

LAB - Shop No. 7, "Diwan Towers" Mangalwar Peth, Near Mirajkar Tikti, Opp. Nutan Marathi High School, Kolhapur. Mob. 9158529408, 9422047480, 9921285167

DATE - 25/11/2023

PATIENT NAME-PRAMOD PATKAR

AGE - 40Y/MALE

HEIGHT - 164cm

WEIGHT - 72kg

BIOOD PRESSURE - 130/93mmHg

PULES - 96 / Min

FIT TO PERFORM ALL DUTIES

Dr. Vandana G. Powar M.B.B.S., D.C.P. Reg. No. 68137

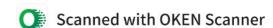
PATHOLOGIST

DR. VANDANA POWAR M.B.B.S., D.C.P.

All Biochemistry Tests Done By Computerised Auto Analyser

• HAEMATOLOGY • CLINICAL PATHOLOGY • BIOCHEMISTRY • SEROLOGY • MICROBIOLOGY • HISTOPATHOLOGY

24 Hours Emergency Service







Dr. Vandana G. Powar MBBS., D.C.P. Reg. No. 68137



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NAME : MR. PRAMOD PATKAR

DATE: 25/11/2023

PT.NO.: 209 25112

REF BY : Dr. MEDIWHEEL LIFE INS

AGE: 40. Yrs. SEX: M

HAEMOGRAM WITH INDICES

| Test | | Result Ur | nits | Normal Range | | Histogra | m |
|----------------|--------|-----------|------------------|----------------|-------|----------|---------|
| Haemoglobin | - | 14.4 | g/dl | 14-18 | | | |
| RBC Count | - | 5.24 | millions / cu-mm | 4.5 - 6.5 | | | RBC |
| PCV | - | 47.2 | % | 40 - 54 | 11 | | |
| MCV | - | 90.1 | fL | 80 - 96 | - 11 | | |
| MCH | - | 27.5 | Pg | 27 - 33 | NO/FL | | |
| MCHC | - | 30.5 | gm/dl | 33 - 36 | | | |
| RDW CV | - | 12.9 | % | 11.0 - 14.5 | : | 100 | 200 |
| WBC Count | aic. | 8400 | /cumm | 4000 - 11000 | :1 | | WBC |
| Neutrophils | 1 | 61 | % | 40 - 75 | : | | |
| Lymphocytes | | 34 | % | 20 - 40 | NO/FL | | |
| Eosinophils | | 03 | % | 1-6 | | | |
| Monocytes | - | 02 | % | 2-10 | : | 100 | |
| Basophils | - | 00 | % | 0 - 1 | | 100 | 200 300 |
| Platelet Count | _ | 279000 | /ul | 150000 -450000 | :1 | | PLT |
| MPV | | 9.6 | fL | 7.4 - 10.4 | NO/FL | | |
| PDW | | 12.3 | % | 8-12 | | | |
| P-LCR | - | 22.6 | % | 15-35 | | | -11 |
| E.S.R. | - (bor | 09 | mm at 1hr | 0-10 | | 10 20 | 30 |

(By Wintrobe Method)

RBC Morphology - Normochromic, Normocytic.

WBC Morphology - Within Normal Limits

Platelets - Adequate

* Blood group - 'AB' Rh Positive



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PT.NAME:

MR. PRAMOD PATKAR

REF. BY:

DR. MEDIWHEEL LIFE INS

DATE: 25/11/2023

AGE : 40 Yrs.

SEX: M

PT.NO.: 209 251123

BIOCHEMISTRY TEST REPORT

| | | | Normal Range |
|--|-----------------------------|-------------------------|---|
| Fasting Plasma Glucose | : 84.2 | mg/dl | 60-110 mg/dl |
| 2 Hrs. Plasma Glucose | : 93.2 | mg/dl | 90-140 mg/dl |
| S. Creatinine | : 1.0 | mg/dl | 0.7 - 1.4 mg/dl |
| Blood Urea | : 22.8 | mg/dl | 12-42 mg/dl |
| Blood Urea Nitrogen S. Uric acid CHOLESTEROL | : 10.65 : 5.2 : 156.7 | mg/dl mg/dl mg/dl | 5 - 21 mg/dl 3.5 -7.2 mg/dl 0-250 mg/dl |
| HDL Cholesterol | : 33.9 | mg/dl | 30 - 70 mg/dl |
| S. Triglycerides | : 84.7 | mg/dl | 0-170 mg/dl |
| LDL Cholesterol | : 105.9 | mg/dl | 60 - 150 mg/dl |
| TC/HDLC Ratio | : 4.6 | | 0 - 5 |
| LDLC/HDLC Ratio | : 3.1 | | 25.25 |

2.5 - 3.5 Dr. Vandana G. Powar

Reg. No. 68137

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Normal Range

BIOCHEMISTRY TEST REPORT

| | | | Normal Kange |
|-------------------------|---------|-------|----------------|
| S. Bilirubin (Total) | : 0.26 | mg/dl | 0 - 1.0 mg/dl |
| S. Bilirubin (Direct) | : 0.13 | mg/dl | 0 - 0.25 mg/dl |
| S. Bilirubin (Indirect) | : 0.13 | mg/dl | 0 - 0.75 mg/dl |
| S.G.O.T | : 26.9 | IU/L | 5-40 IU/L |
| S.G.P.T | : 11.8 | IU/L | 5-40 IU/L |
| S. Alkaline Phosphatase | : 76.0 | IU/L | 37 - 147 IU/L |
| Total Proteins | : 7.9 | g/dl | 6.6 - 8.3 g/dl |
| S. Albumin | : 4.6 | g/dl | 3.5 - 5.0 g/dl |
| S. Globulin | : 3.3 | g/dl | 1.5 - 3 g/dl |
| A/G Ratio | : 1.4:1 | | 0.90 - 2.00 |
| 1 11 0 1 - 1111 | | | |

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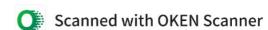
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PT.NAME:

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DATE : 25/11/2023

20/11/2023

: 40 Yrs.

