SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST

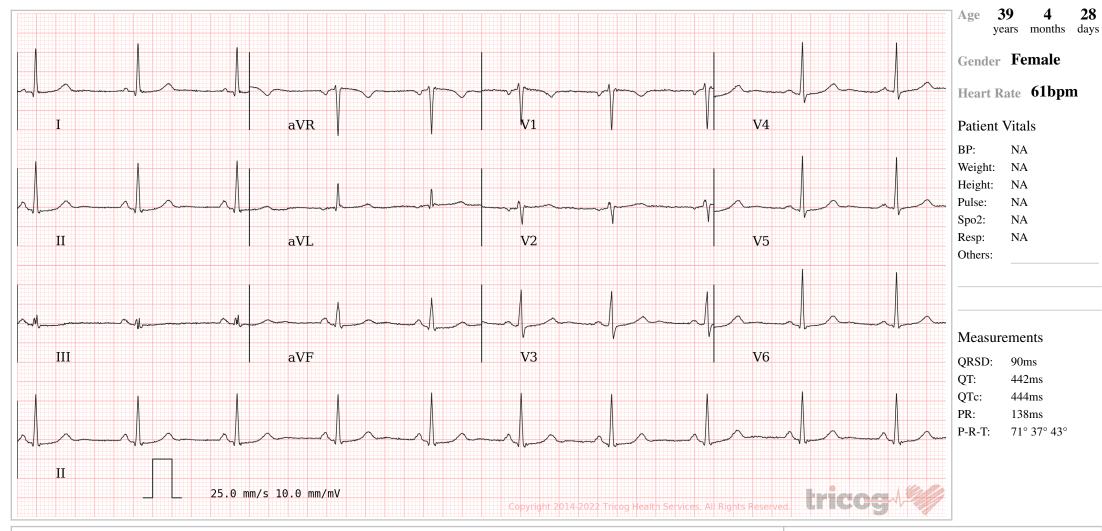


Patient Name: RUPALI M PANDARE

Patient ID:

2228405626

Date and Time: 11th Oct 22 9:36 AM



ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

REPORTED BY



DR SHAILAJA PILLAI MBBS, MD Physican MD Physican 49972

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



Name : Mrs RUPALI M PANDARE

Age / Sex : 39 Years/Female

Ref. Dr : Reg. Date : 11-Oct-2022

Reg. Location: G B Road, Thane West Main Centre **Reported**: 11-Oct-2022/15:17



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USG WHOLE ABDOMEN

LIVER:Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

<u>PANCREAS</u>: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Right kidney measures 9.6 x 3.8 cm. Left kidney measures 11.2 x 4.1 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

<u>UTERUS:</u> Uterus is anteverted and measures 9.8 x 6.9 x 6.4 cm. Bulky in size.

A 4.5 x 4.0 cm sized mural fibroid noted on anterior uterine wall. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 7.7 mm. Cervix appears normal.

OVARIES: Both ovaries are normal. Bilateral adnexa are clear.

No free fluid or significant lymphadenopathy is seen.



Name : Mrs RUPALI M PANDARE

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IMPRESSION:

BULKY UTERUS WITH UTERINE FIBROID.

Note:Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have interobserver variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

-----End of Report-----

This report is prepared and physically checked by DR GAURAV FARTADE before dispatch.

Dr.GAURAV FARTADE

G. R. F---

MBBS, DMRE

Reg No -2014/04/1786 Consultant Radiologist



Name : Mrs RUPALI M PANDARE

Age / Sex : 39 Years/Female

Ref. Dr : Reg. Date : 11-Oct-2022

Reg. Location: G B Road, Thane West Main Centre **Reported**: 11-Oct-2022/15:17



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R



Name : Mrs RUPALI M PANDARE

Age / Sex : 39 Years/Female

Ref. Dr : 11-Oct-2022 Reg. Date

: G B Road, Thane West Main Centre : 11-Oct-2022/14:53 Reg. Location Reported

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X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

End of Report

This report is prepared and physically checked by DR GAURAV FARTADE before dispatch.

