

Patient Name : **MR. JHA AMIT**  
Patient ID : 40494  
Age / Sex : 37 years / Male  
Referred by : MEDIWHEEL  
Bill ID : 67229

Collected : Aug 18, 2022, 10:25 a.m.  
Reported : Aug 18, 2022, 04:16 p.m.  
Sample ID :



188422

Test Description	Results	Units	Biological Reference Range
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**TOTAL TRIIODOTHYRONINE (T3)**

Sample Type : Serum

TotalTriiodothyronine (T3) [ CLIA ]	1.82	ng/dL	0.69 - 2.15
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**\*\*END OF REPORT\*\***

**Dr. Sudhamani S. MD**  
Consultant Pathologist  
Reg. No. : 90461

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**TOTAL THYROXINE ( T4 )**

Sample Type : Serum

Total Thyroxine ( T4 ) [ CLIA ]	72.22	ng/ml	52 - 127
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**\*\*END OF REPORT\*\***

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Test Description	Results	Units	Biological Reference Range
	<b><u>ESR</u></b>		
Sample Type : EDTA / Whole Blood			
ESR	<b>20</b>	Mm/hr	0 - 15
Method	Westergren		

\*\*END OF REPORT\*\*



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### COMPLETE BLOOD COUNT

Sample Type : EDTA / Whole Blood

Hemoglobin	13.1	g/dl	13.0 - 17.0
RBC COUNT	<b>6.27</b>	Millions/c	4.5 - 5.5
PCV(Hematocrit)	41.6	%	40.0 - 50.0
Mean Cell Volume(MCV)	<b>66.35</b>	fl	80.0 - 100.0
Mean Cell Hemoglobin(MCH)	<b>20.89</b>	pg	27.0 - 33.0
Mean Cell Hb Conc(MCHC)	<b>31.49</b>	g/dl	32 - 36
RDW	<b>15.6</b>	%	11.50 - 14.50
Total Leucocytes (WBC) Count	6770	/cumm	4000-11000

### DIFFERENTIAL COUNT

Neutrophils	54	%	40 - 70
Lymphocytes	30	%	20 - 50
Eosionphils	<b>9</b>	%	01 - 06
Monocytes	7	%	00 - 08
Basophils	0	%	00-01

### SMEAR STUDY

RBC Morphology	Normocytic Normocromic.		
WBC Morphology	<b>Eosinophilia.</b>		
Platelets On Smear	Adequate on Smear		
Platelet Count	185000	/cumm	150000 - 450000
MPV	<b>10.2</b>	fL	6.5 - 10.0

### **Comments :-**

#### **Method:-**

HB:-Colorimetric, Total WBC:-Impedance/Flow Cytometry, HCT, MCV, MCH, MCHC, RDW-CV:-Calculate, Diff. Count: Flow Cytometry / Manual Stained Smear Microscopy, RBC: Impedance, Platelets : Impedance Method.

#### **Technique :-**

Fully Automated 5 part Diff. Cell Counter .

All Test Results are subjected to stringent international External and Internal Quality Control Protocols

**\*\*END OF REPORT\*\***



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**BLOOD UREA LEVEL ( BUL )**

Sample Type : Serum

<b>Urea</b>	15.50	mg/dl	10 - 40
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[ Urease - GLDH ]

<b>Bun</b>	7.24	mg/dl	6 - 21
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[ Calculated ]

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

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**CREATININE**

Sample Type : Serum

<b>Creatinine</b>	1.31	mg/dl	0.40 - 1.40
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[ Enzymatic ]

Formula

Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200

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**SR. URIC ACID**

Sample Type : Serum

<b>Uric Acid</b> [ Uricase - POD ]	6.30	mg/dl	3.6 - 7.7
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Technique :- Done On Fully Automated Biochemistry Analyser ERBA EM-200.

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**LIVER FUNCTION TEST**

Sample Type : Serum

TOTAL BILIRUBIN [ DIAZO ]	<b>1.89</b>	mg/dl	0.3-1.3 mg/dl
BILIRUBIN-DIRECT [ DIAZO ]	<b>0.70</b>	mg/dl	0.1-0.4 mg/dl
BILLIRUBIN-INDIRECT [ CALCULATED ]	<b>1.19</b>	mg/dl	0.1-0.9 mg/dl
S.G.O.T. (AST) [ IFCC without Pyridoxal Phosphate ]	22.10	IU/L	5-40 IU/L
S.G.P.T.(ALT) [ IFCC without Pyridoxal Phosphate ]	22.20	IU/L	5-40 IU/L
ALKALINE PHOSPHATASE [ Amino Methyl Propanol (AMP) ]	71.00	IU/L	44-147 IU/L
TOTAL PROTEINS [ BIURET ]	7.22	IU/L	6.0 - 8.5g/dL
ALBUMIN [ BROMO CRESOL GREEN (BCG) ]	4.30	g/dl	3.5-5.0 g/dl
GLOBULIN [ CALCULATED ]	2.92	gm%	2.3-3.5 gm%
ALBUMIN/GLOBULIN RATIO [ CALCULATED ]	1.47		
GAMMA GT	30.10	U/L	0 - 45