SEX : M

PT.NO.: 209 251123

REPORT ON % GLYCOHAEMOGLOBIN OF BLOOD

% Glycohaemoglobin of blood

4.5

Estimated mean blood glucose

82.3

mg/dl

%

(Reference For Guideline)

< 6.0 - Normal

6.0 - 7.0 % - Good Control

7.0 - 8.0 % - Fair Control

8.0-10.0% - Unsatisfactory control

>10.0% - Poor control

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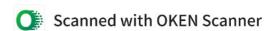
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DATE : 25/11/2023

AGE : 40 Yrs.

SEX: M

PT.NO.: 209 251123

EXAMINATION OF URINE

Normal Range

PHYSICAL EXAMINATION

Quantity

: 05

ml

Colour

: Pale Yellow

Appearance

: Clear

Deposit

: Absent

Reaction (pH) Specific Gravity : Acidic

: 1.024

1.003 - 1.035

CHEMICAL EXAMINATION

Proteins

: Absent

Glucose

: Absent

Ketone Bodies

Bile Salts

: Absent

Absent Absent

Bile Pigments

: Absent

Urobilinogen Occult Blood

: Absent

MICROSCOPIC EXAMINATION

Epithelial Cells

: 1-2

/hpf

Pus Cells

: 2-3

/hpf

Red Blood Cells

: Absent

/hpf

Casts

: Absent

Crystals

: Absent

Amorphous Deposits

: Absent

OTHER FINDINGS

Yeast Cells

: Absent

Trichomonas vaginalis

: Absent

Bacteria

Mucus Threads

: Absent

Spermatozoa

: Absent

: Absent

Dr. Vandana G. Powar M.B.B.S., D.C.P.

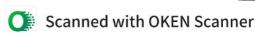
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PATHOLOGIST 11100

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PATIENT NAME: - PRAMOD PATKAR

AGE - 40/SEX-MALE

REFERANCE :- MEDWHEEL LIFE INS.

DATE - 25/11/2023

BIOCHEMISTRY

NORMAL VALUE

SRUM VLDL - 28.6 mmol/L

10-50 mmol / L



Dr. Vandana G. Powar

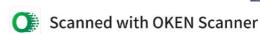
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PATIENT NAME:-PRAMOD PATKAR

AGE - 40SEX-MALE

REFERANCE: - MEDWHEEL LIFE INS.

DATE - 25/11/2023

BIOCHEMISTRY

NORMAL VALUE

SERUM GAMMA, G. T

: 22.9 mmol/L

10-50 mmol / L

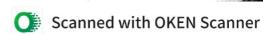
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25/11/2023

THE ECG OF THE CLIENT -PRAMOD PATKAR
IS WITHIN NORMAL LIMIT.

NOABNORMAL FINDINGS ARE DETECTED.

PATHOLOGIST

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MB.B.S., D.C.P

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24 Hours Emergency Service

Home Service Available



Name: PRAMOD K PATKAR

Date: 25-11-2023

Time: 13:02

Age: 40

Gender: M

Height: 164 cms

Weight: 72 Kg

ID: 404

Clinical History: NO MAJOR ILLNESS

Medications:

NOT ON ANY MEDICATION

Test Details:

Protocol: Bruce

Predicted Max HR: 180

Target HR: 153 (85% of Pr. MHR)

Exercise Time:

0:06:10

Achieved Max HR: 163 (91% of Pr. MHR)

Max BP:

130/90

Max BP x HR:

21190

Max Mets: 7

Test Termination Criteria:

Protocol Details:

| Stage Name | Stage Time | METS | Speed kmph | Grade | Heart Rate | BP | RPP | Max ST Level | Max ST Slope |
|-------------------|------------|--------------|---------------|-----------|------------|--------|-------|--------------|--------------|
| Supine | 00:12 | 1 | 0 | 0 | 102 | 120/80 | 12240 | mm | mV/s |
| Standing | 00:12 | 1 | 0 | 0 | 102 | - | | 2.1 V2 | 1.6 V2 |
| HyperVentilation | 00:13 | 1 | 0 | 0 | 104 | 120/80 | 12240 | 2.6 V2 | 1.7 V2 |
| PreTest | 00:27 | 1 | 1.6 | 0 | - | 120/80 | 12480 | 2.1 V2 | 1.5 V2 |
| Stage: 1 | 03:00 | 4.7 | | Mary Mary | 111 | 120/80 | 13320 | 2.2 V2 | 1.3 V2 |
| BRA, MAD HE STATE | | A STATE OF A | 2.7 | 10 | 135 | 120/80 | 16200 | 3.3 V2 | 2.2 V2 |
| Stage: 2 | 03:00 | 7 | 4 | 12 | 158 | 130/80 | 20540 | 3.6 V2 | 2.1 V2 |
| Peak Exercise | 00:10 | 6.9 | 5.5 | 14 | 157 | 130/80 | 20410 | 2.9 V2 | 1.5 11 |
| Recovery 1 | 00:25 | 1 | 0 | 0 | 163 | 130/90 | 21190 | 3 V2 | 1.5 II |
| Recovery2 | 00:21 | 1 | 0 | 0 | 145 | 130/90 | 18850 | 4.2 V2 | 2.2 V2 |
| Recovery3 | 00:13 | 1 | 0 | 0 | 139 | 130/90 | 18070 | 4.6 V2 | 2.6 V2 |
| Recovery4 | 00:09 | 1 | 0 | 0 | 134 | 130/90 | 17420 | 4.3 V2 | 2.6 V2 |

