

2/11

भारत सरकार
Government of India

रविंद्र यशवंत धर्मे
Ravindra Yashwant Dharme
जन्म तारीख/DOB: 20/06/1989
पुरुष/ MALE

Download Date: 18/11/2021

Issue Date: 08/11/2021

2786 1260 6445
VID : 9120 7433 3918 8794

माझे आधार, माझी ओळख

B.D.



Dr. Vandana G. Powar
M.B.B.S., D.C.P.
Reg. No. 63137



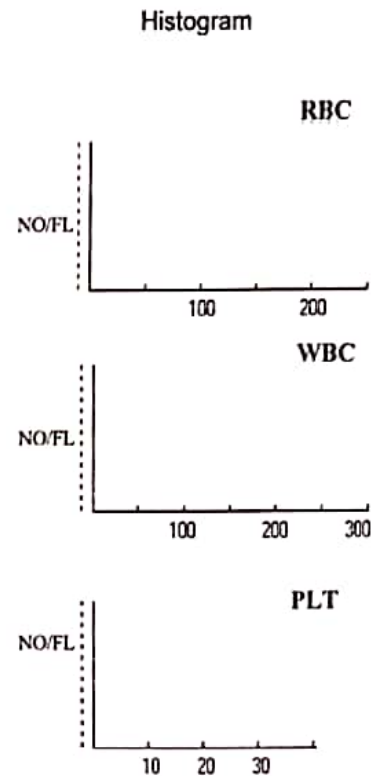
Shop No. 7, "Diwan Towers" Mangalwar Peth, Near Mirajkar Tikti, Opp. Nutan Marathi High School, Kolhapur. Mob. 9158529408, 9422047480, 9921285167

NAME : MR. RAVINDRA DHARME
REF BY : Dr. MEDIWHEEL LIFE INS

DATE : 10/02/2024 PT.NO. : 213 10022
AGE : 34. Yrs. SEX : M

HAEMOGRAM WITH INDICES

Test	Result	Units	Normal Range
Haemoglobin	- 15.3	g/dl	14-18
RBC Count	- 5.17	millions / cu-mm	4.5 - 6.5
PCV	- 50.2	%	40 - 54
MCV	- 97.1	fL	80 - 96
MCH	- 29.6	Pg	27 - 33
MCHC	- 30.5	gm/dl	33 - 36
RDW CV	- 12.0	%	11.0 - 14.5
WBC Count	- 8500	/cumm	4000 - 11000
Neutrophils	- 55	%	40 - 75
Lymphocytes	- 40	%	20 - 40
Eosinophils	- 03	%	1 - 6
Monocytes	- 02	%	2-10
Basophils	- 00	%	0 - 1
Platelet Count	- 318000	/ul	150000 -450000
MPV	- 9.7	fL	7.4 - 10.4
PDW	- 11.7	%	8-12
P-LCR	- 23.6	%	15-35
E.S.R.	- 06	mm at 1hr	0-10
(By Wintrobe Method)			
RBC Morphology	- Normochromic, Normocytic.		
WBC Morphology	- Within Normal Limits		
Platelets	- Adequate		
* Blood group	- 'A' Rh Positive		



PATHOLOGIST
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All Biochemistry Tests Done By Computerised Auto Analyser

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Consultant Pathologist



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PT.NAME : MR. RAVINDRA DHARME

DATE : 10/02/2024

REF. BY : DR. MEDIWHEEL LIFE INS

AGE : 34 Yrs. SEX : M

PT.NO. : 213 100224

BIOCHEMISTRY TEST REPORT

			<u>Normal Range</u>
Fasting Plasma Glucose	: 96.3	mg/dl	60-110 mg/dl
2 Hrs. Plasma Glucose	: 128.6	mg/dl	90-140 mg/dl
S. Creatinine	: 1.3	mg/dl	0.7 - 1.4 mg/dl
Blood Urea	: 31.4	mg/dl	12-42 mg/dl
Blood Urea Nitrogen	: 14.67	mg/dl	5 - 21 mg/dl
S. Uric acid	: 5.65	mg/dl	3.5 -7.2 mg/dl
CHOLESTEROL	: 134.1	mg/dl	0-250 mg/dl
HDL Cholesterol	: 28.8	mg/dl	30 - 70 mg/dl
S. Triglycerides	: 160.5	mg/dl	0-170 mg/dl
LDL Cholesterol	: 73.2	mg/dl	60 - 150 mg/dl
TC/HDLC Ratio	: 4.7		0 - 5
LDLC/HDLC Ratio	: 2.5		2.5 - 3



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PT.NAME : MR. RAVINDRA DHARME
REF. BY : DR. MEDIWHEEL LIFE INS

DATE : 10/02/2024
AGE : 34 Yrs. SEX : M
PT.NO. : 213 100224

BIOCHEMISTRY TEST REPORT

			<u>Normal Range</u>
S. Bilirubin (Total)	: 0.75	mg/dl	0 - 1.0 mg/dl
S. Bilirubin (Direct)	: 0.24	mg/dl	0 - 0.25 mg/dl
S. Bilirubin (Indirect)	: 0.51	mg/dl	0 - 0.75 mg/dl
S.G.O.T	: 26.3	IU/L	5-40 IU/L
S.G.P.T	: 21.9	IU/L	5-40 IU/L
S. Alkaline Phosphatase	: 98.3	IU/L	37 - 147 IU/L
Total Proteins	: 7.5	g/dl	6.6 - 8.3 g/dl
S. Albumin	: 4.3	g/dl	3.5 - 5.0 g/dl
S. Globulin	: 3.2	g/dl	1.5 - 3 g/dl
A/G Ratio	: 1.3 : 1		0.90 - 2.00



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AGE : 34 Yrs. SEX : M
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REPORT ON % GLYCOHAEMOGLOBIN OF BLOOD

% Glycohaemoglobin of blood : 4.9 %
Estimated mean blood glucose : 94.2 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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PT.NO. : 213 100224

EXAMINATION OF URINE

Normal Range

PHYSICAL EXAMINATION

Quantity	: 05 ml	
Colour	: Pale Yellow	
Appearance	: Clear	
Deposit	: Absent	
Reaction (pH)	: Acidic	
Specific Gravity	: 1.024	1.003 - 1.035

CHEMICAL EXAMINATION

Proteins	: Absent	
Glucose	: Absent	
Ketone Bodies	: Absent	
Bile Salts	: Absent	Absent
Bile Pigments	: Absent	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	: Absent
Mucus Threads	: Absent
Spermatozoa	: Absent


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PATIENT NAME: - RAVINDRA DHARME

AGE - 34/SEX-MALE

REFERANCE :- MEDIWHEEL LIFE INS.