G. R. Forte Dr.GAURAV FARTADE

MBBS, DMRE

Reg No -2014/04/1786 Consultant Radiologist



Name : Mrs RUPALI M PANDARE

Age / Sex : 39 Years/Female

Reg. Date Ref. Dr : 11-Oct-2022

Reg. Location Reported : G B Road, Thane West Main Centre : 11-Oct-2022/14:53



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Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : -

Reg. Location: G B Road, Thane West (Main Centre)



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Reported

:11-Oct-2022 / 09:31

:11-Oct-2022 / 12:17

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

CBC (Complete Blood Count), Blood				
<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>	
RBC PARAMETERS				
Haemoglobin	12.0	12.0-15.0 g/dL	Spectrophotometric	
RBC	4.93	3.8-4.8 mil/cmm	Elect. Impedance	
PCV	38.7	36-46 %	Measured	
MCV	78	80-100 fl	Calculated	
MCH	24.4	27-32 pg	Calculated	
MCHC	31.1	31.5-34.5 g/dL	Calculated	
RDW	13.8	11.6-14.0 %	Calculated	
WBC PARAMETERS				
WBC Total Count	5000	4000-10000 /cmm	Elect. Impedance	
WBC DIFFERENTIAL AND ABS	OLUTE COUNTS			
Lymphocytes	27.9	20-40 %		
Absolute Lymphocytes	1395.0	1000-3000 /cmm	Calculated	
Monocytes	4.7	2-10 %		
Absolute Monocytes	235.0	200-1000 /cmm	Calculated	
Neutrophils	63.1	40-80 %		
Absolute Neutrophils	3155.0	2000-7000 /cmm	Calculated	
Eosinophils	4.2	1-6 %		
Absolute Eosinophils	210.0	20-500 /cmm	Calculated	
Basophils	0.1	0.1-2 %		
Absolute Basophils	5.0	20-100 /cmm	Calculated	
Immature Leukocytes	-			

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PΙ	ΔTFI	FT	PΔ	RΔ	ME	TFRS

Platelet Count	292000	150000-400000 /cmm	Elect. Impedance
MPV	7.2	6-11 fl	Calculated
PDW	10.8	11-18 %	Calculated

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ADDRESS: 2" Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053



Name : MRS.RUPALI M PANDARE

: 39 Years / Female Age / Gender

Consulting Dr. Collected Reported

Reg. Location : G B Road, Thane West (Main Centre)



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:11-Oct-2022 / 09:31 :11-Oct-2022 / 11:12

RBC MORPHOLOGY

Hypochromia Mild

Microcytosis Occasional

Macrocytosis

Anisocytosis

Poikilocytosis

Polychromasia

Target Cells

Basophilic Stippling

Normoblasts

Others

WBC MORPHOLOGY PLATELET MORPHOLOGY

COMMENT

Specimen: EDTA Whole Blood

ESR, EDTA WB 23 2-20 mm at 1 hr. Westergren

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West *** End Of Report **









Dr.AMIT TAORI M.D (Path) **Pathologist**

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ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

GLUCOSE (SUGAR) FASTING.

Consulting Dr.

Fluoride Plasma

Reg. Location

: G B Road, Thane West (Main Centre)

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: 11-Oct-2022 / 09:31

Collected :11-Oct-2022 / 14:56 Reported

Hexokinase

Hexokinase

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

BIOLOGICAL REF RANGE PARAMETER RESULTS METHOD

> Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose:

100-125 mg/dl

Diabetic: >/= 126 mg/dl

GLUCOSE (SUGAR) PP, Fluoride 89.8 Non-Diabetic: < 140 mg/dl

Plasma PP/R Impaired Glucose Tolerance:

140-199 mg/dl

Diabetic: >/= 200 mg/dl

Urine Sugar (Fasting) Absent Absent Urine Ketones (Fasting) **Absent Absent**

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West *** End Of Report ***









Dr.AMIT TAORI M.D (Path) **Pathologist**

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HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : -

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:11-Oct-2022 / 09:31

:11-Oct-2022 / 11:18

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO KIDNEY FUNCTION TESTS

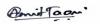
<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
BLOOD UREA, Serum	16.3	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	7.6	6-20 mg/dl	Calculated
CREATININE, Serum	0.82	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	82	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	6.8	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.5	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
URIC ACID, Serum	3.3	2.4-5.7 mg/dl	Uricase
PHOSPHORUS, Serum	3.4	2.7-4.5 mg/dl	Ammonium molybdate
CALCIUM, Serum	9.3	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	137	135-148 mmol/l	ISE
POTASSIUM, Serum	4.0	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	105	98-107 mmol/l	ISE

^{*}Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***









Dr.AMIT TAORI M.D (Path) Pathologist

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HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : - Collected : 11-Oct-2022 / 09:31

Reg. Location : G B Road, Thane West (Main Centre) Reported :11-Oct-2022 / 18:30

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETERRESULTSBIOLOGICAL REF RANGEMETHODGlycosylated Hemoglobin5.0Non-Diabetic Level: < 5.7 %</td>HPLC

(HbA1c), EDTA WB - CC

Prediabetic Level: 5.7-6.4 %
Diabetic Level: >/= 6.5 %

Estimated Average Glucose 96.8 mg/dl Calculated

(eAG), EDTA WB - CC

Intended use:

• In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year

• In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly

For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

• HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.