Interpretation

The Patient Exercised according to Bruce Protocol for 0:06:10 achieving a work level of 7 METS. Resting Heart Rate, initially 102 bpm rose to a max. heart rate of 163bpm (91% of Predicted Maximum Heart Rate). Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 130/90 mmHg

GOOD EFFORT TOLERANCE

NORMAL INOTROPIC RESPONSE

NORMAL CHRONOTROPIC RESPONSE

THR ACHEIVED; ADEQUATE METS ACHEIVED

NO SIGNIFICANT ST SEGMENT CHANGES NOTED IN EXERCISE AND RECOVERY

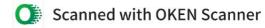
TMT IS NEGATIVE FOR STRESS INDUCIBLE ISCHAEMIA AT GIVEN WORKLOAD

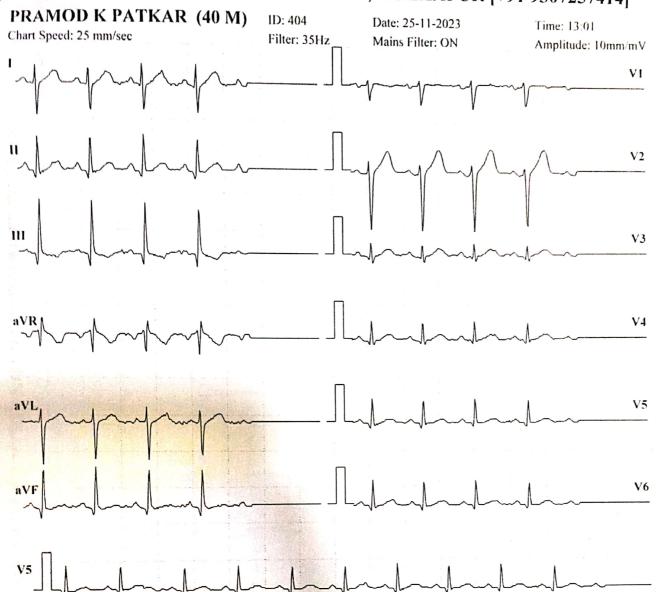
Ref. Doctor: MEDI WHEEL

The Art of Diagnostics

DR. SIDOGOTARISHANTANUTARKAR

(Summary Report edited by User) CLINICAE CONTESTO CONTROL CONT MMC No. 2011040954





| Lead | P(mV) | Q(mV) | R(mV) | S(mV) | T(mV) |
|----------------|-------|-------|-------|-------|-------|
| I ₂ | 0.12 | 0.35 | -0.32 | -0.57 | 0.29 |
| 11 | 0.09 | -0.09 | 0.8 | -0.04 | 0.12 |
| 111 | -0.03 | -0.44 | 1.12 | 0.53 | -0.16 |
| aVR | -0.16 | -0.29 | -0.08 | 0.6 | -0.35 |
| aVL | 0.07 | 0.39 | -0.69 | -0.57 | 0.23 |
| aVF | 0.04 | -0.25 | 0.97 | 0.25 | -0,01 |
| VI | -0.04 | -0.01 | -0.35 | -0.15 | -0.03 |
| V2 | 0.03 | 0.17 | -1.17 | -1.04 | 0.49 |
| V3 | 0.07 | -0.11 | 0.33 | -0.2 | 0.12 |
| V4 | 0.07 | -0.09 | 0.48 | -0.11 | 0.11 |
| V5 | 0.09 | -0.09 | 0.8 | -0.04 | 0.12 |
| V6 | 0.05 | -0.04 | 0.61 | -0.03 | 0.09 |

Schiller Cardiovit CS-16 Version 3.4

Ref.By MEDI WHEEL

Intervals (ms)

| mer rais (ma) | | | | | |
|---------------|-------|-----|------|--|--|
| P-Q | Q-R-S | Q-T | Q-TC | | |
| 137 | 39 | 232 | 308 | | |

Axis (deg)

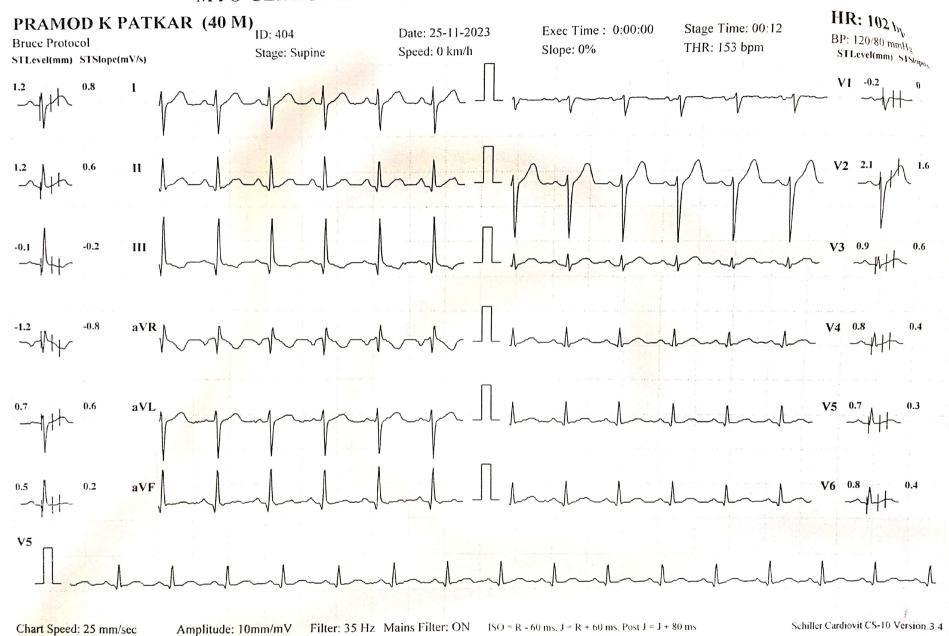
| P | QRS | T |
|----|-----|----|
| 31 | -54 | -3 |

