



Corporate Office: HY PATHO LAB 📍 CB-252, GROUND & 1ST FLOOR, RING ROAD, NARAINA NEW DELHI-110028

☎ 011-46577957

☎ 7718962488

✉ info@hypatholab.in

🌐 www.hypatholab.com

REPORT

PT Name : KUNAL GANDHI
Ref By : DR. SHREE RAM HOSPITAL
Reg No : HL5600408427 / BIH002/ABHI
Barcode : Cd008064
INV : THYROID PROFILE -3 (T3 T4 TSH)

Age : 33 Year | Sex : Male
Registered on : 22-03-2024 09:47 PM
Received on : 23-03-2024 01:04 AM
Reported on : 23-03-2024 03:50 AM

SAMPLE COLLECTED AT :
CENTRAL PATHO LAB



SAMPLE : Serum

THYROID PROFILE -3 (T3 T4 TSH)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3) <small>Method: CLIA</small>	1.20	ng/mL	0.80 - 2.00
TOTAL THYROXINE (T4) <small>Method: CLIA</small>	8.61	µg/dl	5.10 - 14.10
THYROID STIMULATING HORMONE (TSH) <small>Method: CLIA</small>	2.75	uIU/ml	0.35 - 5.50

Reference Range

Thyroid hormone status during pregnancy:

Pregnancy	T3	T4	TSH
1st Trimester	0.70-1.80	6-16.5	0.37 - 3.6
2nd & 3rd Trimester	0.80-2.00	6-18.5	0.38 - 4.04

Reference ranges by Age

- 0-5 days: 0.7-15.2
- 6 days-2 months: 0.7-11.0
- 3-11 months: 0.7-8.4
- 1-5 years: 0.7-6.0
- 6-10 years: 0.6-4.8

Interpretation

1. Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
2. Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3. Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
4. Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
5. Patients with high or normal T3 and 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 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Please correlate with clinical conditions

~~End of report~~

Areehana



Reg. No. CE/GAY/2019/PL-209

Mob: 8409394820, 9798642691

CENTRAL JANCH GHAR

Opp. J.P.N. Hospital (Golpathar) G.B. Road, Gaya

Name : Kunal Gandhi

Date 22/03/2024

Age:33 Year/M

Referby Doctor Shree Ram Hospital

Test Name	Value	Unit	Normal Va
COMPLETE BLOOD COUNT(CBC)			
HAEMOGLOBIN(Hb)	12.3gm%=84%	gm/dl	12.0-15.0
TOTAL LEUCOCYTE COUNT	9,700	/cumm	4000-11000
DIFFERENTIAL LEUCOCYTE COU			
NEUTROPHIL	58	%	55-65
LYMPHOCYTE	35	%	30-35
EOSINOPHIL	04	%	01-06
MONOCYTE	03	%	02-04
BASOPHIL	00	%	0-0
R.B.C COUNT	4.2	Millions/cmm	4.5-5.5
P.C.V	36	%	40-54
M C V	81	fi	80-100
M C H	29.6	Picogram	27.0-31.0
M C H C	27.7	gm/dl	33-37
PLATELET COUNT	1.86	Lakh/cmm	1.50-4.50

.....End Of Report.....

DR. R.C. PRASAD
M.B.B.S. MD



Reg. No. CE/GAY/2019/PL-209

Mob: 8409394820, 9798642691

CENTRAL JANCH GHAR

Opp. J.P.N. Hospital (Golpathar) G.B. Road, Gaya

Date: 22/03/2024

Age: 33years/M

S.N.

Pt'S Name: Kunal Gandhi

Referred by. Dr Shree Ram Hospital

TEST	FINDING	REFERENCE
BIOCHEMISTRY		
Blood Sugar R	104	80-170 mg/dl
Blood.Urea	27	10-50 mg/dl
S.Creatinine	0.88	0.8-1.4 mg/dl
Uric.Acid	3.7	0.5-6.0 mg/dl
Calcium	9.0	8.5-10.5 mg/dl
Total Protein	6.9	6-8 mg/dl
Albumin	4.2	3.2-5 mg/dl
Globumin	2.7	1.5-3 mg/dl
Bilirubin(Total)	0.64	0.3-1.0
Direct	0.41	
Indirect	0.23	
S.G.P.T	31	5-45 mg/dl
S.G.O.T	26	8-40 mg/dl
Alk.Phos	105	37-147 mg/dl

DR. R.C. PRASAD
M.B.B.S. MD



CENTRAL JANCH GHAR

Opp. J.P.N. Hospital (Golpathar) G.B. Road, Gaya

Date 22/03/ 2024

Age: 33 year/M

Pt'S Name Kunal Gandhi
Referred by. Dr Shree Ram Hospital

Urine Routine

PHYSICAL

Colour	straw
Appearance	Clear
Sediment	nil
Specific Gravity	1.025

CHEMICAL

Reaction(PH)	acidic
Reducing Sugar	nil
Albumin	nil
Excess Phosphate	nil
Excess Urate	nil
Bile Salt	nil
Bile Pigment	nil
Urobilinogen	nil
Blood Pigment	nil
Acetone Bodies	nil
Nitrite	nil
Leucocytes	nil

MICROSCOPIC

Leucocytes	4-5 /H.P.F.
Erythrocytes	nil /H.P.F.
Epithelial Cells	a few.
Others	nil

Note-Please Co relate the finding clinically. This report is not meant for medico-legal Purpose.

Signature.

DR. R.C. PRASAD
M.B.B.S. MD



Mob: 8409394820, 9798642691

CENTRAL JANCH GHAR

Opp. J.P.N. Hospital (Golpathar) G.B. Road, Gaya

Reg. No. CE/GAY/2019/PL-209

Date 22/03/2024
Name Mr. KUNAL GANDHI
Ref. By SHREE RAM HOSPITAL

Srl No. 32
Age 33 Yrs.
Gender Male

Patient Id 2403220032
Reporting Date 29/03/2024
Printing Date 29/03/2024

LIPID PROFILE

Test Name	Result	Unit	Biological Ref.Range
TRIGLYCERIDES	116.0	mg/dL	40.0 - 165.0
TOTAL CHOLESTEROL	164.0	mg/dL	150.0 - 240.0
H D L CHOLESTEROL DIRECT	41.0	mg/dL	40.0 - 79.4
V L D L	23.2	mg/dL	4.7 - 22.1
L D L CHOLESTEROL DIRECT	99.8	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	4.00		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	2.434		0.00 - 3.55

**** End Of Report ****

DR.

CONSULTED PATHOLOGIST
DR. R.C. PRASAD

M.B.B.S. MD