

2/1, Residency Area, AB Road,
Geeta Bhavan Squire.
Indore (MP) 452001
T: 0731 - 4238111



MRN-240800613

Patient Name : MR. RANVEER SINGH RANA [MRN-240800613]
Age / Gender : 30 Yr / Male
Address : Thanla, Jhabua, MADHYA PRADESH

Request Date : 10-08-2024 09:01 AM
Collection Date : 10-08-2024 09:24 AM
Sample ID : BIO6979
Acceptance Date: 10-08-2024 09:24 AM

Reporting Date : 10-08-2024 07:27 PM
Requesting Doctor : V ONE HOSPITAL
Reporting Status : Finalized

BIOCHEMISTRY

Investigations	Result	Biological Reference Range
GGT(GAMMA GLUTAMYL TRANSFERASE)	40.3 U/L	M 11 - 60 U/L

END OF REPORT.

Prepared and Checked by

DR.QUTBUDDIN CHAHWALA
M.D.PATHOLOGIST

Result relate to the sample as received.

V-ONE HOSPITAL Department of Laboratory Medicine.

The Test results are for diagnostic purpose only,not for medico legal purpose.

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Age / Gender : 30 Yr / Male
Address : Thanla, Jhabua, MADHYA PRADESH

Request Date : 10-08-2024 09:01 AM
Collection Date : 10-08-2024 09:24 AM
Sample ID : PATH5094
Acceptance Date: 10-08-2024 09:24 AM

Reporting Date : 10-08-2024 07:27 PM
Requesting Doctor : V ONE HOSPITAL
Reporting Status : Finalized

IMMUNOLOGY

Investigations	Result	Biological Reference Range
Thyroid Profile		
T3	1.01 ng/dL	0.58 - 1.62 ng/dL (Age 1 - 100)
T4	7.2 ug/dl	5 - 14.5 ug/dl (Age 1 - 100)
TSH	5.09 uIU/ml	0.35 - 5.1 uIU/ml (Age 1 - 100)
<p>Interpretation: Ultra sensitive-thyroid stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, sTSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test). when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.</p> <p>Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.</p> <p>Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy. TSH ref range in Pregnancy Reference range (microIU/ml)</p> <p>First trimester 0.24 - 2.00 Second trimester 0.43-2.2 Third trimester 0.8-2.5</p>		

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