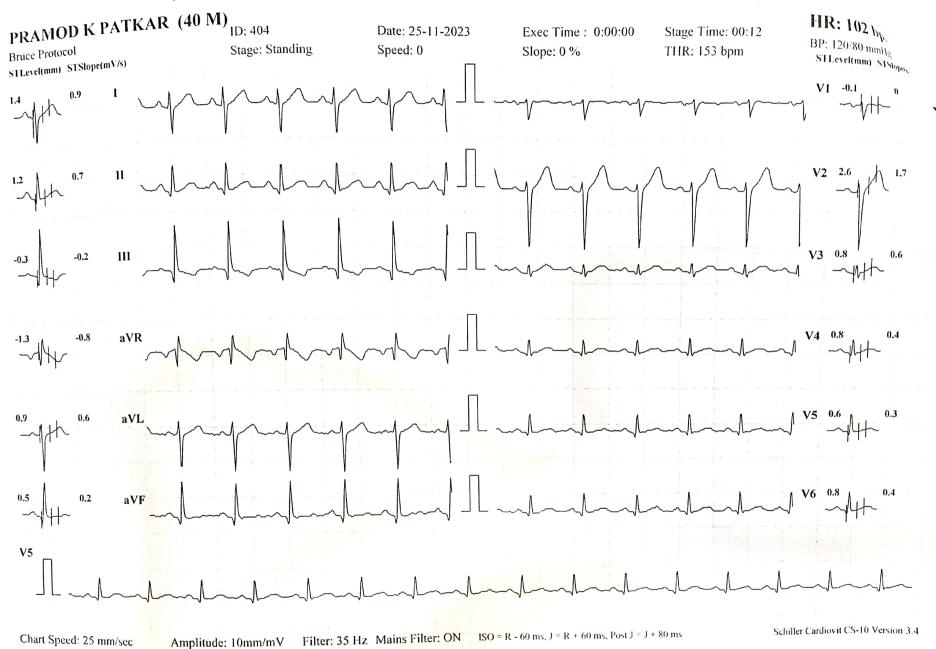
HR: 106 bpm

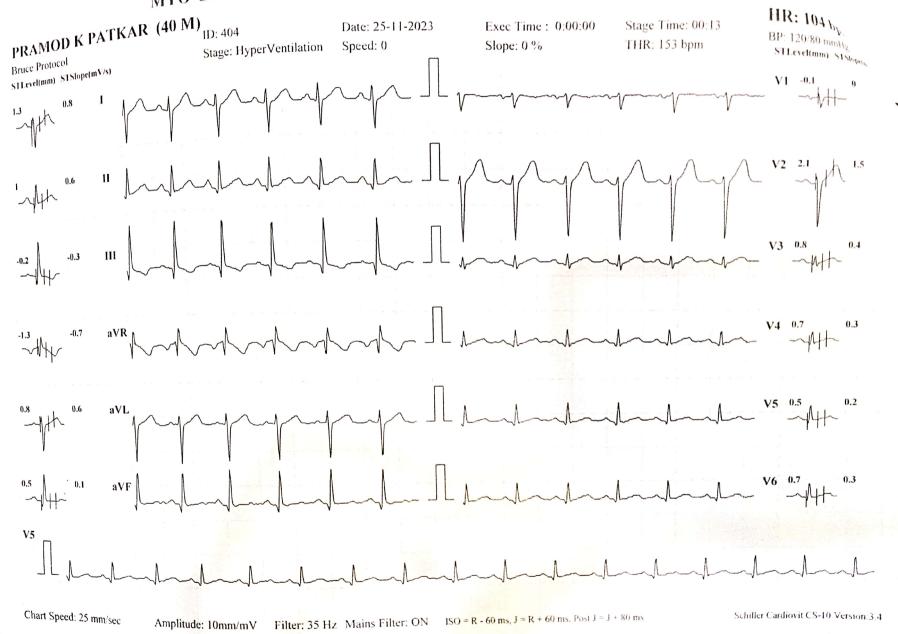
BP: 120/80 mmHg

Interpretation: NORMAL

DR. SHANTANUS. PALKAR CLINICAL CARDIOLOGIST MMC No. 2011040954







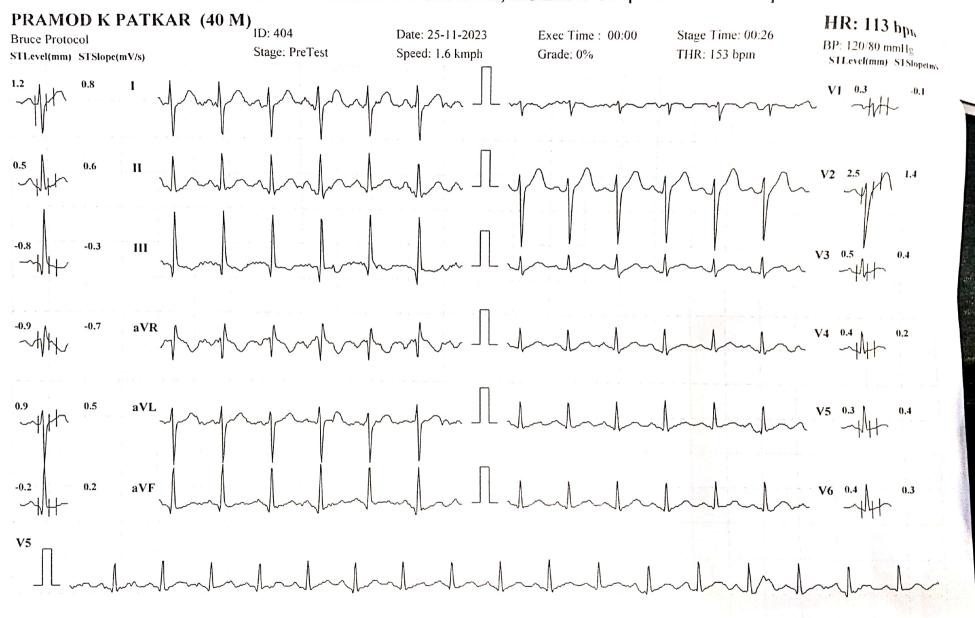