DATE - 10/02/2024

BIOCHEMISTRY

	NORMAL VALUE
SRUM VLDL - 31.0 mmol/L	10-50 mmol / L



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PATIENT NAME - RAVINDRA DHARME

AGE - 34Y/SEX- MALE

REFERANCE :- MEDWIEEL LIFE INS

DATE - 10/02/2024

BIOCHEMISTRY

S. GAMMA G.T : 27.0.mmol/L

NORMAL RENG

10 -50 mmol/L

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[Signature]
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10/02/2024

**THE ECG OF THE CLIENT –RAVINDRA DHARME
IS WITHIN NORMAL LIMIT.**

NO ABNORMAL FINDINGS ARE DETECTED .

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KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

Name: RAVINDRA Y DHARME

Date: 09-02-2024 **Time:** 21:47

Age: 34 **Gender:** M **Height:** 176 cms **Weight:** 91 Kg **ID:** 484

Clinical History: NO MAJOR ILLNESS

Medications: NOT ON ANY MEDICATIONS

Test Details:

Protocol: Bruce **Predicted Max HR:** 186 **Target HR:** 158 (85% of Pr. MHR)
Exercise Time: 0:09:49 **Achieved Max HR:** 146 (78% of Pr. MHR)
Max BP: 130/90 **Max BP x HR:** 18980 **Max Mets:** 11
Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:11	1	0	0	60	120/80	7200	0.6 II	0.2 II
Standing	00:10	1	0	0	59	120/80	7080	0.8 II	0.2 I
HyperVentilation	00:13	1	0	0	58	120/80	6960	0.7 II	0.2 I
PreTest	00:20	1	1.6	0	75	120/80	9000	0.8 II	0.2 II
Stage 1	03:00	4.7	2.7	10	99	120/90	11880	1.3 II	0.6 II
Stage 2	03:00	7	4	12	118	130/90	15340	0.5 V2	0.6 II
Stage 3	03:00	10.1	5.5	14	137	130/90	17810	0.3 V3	1.1 II
Peak Exercise	00:49	11	6.8	16	146	130/90	18980	0.6 I	1.3 II
Recovery1	00:23	1	0	0	137	130/90	17810	0.8 II	1.3 II
Recovery2	00:13	1	0	0	128	130/90	16640	1 II	1.3 II
Recovery3	00:12	1	0	0	115	130/90	14950	0.9 II	1.2 II
Recovery4	00:11	1	0	0	118	130/90	15340	0.5 II	0.9 II


Interpretation

The Patient Exercised according to Bruce Protocol for 0:09:49 achieving a work level of 11 METS.
 Resting Heart Rate, initially 60 bpm rose to a max. heart rate of 146bpm (78% 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 ACHIEVED : ADEQUATE METS ACHIEVED
 NO SIGNIFICANT ST SEGMENT CHANGES NOTED IN EXERCISE AND RECOVERY

TMT IS NEGATIVE FOR STRESS INDUCIBLE ISCHAEMIA AT GIVEN WORKLOAD

Ref. Doctor: BOB


DR. SHANTANU PALKAR
 MBBS, PGDCC.
 CLINICAL CARDIOLOGIST
 KUSUM HEART CARE CLINIC, KOLHAPUR
(Summary Report edited by User)

