITAL HARAK NA 3T4TSH,HBA1C (EDTA)	Dr.AJANTA HOSPITAL Sample Received ON HARAK NA Report Generated ON 3T4TSH,HBA1C (EDTA)	Dr.AJANTA HOSPITAL Sample Received ON : 17/Mar, HARAK NA Report Generated ON : 17/Mar, 3T4TSH,HBA1C (EDTA)

Glycosylated Hemoglobin (HbA1c)

PR.

NOTE:-

Glycosylated Hemoglobin Test (HbA1c)is performed in this laboratoryby the Gold Standard Reference method,ie:HPLC Technology(High performance Liquid Chromatography D10) from Bio-Rad Laboratories.USA.

%

4 - 5.7

HPLC (EDTA)

6.3

EXPECTED (RESULT) RANGE:

Bio system	Degree of normal				
4.0 - 5.7 %	Normal Value (OR) Non Diabetic				
5.8 - 6.4 %	Pre Diabetic Stage				
>6.5 %	Diabetic (or) Diabetic stage				
6.5 - 7.0 %	Well Controlled Diabet				
7.1 - 8.0 %	Unsatisfactory Control				
> 80%	Poor Control and needs treatment				

CHARAK



[Checked By]

DR. NISHANT SHARMA DR. SHADAB PATHOLOGIST PATHOLOGIST

DR. ADITI D AGARWAL PATHOLOGIST Page 1 of 2

Charak. IAGNOSTICS Pvt. Ltd.

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003 Phone: 0522-4062223, 9305548277, 84008888844 9415577933, 9336154100, Tollfree No.: 8688360360 E-mail : charak1984@gmail.com

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

		Certificate NO. N	113-2023-0210
Patient Name	: Mr.AMIT KUMAR	Visit No	: CHA250047203
Age/Gender	: 37 Y/M	Registration ON	: 17/Mar/2025 02:17PM
Lab No	: 10144498	Sample Collected ON	: 17/Mar/2025 02:19PM
Referred By	: Dr.AJANTA HOSPITAL	Sample Received ON	: 17/Mar/2025 02:43PM
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 17/Mar/2025 04:51PM
Doctor Advice	: T3T4TSH,HBA1C (EDTA)		

Test Name	Result	Unit	Bio. Ref. Range	Method	
T3T4TSH					
Т3	2.21	nmol/L	1.49-2.96	ECLIA	
Τ4	173.72	n mol/l	<u>63 - 1</u> 77	ECLIA	
TSH	0.10	ulU/ml	0.47 - 4.52	ECLIA	

Note

PR

(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)





[Checked By]

17:27:22



DR. NISHANT SHARMA DR. SHADAB PATHOLOGIST PATHOLOGIST



DR. ADITI D AGARWAL PATHOLOGIST Page 2 of 2