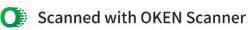


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version: 3.4



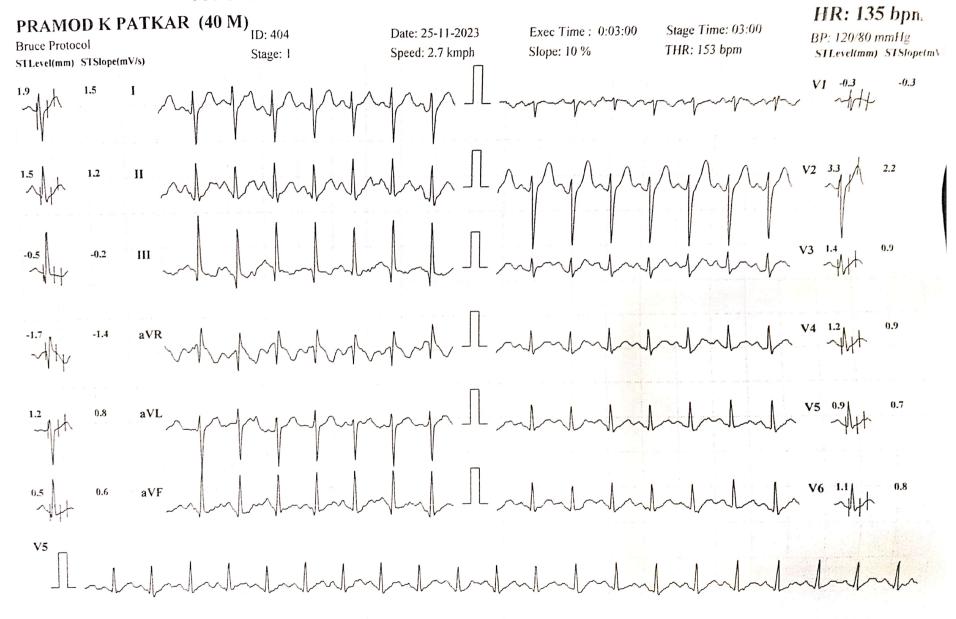


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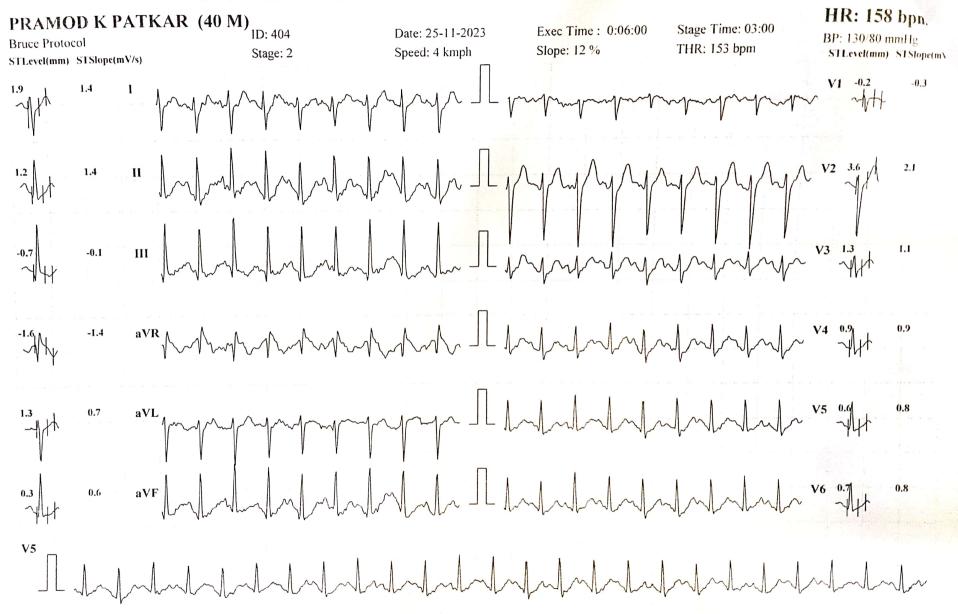