SCHILLER

The Art of Diagnostics

Cardiovit CS-19 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M) ID: 484

Date: 09-02-2024

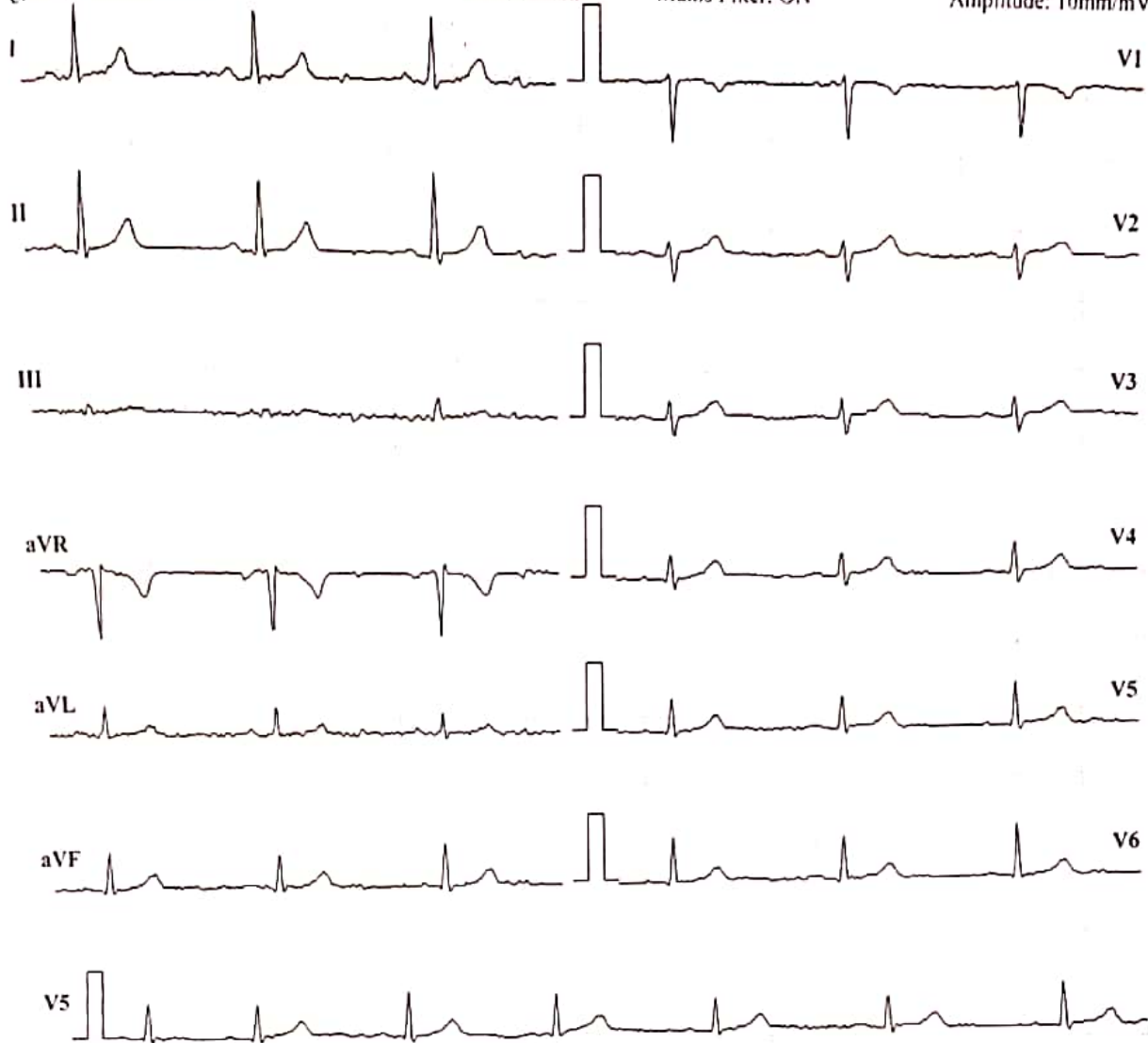
Time: 21:46

Chart Speed: 25 mm/sec

Filter: 35Hz

Mains Filter: ON

Amplitude: 10mm/mV



ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Lead	P(mV)	Q(mV)	R(mV)	S(mV)	T(mV)
I	-0.04	0.48	-0.11	-0.01	0.19
II	-0.05	0.63	-0.11	-0.01	0.27
III	-0.01	0.13	0.01	-0.01	0.07
aVR	0.07	-0.8	0.15	0.01	-0.33
aVL	-0.01	0.17	-0.05	0	0.07
aVF	-0.04	0.39	-0.04	-0.01	0.17
V1	0	-0.31	-0.05	0.03	-0.08
V2	-0.03	0.05	-0.23	0.03	0.19
V3	-0.05	0.21	-0.24	0	0.16
V4	-0.04	0.32	-0.16	0	0.17
V5	-0.05	0.63	-0.11	-0.01	0.27
V6	-0.03	0.4	0.01	0	0.16

Intervals (ms)

P-Q	Q-R-S	Q-T	Q-TC
59	76	300	302

Axis (deg)

P	QRS	T
39	46	45

HR: 61 bpm

BP: 120/80 mmHg

Interpretation: NORMAL

DR. SHANTANU PALKAR
 Doctor: DR SHANTANU PALKAR
 MBBS, PGDCC
 CLINICAL CARDIOLOGIST
 KUSUM HEART CARE CLINIC.

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 0:00:00

Stage Time: 00:11

HR: 60 bpm

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 158 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

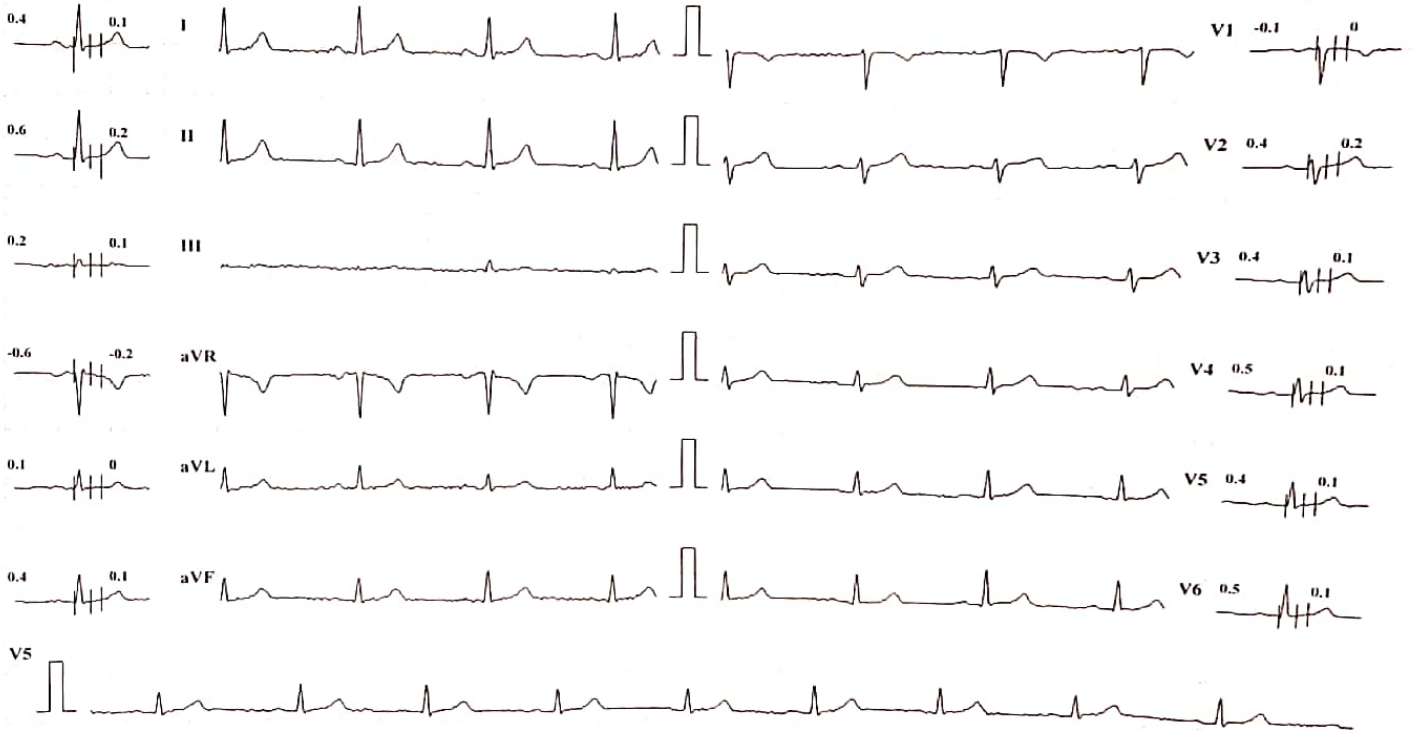


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

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KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 484