Technique : Fully Automated Biochemistry Analyser ERBA EM-200

**\*\*END OF REPORT\*\***

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### URINE ANALYSE REPORT

Sample Type : Urine

#### PHYSICAL EXAMINATION

COLOUR	Pale Yellow		
APPEARANCE	Clear		
REACTION (PH)	6.0		4.8 - 7.6
SPECIFIC GRAVITY	1.010		1.010 - 1.030
ALBUMIN	<b>Present (Trace)</b>		
GLUCOSE	Absent		
BLOOD (U)	Absent		
BILE PIGMENTS	Negative		
BILE SALTS	Absent		
KETONE	Negative		
LEUKOCYTES	Absent		
NITRITE	Absent		
UROBILINOGEN	Negative		

#### MICROSCOPY

PUS CELLS/hpf	1-2
RBCs/hpf	Absent
EPI.CELLS/hpf	1-2
CASTS	Absent
CRYSTALS	Absent
BACTERIA	Absent
Other	Absent

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<b><u>GLYCOCYLATED HAEMOGLOBIN</u></b>			
Sample Type : EDTA / Whole Blood			
Glycocyalted Haemoglobin (HbA1c) [ Tosoh HPLC ]	5.8	%	<5.7%NON DIABETIC 5.7-6.4% PRE-DIABETIC >6.5% DIABETIC <7.0% GOAL FOR DIABETIC ON TREATMENT
MEAN BLOOD GLUCOSE	119.76	mg/dL	116.89 - 154.2

\*\*END OF REPORT\*\*

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**LIPID PROFILE**

Sample Type : Serum

TOTAL CHOLESTEROL [ CHOD-PAP ]	153.90	mg/dL	Desirable : <200 mg/dl Borderline : 200 - 239mg/dl High : >240 mg/dl
TRIGLYCERIDES [ Glycerol Phosphate Oxidase ]	<b>209.20</b>	mg/dL	Desirable : <150 mg/dl Borderline : 150 - 199mg/dl High : >200mg/dl
HDL CHOLESTEROL [ Direct ]	<b>30.70</b>	mg/dL	Desirable : >40 mg/dl Borderline Risk : 35 mg/dl High Risk : <30 mg/dl
LDL CHOLESTEROL [ Calculated ]	81.36	mg/dL	Desirable : <100 mg/dl Borderline : 130 - 160mg/dl High : >160mg/dl
VLDL Cholesterol [ Calculated ]	<b>41.84</b>	mg/dL	Desirable : <26 mg/dl Borderline : >30 mg/dl
Total Chol / HDL Chol Ratio [ Calculated ]	<b>5.01</b>	mg/dL	Desirable : <5 %
LDL / HDL Ratio [ Calculated ]	2.65		1.00 - 3.55
NON-HDL CHOLESTEROL [ Calculated ]	123.20	mg/dL	Desirable : <130 mg/dl Borderline : 160 - 189 mg/dl High : >220 mg/dl

**Technique:** Fully Automated Biochemistry Analyser ERBA EM-200.

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**BLOOD GROUP**

Sample Type : EDTA / Whole Blood

ABO Grouping

"B"

Rh Grouping

POSITIVE

**Note:**

These report is for information purpose only. Blood group needs to be reconfirmed at the time of cross matching for blood transfusion.

**\*\*END OF REPORT\*\***

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**POST PRANDIAL BLOOD SUGAR**

Sample Type : Flouride PP


Post Prandial Blood Sugar [ GOD - POD ]	112.90	mg/dl	110-180
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**ULTRASENSITIVE THYROID STIMULATING HORMONE (TSH)**

Sample Type : Serum

<b>Ultrasensitive Thyroid Stimulative Hormone (TSH)</b> [ CLIA ]	2.12	μIU/mL	0.3 - 4.5 1st trimester - 0.1 - 2.5μIU/mL 2nd trimester - 0.2 - 3μIU/mL 3rd trimester - 0.3 - 3μIU/mL
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**Clinical Significance :-**

1. Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night.
2. Useful for: Screening for thyroid dysfunction and detecting mild (subclinical), as well as overt, primary hypo- or hyperthyroidism in ambulatory patients.
3. Monitoring patients on thyroid replacement therapy.
4. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine suppression therapy.
5. Prediction of thyrotropin-releasing hormone-stimulated TSH response.

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\*\*END OF REPORT\*\*



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