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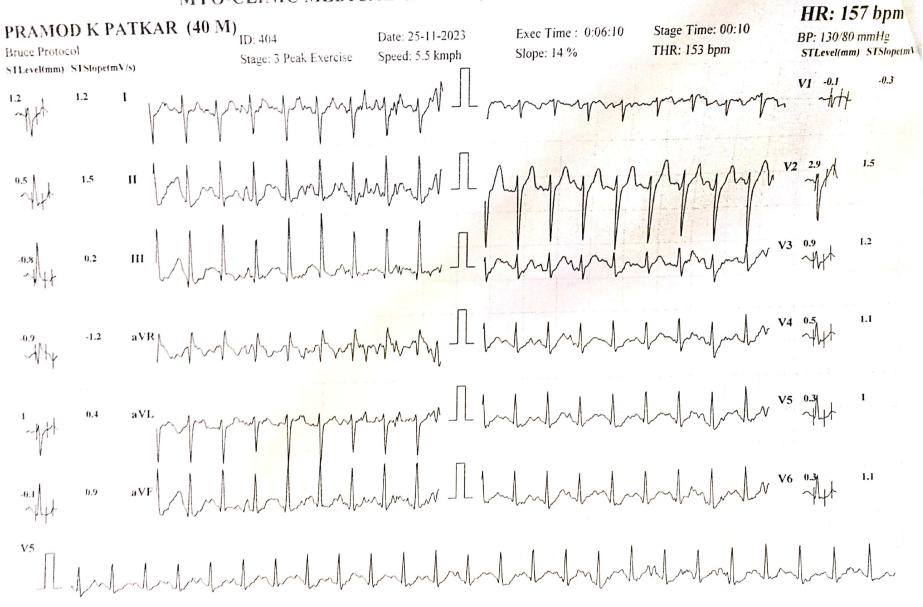


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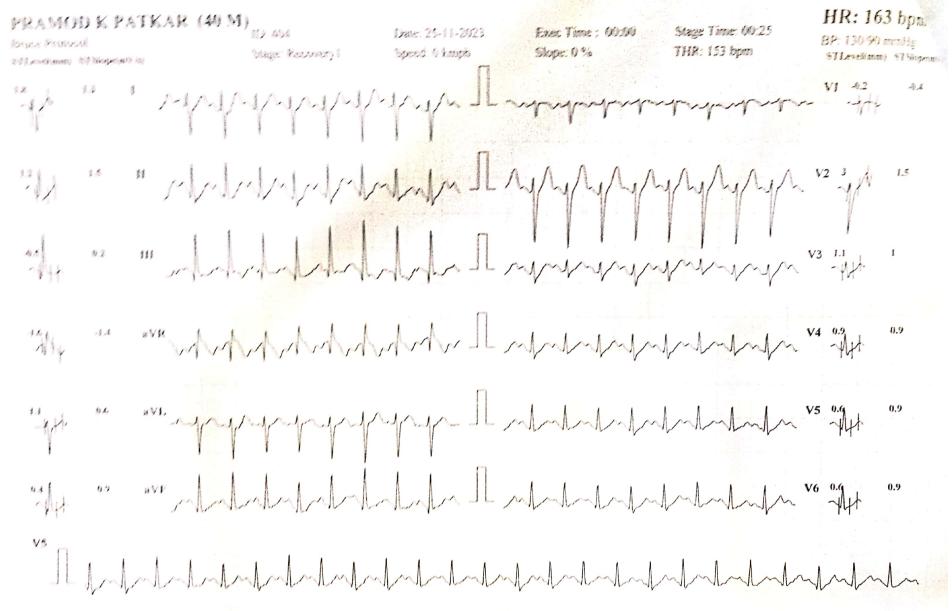


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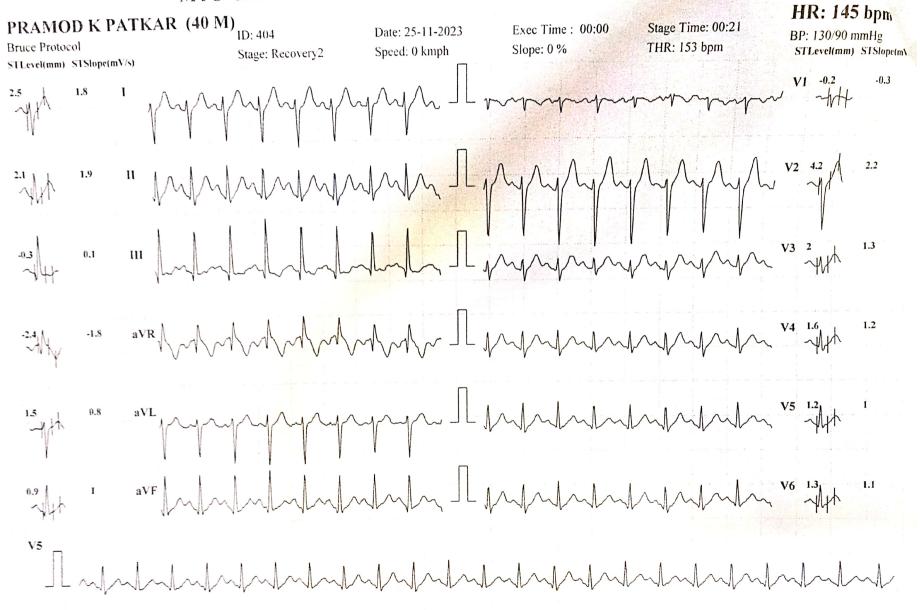
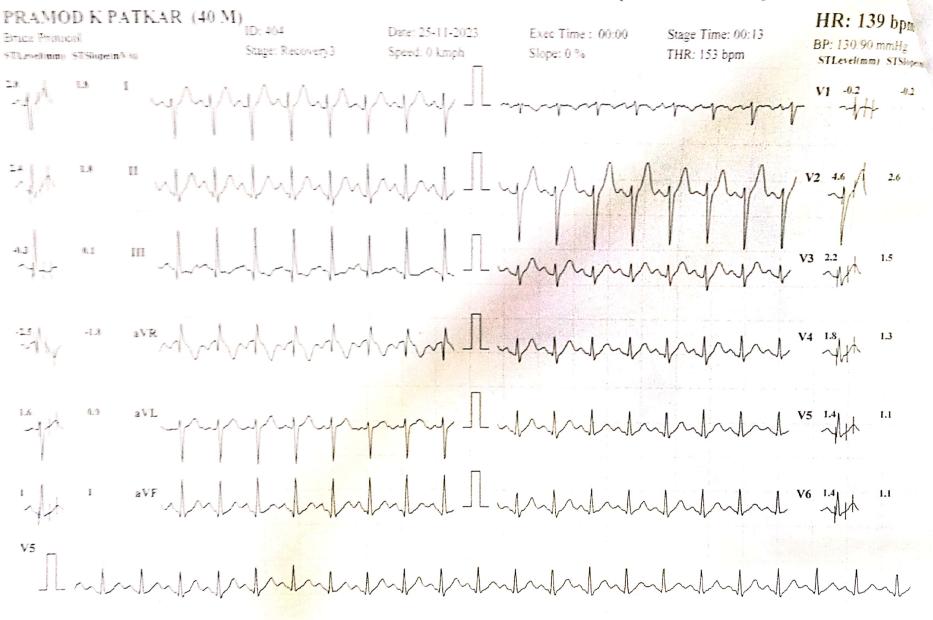