Stage: Standing

Date: 09-02-2024

Speed: 0

Exec Time : 0:00:00

Slope: 0 %

Stage Time: 00:10

THR: 158 bpm

HR: 59 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

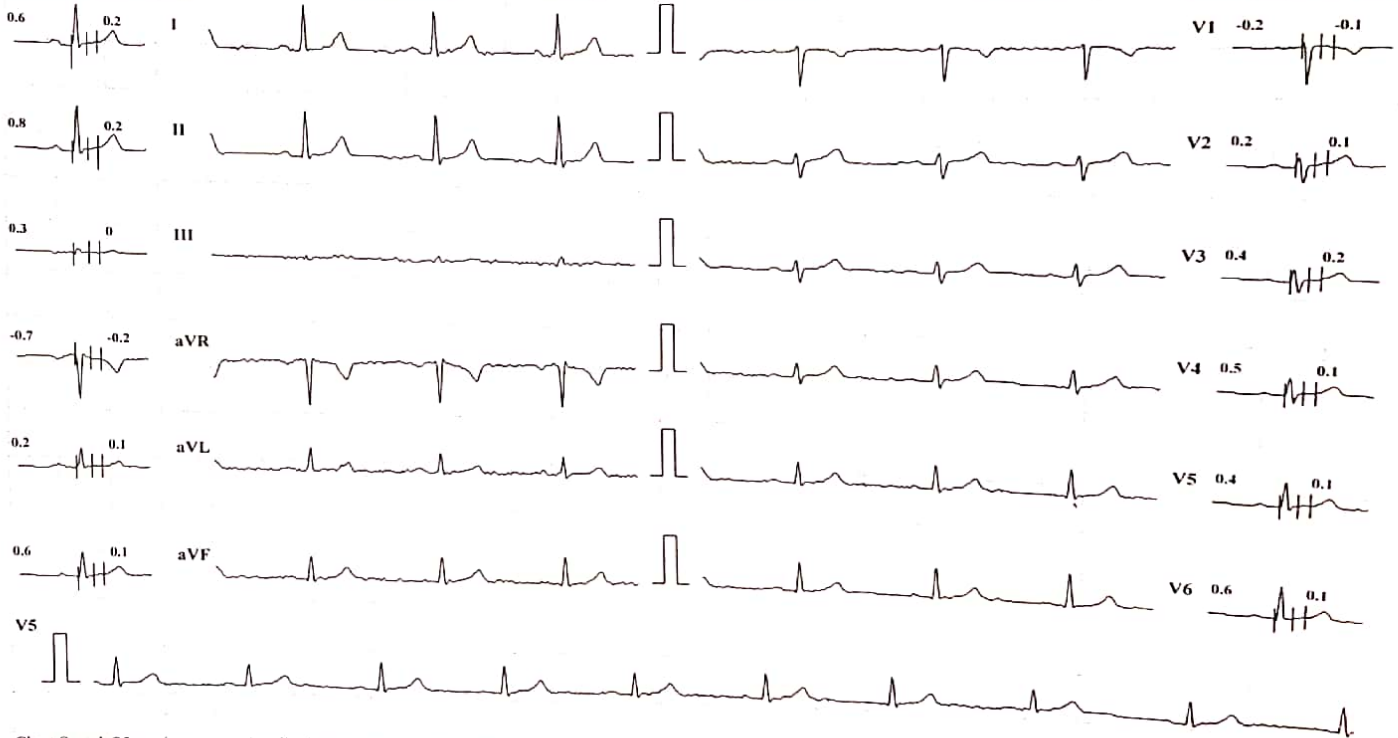


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

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RAVINDRA Y DHARME (34 M)

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 484

Date: 09-02-2024

Exec Time : 0:00:00

Stage Time: 00:13

Stage: HyperVentilation

Speed: 0

Slope: 0 %

THR: 158 bpm

HR: 58 bpm

BP: 120/80 mmHg
STLevel(mm) STSlope(mV/s)

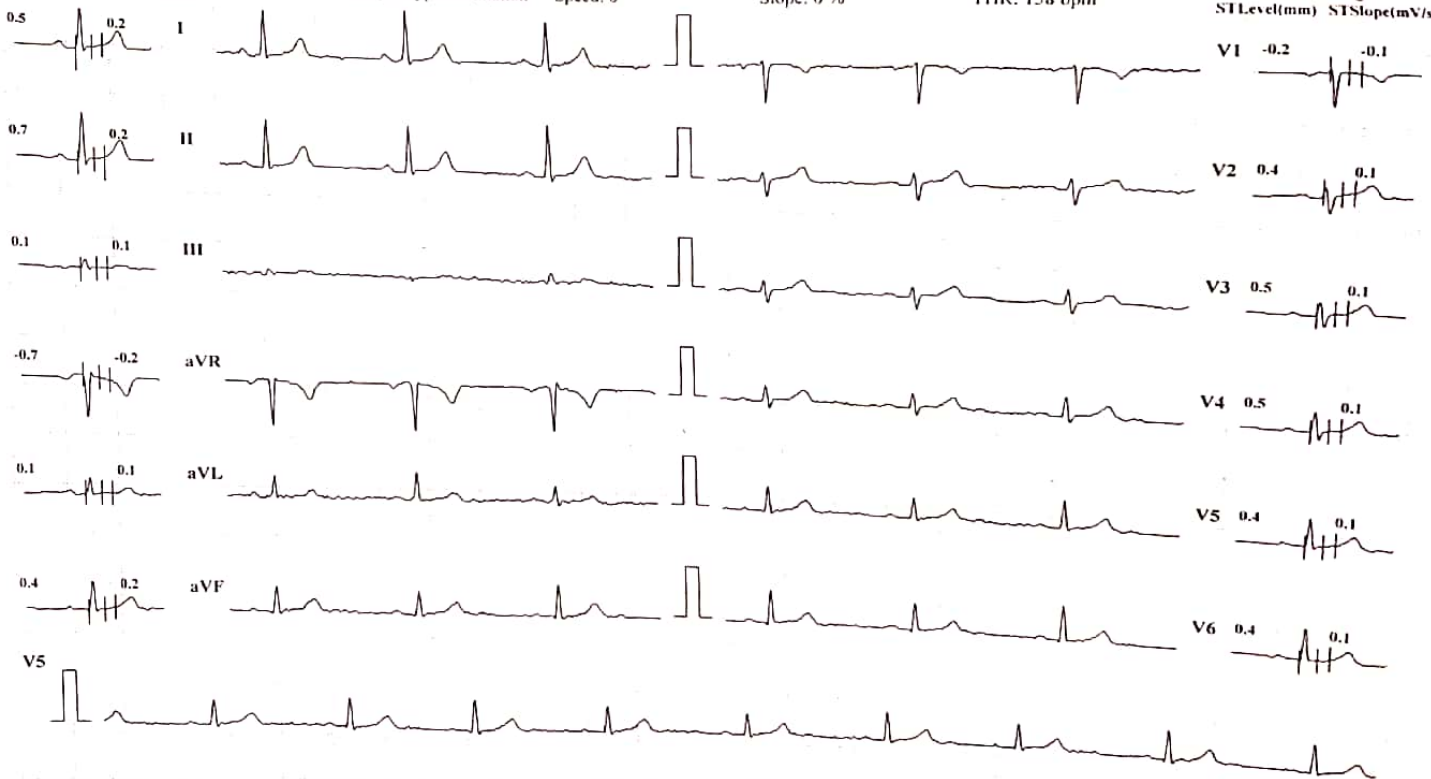


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Cardiofit CS-10 Version 3.4

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RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 0:03:00