• The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Dr.ANUPA DIXIT M.D.(PATH) Consultant Pathologist & Lab Director

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Age / Gender : 39 Years / Female

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:11-Oct-2022 / 09:31

:11-Oct-2022 / 14:53

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.010-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	20	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	2-3	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	

Absent

Absent

Less than 20/hpf

Absent

Absent

2-4



Crystals

Amorphous debris

Bacteria / hpf







Dr.AMIT TAORI M.D (Path) Pathologist

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*** End Of Report ***



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : - Collected : 11-Oct-2022 / 12:12

Reg. Location : G B Road, Thane West (Main Centre) Reported :12-Oct-2022 / 17:46

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• 11-Oct-2022 / 12·12

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO PAP SMEAR REPORT

Specimen: - (G/SDC- 8566/22)

Received SurePath vial.

Clinical Notes: LMP: 18/9/22. Adequacy:

Satisfactory for evaluation.

Transformation zone component absent.

Microscopic:

Smear reveals mainly intermediate and fewer superficial squamous cells along with moderate neutrophilic infiltrate.

Interpretation:

1. Negative for intraepithelial lesion or malignancy.

2. Inflammatory smear.

Report as per "THE BETHESDA SYSTEM" for cervicovaginal reporting.

Note: Pap test is a screening test for cervical cancer with inherent false negative results.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Dr.GAUTMI BADKAR M.D. (PATH), DNB (PATH) Pathologist

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HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. Collected : 11-Oct-2022 / 09:31

: G B Road, Thane West (Main Centre) Reported :11-Oct-2022 / 12:49 Reg. Location

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO **BLOOD GROUPING & Rh TYPING**

RESULTS PARAMETER

ABO GROUP AΒ

Rh TYPING **Positive**

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

Refernces:

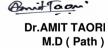
- Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
- AABB technical manual

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Pathologist

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Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : -

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:11-Oct-2022 / 12:17

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO LIPID PROFILE

<u>PARAMETER</u>	RESULTS	BIOLOGICAL REF RANGE	<u>METHOD</u>
CHOLESTEROL, Serum	120.8	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	68.1	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	42.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	78.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	65.0	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	Calculated
VLDL CHOLESTEROL, Serum	13.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	2.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO,	1.5	0-3.5 Ratio	Calculated

^{*}Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West *** End Of Report ***









Dr.AMIT TAORI M.D (Path) Pathologist

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ADDRESS: 2" Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343



Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : -

Reg. Location: G B Road, Thane West (Main Centre)



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:11-Oct-2022 / 09:31

Reported :11-Oct-2022 / 11:15

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
Free T3, Serum	4.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.7	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	2.14	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA

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Name : MRS.RUPALI M PANDARE

Age / Gender : 39 Years / Female

Consulting Dr. : - Collected :11-Oct-2022 / 09:31

Reg. Location : G B Road, Thane West (Main Centre) Reported :11-Oct-2022 / 11:15

Interpretation

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors
- can give falsely high TSH.
- 2)TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low High High Hyperthyroidism, Graves disease, toxic multinodular goiter, pregnancy related (hyperemesis gravidarum, hydatiform mo		High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
		Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

- 1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
- 2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3. Tietz , Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

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*** End Of Report ***









Dr.AMIT TAORI M.D (Path) Pathologist

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Name : MRS.RUPALI M PANDARE

: 39 Years / Female Age / Gender

Consulting Dr. Collected Reported

Reg. Location : G B Road, Thane West (Main Centre)



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:11-Oct-2022 / 09:31

:11-Oct-2022 / 11:18

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO **LIVER FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.47	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.29	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.8	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.5	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	11.7	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	11.3	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	9.6	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	48.8	35-105 U/L	PNPP

^{*}Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West *** End Of Report ***







Dr.AMIT TAORI M.D (Path) **Pathologist**

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