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Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiovit CS-10 Version: 3.4





Amplitude: 10mm/mV Filter: 35 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Chart Speed: 25 mm/sec

Schiller Cardiovit CS-10 Version:3.4



अस्मिता क्लिनिक आणि सोनोग्राफी सेंटर

Patient Name

: MR. PRAMOD PATKAR

Date: 25 Nov 2023

Referred By

: Dr. VANDANA POWAR

Age: 40 YEARS Sex: M

Clinically - FOR HEALTH CHECK UP.

Abdomen Sonography

LIVER: is normal in size, shape, position and shows increased echogenicity. The contours are smooth. The parenchyma shows homogeneous echotexture .The intra - hepatic portal and venous system appears normal. The portal vein is normal and show hepatopetal flow. The intra-hepatic biliary radicals are not dilated. There is no focal mass lesion.

GALL BLADDER: is physiologically distended ,normal in size and echotexture There is no evidence of echoreflective calculus in gall bladder. There is no abnormal biliary tree dilation noted . The portal vein &C.B.D appear normal .Wall thickness is normal.No e/o cholecystitis/calculus seen. PV measures -11 mm, CBD measures - 3 mm.

PANCREAS: is normal size, position & echotexture . The contours are smooth . There is no focal mass lesion seen. No pancreatitis or calcification.

SPLEEN: is normal in size, shape and echopattern. The contours are smooth. The splenic vein and portal vein are normal in calibre.

KIDNEYS: Both the kidneys are normal in size ,shape and position and contours .There is no echoreflective obstructing calculus seen on left side no hydronephrosis. Both visualized ureters appear to be normal.Parenchymal/cortical thickness is normal. Cortico -medullary differenciation is well maintained. Overlying bowel gases does not show further coarse of ureter. Right kidney measures - 99 x 50 mm. Left kidney measures - 106 x 56 mm.

Right kidney shows tiny calculus of size 3 mm in mid pole.

<u>Urinary bladder</u> is physiologically distended, appears normal. No intraluminal abnormality.

PROSTATE: is normal size and uniform echotexture, measures 30 x 34 x 34 mm(weight-19 gms). The gland bulges urinary bladder base.

Aorta and IVC are normal. No e/o free fluid in peritoneal cavity. No ascites. No significant lymphadenopathy. Bowel loops appear normal in size with good peristalsis. Appendix is not appreciated in today's study. Terminal ileum is well seen. No probe tenderness in right iliac fossa or anywhere in abdomen.

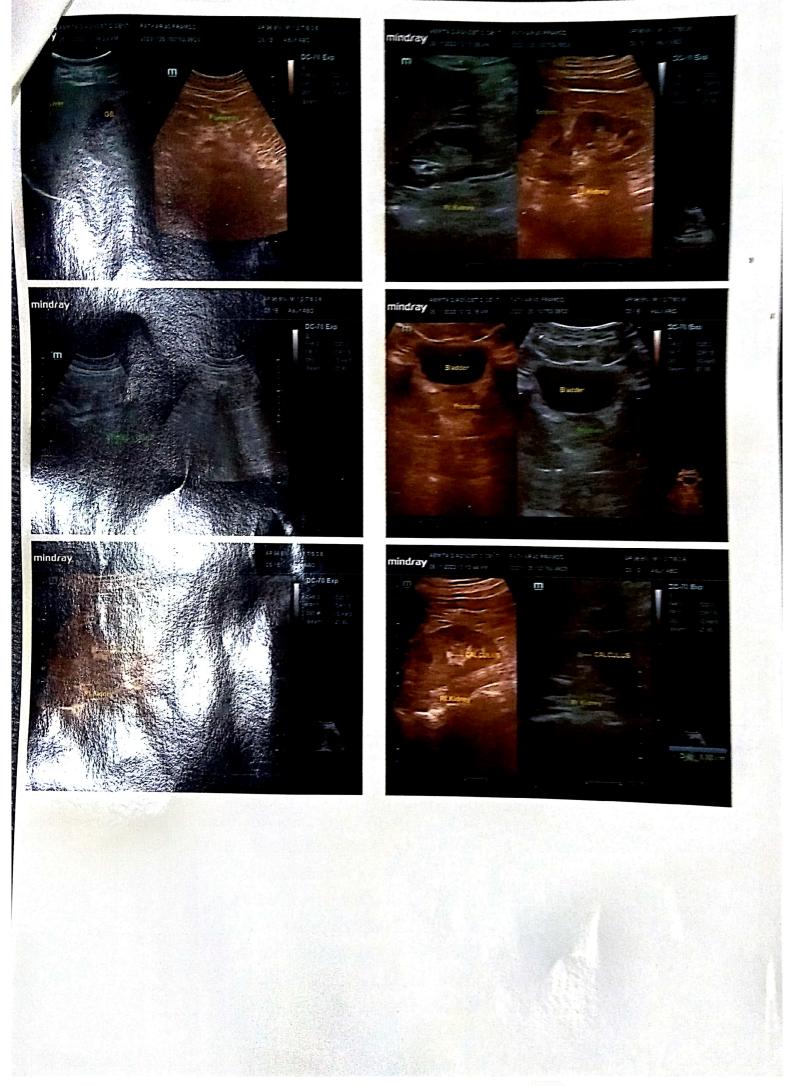
IMPRESSION: < FATTY LIVER - GRADE 1. < TINY RIGHT RENAL CALCULUS.

