



दिवाकर डायग्नोस्टिक सेंटर

Moresteps Pathlabs Pvt. Ltd.
Bhopal lab, E-5, Arera Colony,
Bhopal, Madhya Pradesh, India

E-7/636, पंजाब नेशनल बैंक फ्रंट, मॉड्युलर, अरेरा कॉलोनी भोपाल (म.प्र.)

फोन: 0755-2465288, 0755-3520545 मो: 9826340190

Organisation Name : Diwakar Diagnostic Centre

Org Address : E-7,636, Near Campion School Bus Stop, Infront of PNB,
Arera Colony, Bhopal



122033173

Patient Name : MRS. ANUJA SAXENA

Patient ID : 74540

Ref Doctor : SELF

Age / Sex : 0 years/Female

Received : Mar 26, 2022, 12:26 p.m.

Reported : Mar 26, 2022, 01:21 p.m.

Status : Final Report

Test Description	Value(s)	Reference Range	Unit(s)
IMMUNOASSAY			
THYROID PROFILE, TOTAL- (T3,T4,TSH)			
T3-Total	98.41	82 - 213	ng/dL
T4-Total	8.32	6.09 - 12.23	ug/dL
TSH-Ultrasensitive	2.50	0.45 - 4.5	uIU/mL
		First Trimester : 0.1-2.5	
		Second Trimester : 0.2-3.0	
		Third trimester : 0.3-3.0	

Interpretation

TSH	T3	T4	Suggested Interpretation for the Thyroid Function Tests Pattern
Raised	Within range	Within range	Raised Within Range Within Range .Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. Subclinical Autoimmune Hypothyroidism. Intermittent 14 therapy for hypothyroidism .Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy, Post radioiodine Hypothyroid phase of transient thyroiditis"
Raised or within range	Raised	Raised or within range	Interfering antibodies to thyroid hormones (anti-TPO antibodies) Intermittent 14 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics.
Decreased	Raised or within range	Raised or within range	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & Range Range associated with Non-Thyroidal illness .Subclinical Hyperthyroidism .Thyroxine ingestion'
Decreased	Decreased	Decreased	Central Hypothyroidism .Non-Thyroidal illness .Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease). Multinodular goitre, Toxic nodule •Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased Within Rang	Raised	Within range	T3 toxicosis •Non-Thyroidal illness
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness In elderly the drop in T3 level can be upto 25%.

Dr. Prince Lokwani

Chief of Lab
MD Pathologist



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E-7/636, पंजाब नेशनल बैंक के पास, मैन रोड, अरेरा कॉलोनी भोपाल (म.प्र.)

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Pt.Name :-	Mrs. Anuja Saxena
Age :-	32y/f
Refd. By :-	BOB
fLab.pNo.:-	111
Date :-	25/03/2022

URINE ANALYSIS

<u>A. PHYSICALEXAMINATION</u>		<u>C. MICROSCOPIEXAMINATION</u>	
1. Colour	Pale Yellow	Pus Cells	3-4/HPF
2. Appearance	Clear	R.B.C.	Nil
3. Specific Gravity	Q.N.S.	Epithelial Cell	1-2/HPF
<u>B. CHEMICAL EXAMINATION</u>		Cast	Nil
1. Reaction	Acidic	Crystals(Cal.Oxa)	Nil
2. Albumin	Nil	Bacteria	Nil
3. Sugar	Nil	Amorphous	Nil
4. Bile Salts	Absent	T. Vaginitis	Nil

URINE COTININE	Negative	By Card method
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Dr. B. M. Agarwal
Pathologist
MBBS, DCP

All test have technical limitation. Collaborative clinic pathological interpretation is mandatory. In case of disparity test may be repeated immediately. Typographic mistakes should be get correct instantly. This report is not valid for medico legal purpos



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EXAMINATION OF BLOOD

TEST	RESULT	NORMAL VALUE
Haemoglobin	11.6mgs%	Female 12-16gms%, Male 14-18gms%
Red Cell count	4.8	4.5-5.6 million /cumm
Platelite Count	2.64	1.5-5.6 Lac/cumm
Leucocytes per.cu.mm	6800/cumm	5000-11000/cumm
Neutrophils	55%	50-70%
Lymphocytes	32%	20-40%
Eosinophils	09%	0-7%
Monocytes	04%	2-8%
PCV	38.2	37-47
MCV	78.5	76-96
MCH	28.5	27-32
MCHC	30.8	31-35
ESR	12	Male 0-9, Female 0-20mm/FHR
Blood Group	"O" Negative	
S.Bilirubin(Total)	0.76	0.2-1.0mg/dl
Direct	0.22	0.0-0.25mg/dl
Indirect	0.54	
SGOT	21.8	5-35U/L
SGPT	26.0	8-40U/L
Alk Phosphatase	9.1	3-13 KA units
S. Protein(Total)	6.7	6.0-8.0mg%
Albumin	3.8	3.7-5.3mg%
Globulin	3.0	1.5 to 3.5 mg%
AG Ratio	1.26	1.-2.0
Blood Urea Nitrogen (BUN)	12.0	7-20 mg/dl
S.Creatine	0.85	0.5-1.4mg/dl
S. Uric Acid	5.0	3.5-7.5mg%
Calcium	8.2	8.5-10.5 gm/dl
GGTP	29.0	5-35 UL/dl
Fasting Blood Sugar	84.9	70 to 110mg/dl
Post Prandial Blood Sugar	128.5	Up to 140mg/dl
Total Serum Cholesterol	161.3	100-250 mg%
Serum Triglyceride	120.0	Up to 160 mg%
Serum Cholesterol HDL	43.0	Up to 65 mg%
Serum CholesterolLDL	94.3	Up to 125 mg%
VLDL	24.0	Up to 30 mg%
TC/HDL Ratio	3.45	
Glycosylated Hemoglobin HBA1c	5.3	Below - 6.0 % -Non Diabetic control 6-7 % -Excellent control Above- 8 % -Poor control



Dr. B. M. Agarwal
Pathologist MBBS, DCP
Consultant Pathologist

आधार - आम आदमी का अधिकार

अनुजा सक्सेना
Anuja Saxena
जन्म वर्ष / Year of Birth: 1989
महिला / Female

7115 9633 2536

आधार - आम आदमी का अधिकार



Dr. B. M. Agarwal
MBBS, DCP
Consultant Pathologist



Diwaka Diagnostic Centre

पेथोलोजी | टी.एँम.ए.सी. | एको कार्डियो ग्राफी | सोनोग्राफी



GPS Map Camera

Bhopal, Madhya Pradesh, India

636, Champion School Rd, E-7, Arera Colony, Bhopal, Madhya Pradesh 462016, India

Lat 23.205888°

Long 77.431748°

26/03/22 10:37 AM