Stage Time: 03:00

HR: 99 bpm

BP: 120/90 mmHg

STLevel(mm) STSlope(mV/s)

Stage: 1

Speed: 2.7 kmph

Slope: 10 %

THR: 158 bpm

STLevel(mm) STSlope(mV/s)

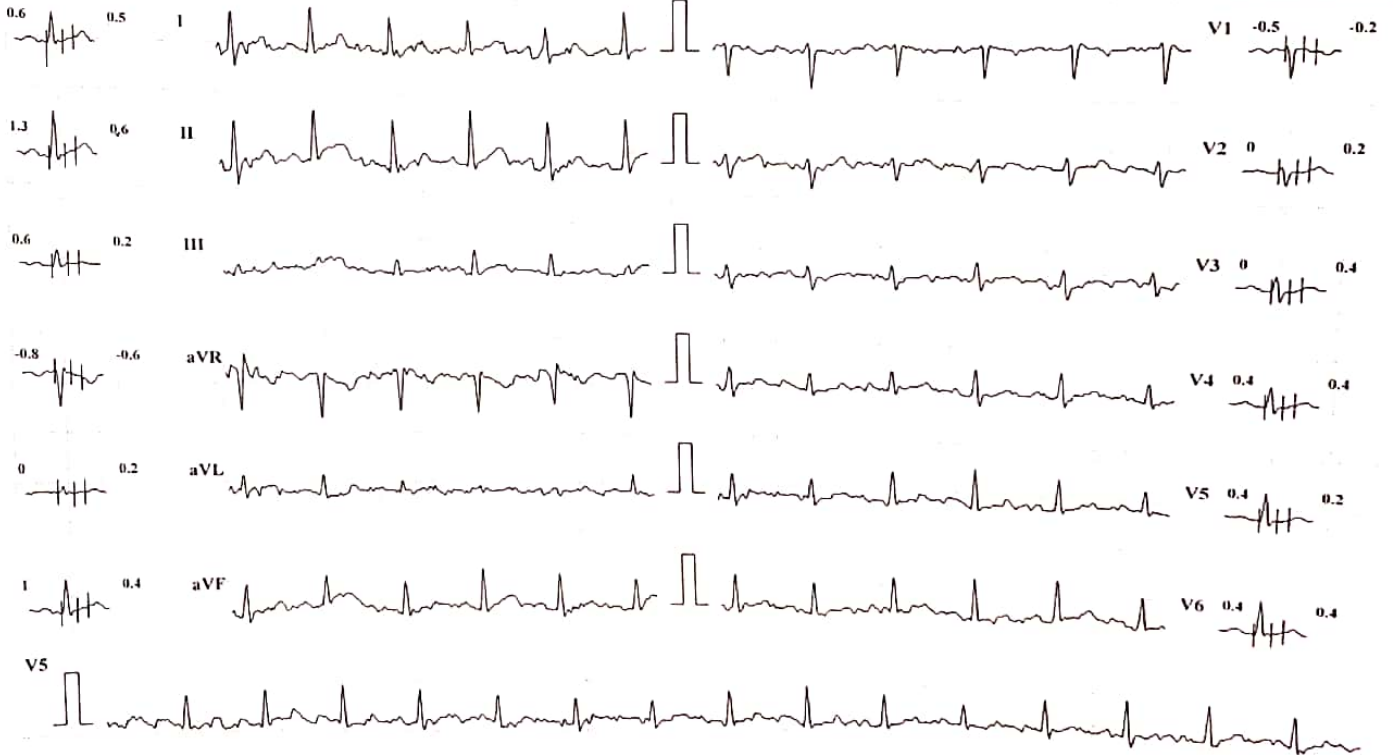


Chart Speed: 25 mm/sec

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

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 0:06:00

Stage Time: 03:00

HR: 118 bpm

STLevel(mm) STSlope(mV/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 158 bpm

BP: 130/90 mmHg
STLevel(mm) STSlope(mV/s)



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 Cardio II CS-10 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 0:09:00

Stage Time: 03:00

HR: 137 bpm

STLevel(mm) STSlope(mV/s)

Stage: 3

Speed: 5.5 kmph

Slope: 14 %

THR: 158 bpm

BP: 130/90 mmHg
STLevel(mm) STSlope(mV/s)