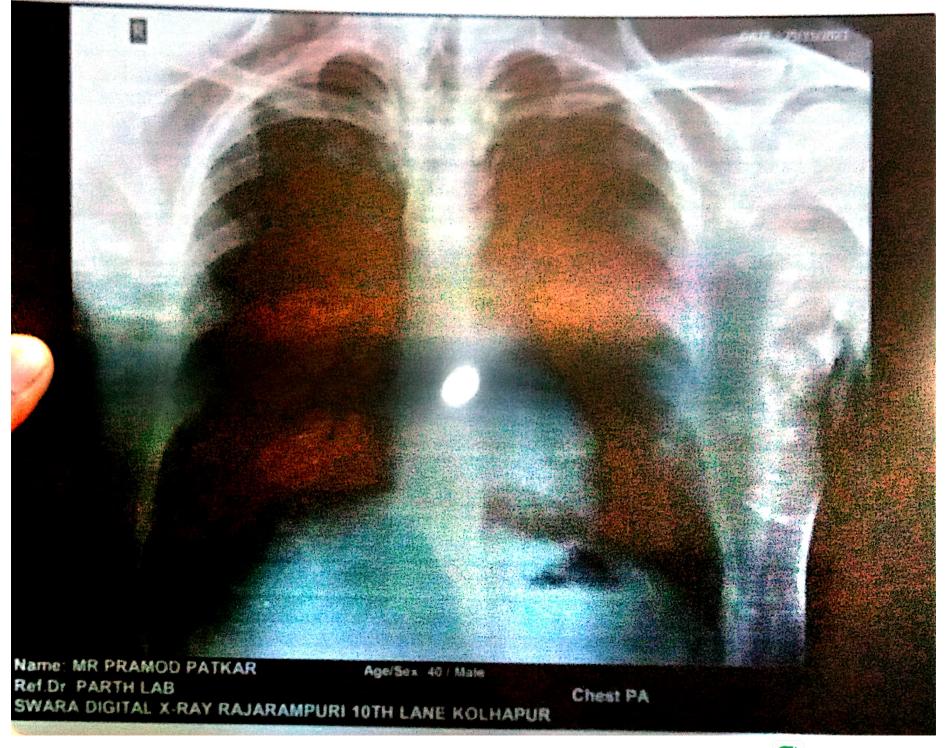
ADVICE - Clinical correlation and follow up if clinically needed. THANKS FOR REFERRAL.FEEDBACK IS WELCOME

> DR. NEHA S. GHORPADE MBBS DMRE Reg. No. 79916 Consulting Radiologist

डॉ. नेहा घोरपडे एम. बी. बी. एस., डी.एम.आर.ई (रेडीओलॉजिस्ट) रजि.नं.79916

परत येताना सर्व जुने रिपोर्टस्, सोनोग्राफी रिपोर्टस् अथवा एक्स-रे असल्यास बरोबर घेऊन येणे.







SWARA DIGITAL

x-RAY

All Types Of Digital, Portable X-rays And Procedural X-rays

PATEINT NAME:

MR PRAMOD PATKAR

AGE/SEX:

40Y/MALE

REF BY

PARTH LAB

DATE

25/11/2023

CHEST X-RAY PA

Both lungs fields are normal

Both costophrenic angles appear normal

The tracheal lucency is centraly placed

The mediastinal & diaphragmatic outlines appear normal.

The heart shadow is normal

NORMAL CHEST X-RAY

ADV: Clinical correlated

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REPORT

PT Name : PRAMOD PATKAR Ref By : DR. VANDANA POWAR Reg No : HL8200068515 / MH145

Barcode : Y11289467

INV : THYROID PROFILE -3 (T3 T4 TSH)

Age: 40 Year | Sex: Male Registered on: 25-11-2023 01:27 PM Received on : 26-11-2023 09:52 AM

Reported on : 26-11-2023 01:42 PM

SAMPLE COLLECTED AT:

THYROID PROFILE -3 (T3 T4 TSH)

| TEST DESCRIPTION | RESULT | UNITS | BIOLOGICAL REFERENCE RANGE |
|--|--------|--------|----------------------------|
| TOTAL TRIIODOTHYRONINE (T3) Method: CLIA | 1.99 | ng/mL | 0.80 - 2.00 |
| TOTAL THYROXINE (T4) Method: CLIA | 9.55 | μg/dl | 5.10 - 14.10 |
| THYROID STIMULATING HORMONE (TSH) Method: CLIA | 2.08 | ulU/ml | 0.35 - 5.50 |

Reference Range

Thyroid hormone status during pregnancy:

| Pregnancy | Т3 | 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 thecatabolic 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~~