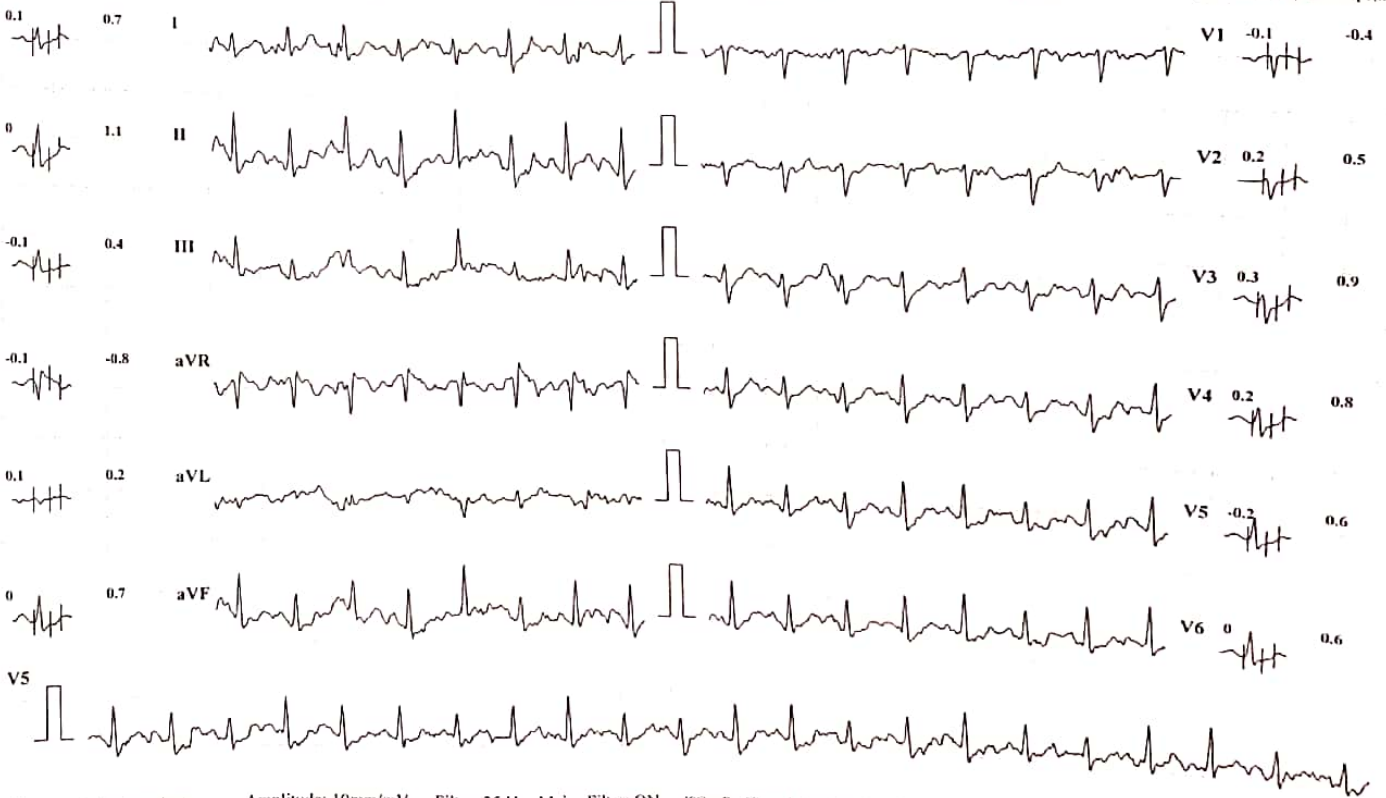


Chart Speed: 25 mm/sec

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

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 484
Stage: 4 Peak Exercise

Date: 09-02-2024
Speed: 6.8 kmph

Exec Time : 0:09:49
Slope: 16 %

Stage Time: 00:49
THR: 158 bpm

HR: 146 bpm

BP: 130/90 mmHg
STLevel(mm) STSlope(mV/s)

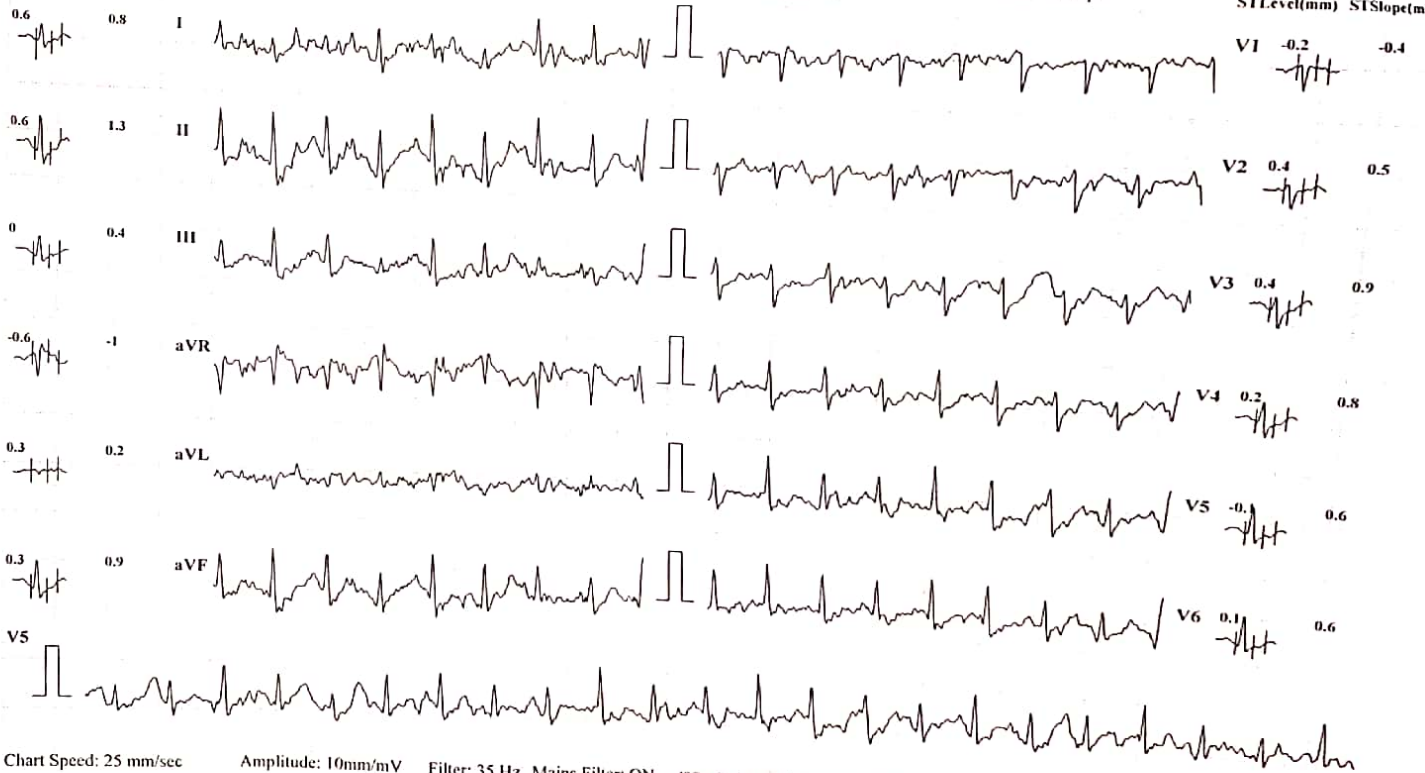


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiffel Cardiovit CS-10 Version:3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 00:00

Stage Time: 00:23

HR: 137 bpm

STLevel(mm) STSlope(mV/s)

Stage: Recovery1

Speed: 0 kmph

Slope: 0 %

THR: 158 bpm

BP: 130/90 mmHg

STLevel(mm) STSlope(mV/s)

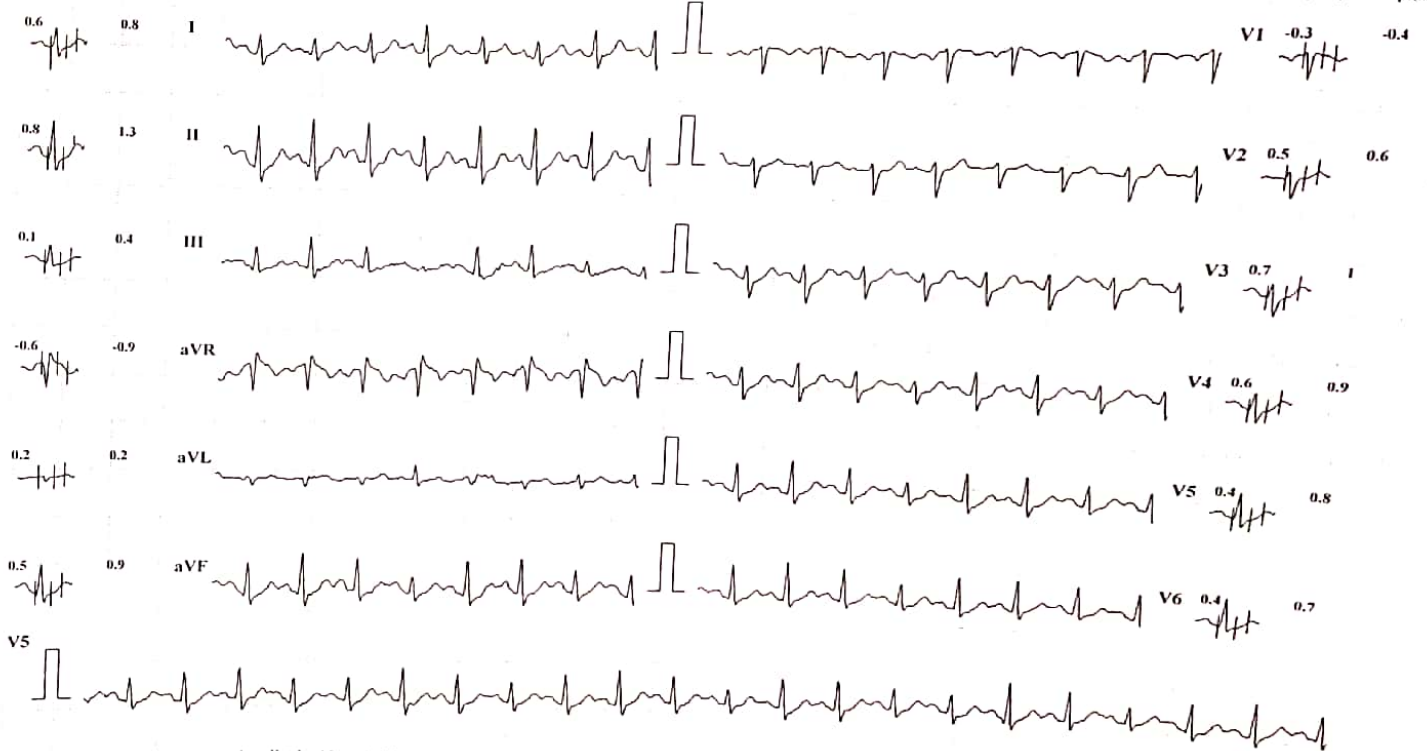


Chart Speed: 25 mm/sec

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

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol
STLevel(mm) STISlope(mV/s)

ID: 484

Stage: Recovery2

Date: 09-02-2024

Speed: 0 kmph

Exec Time : 00:00

Slope: 0 %

Stage Time: 00:13

THR: 158 bpm

HR: 128 bpm

BP: 130/90 mmHg

STLevel(mm) STISlope(mV/s)

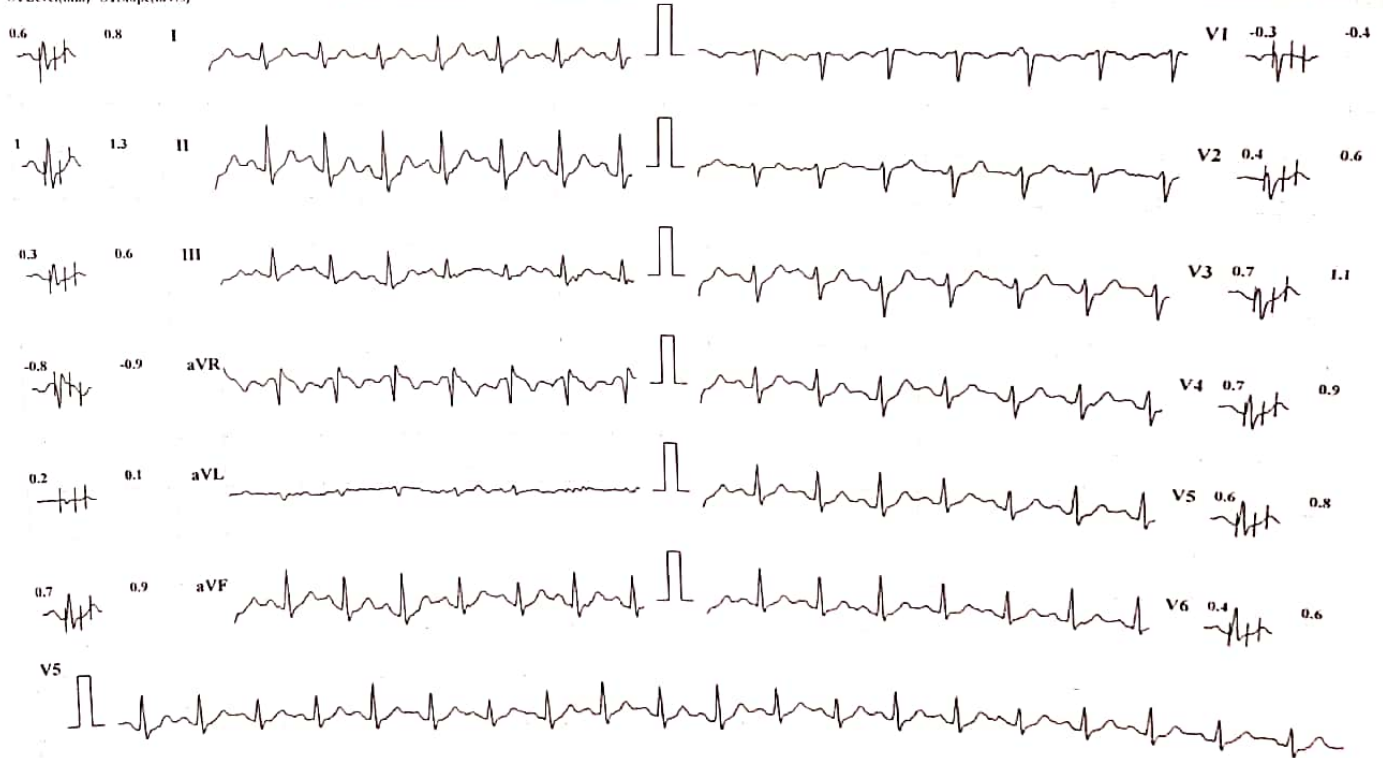


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Mains Filter: ON

ISO = R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schiller Cardiovt CS-10 Version 3.4

KUSUM HEART CARE CLINIC, KOLHAPUR [+91 8411979955]

RAVINDRA Y DHARME (34 M)

Bruce Protocol

ID: 484

Date: 09-02-2024

Exec Time : 00:00

Stage Time: 00:12

HR: 115 bpm

ST1Level(mm) ST1Slope(mV/s)

Stage: Recovery3

Speed: 0 kmph

Slope: 0 %

THR: 158 bpm

BP: 130/90 mmHg
ST1Level(mm) ST1Slope(mV/s)

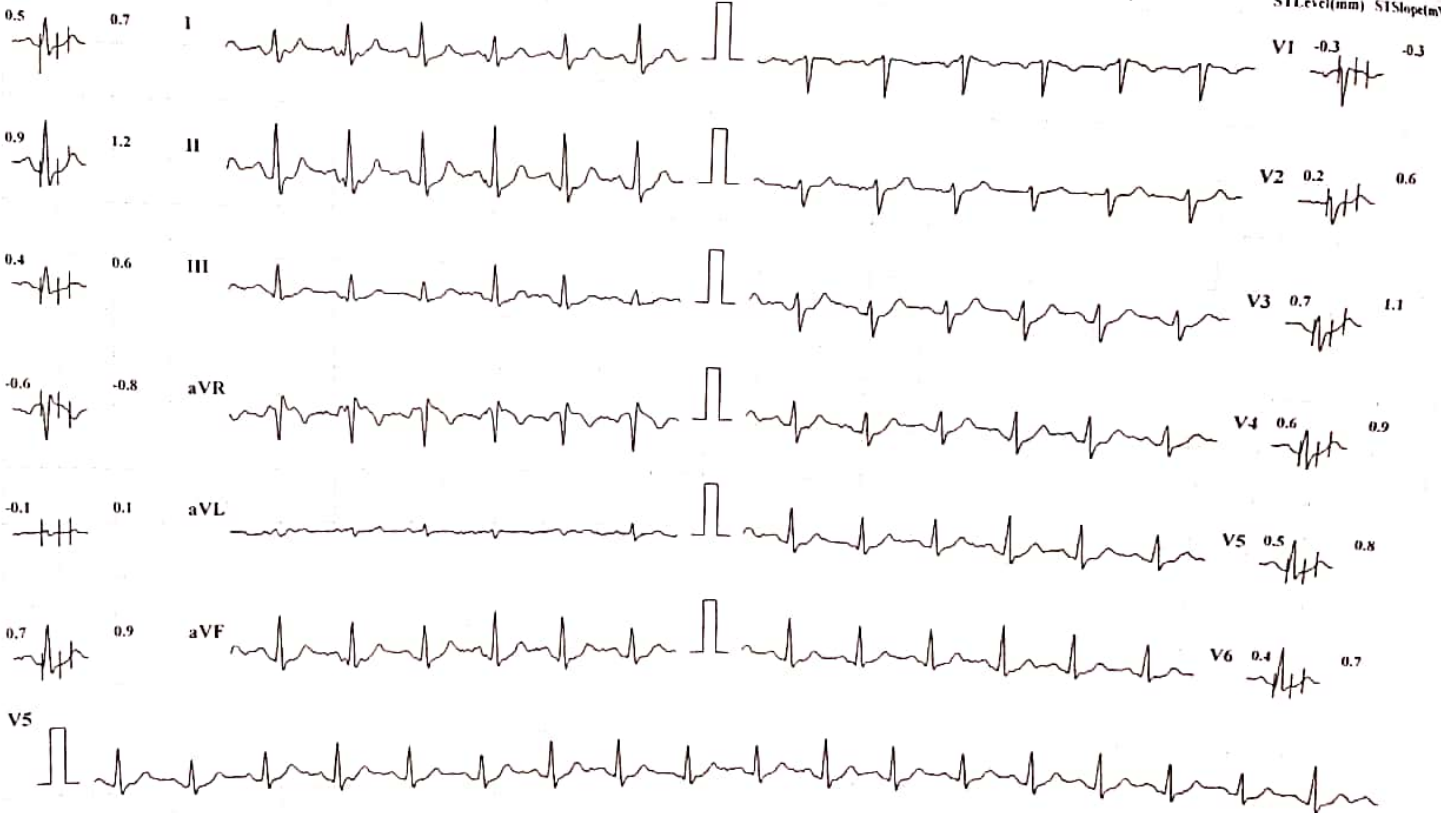


Chart Speed: 25 mm/sec

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

Patient Name : MR. RAVINDRA DHARME

Date : 10 Feb 2024

Referred By : Dr. VANDANA POWAR

Age : 35 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 contracted(post meal), normal in size and echotexture. There is no evidence of echoreflexive 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 echoreflexive obstructing calculus seen on either sides nor hydronephrosis. Both visualized ureters appear to be normal. Parenchymal/cortical thickness is normal. Cortico -medullary differentiation is well maintained. Overlying bowel gases does not show further course of ureter. **Right kidney** measures - 104 X 58 mm. **Left kidney** measures - 101 x 57 mm.

Urinary bladder is physiologically distended, appears normal. No intraluminal abnormality.

PROSTATE: is normal size and uniform echotexture, measures 29 x 31 x 28 mm (weight- 13 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.

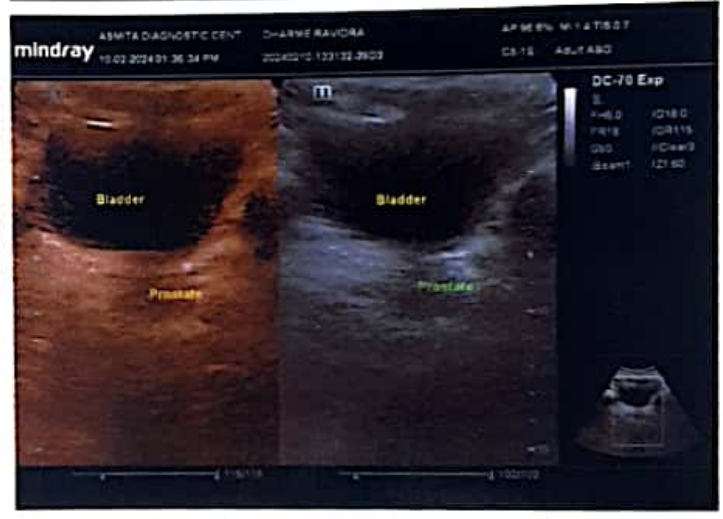
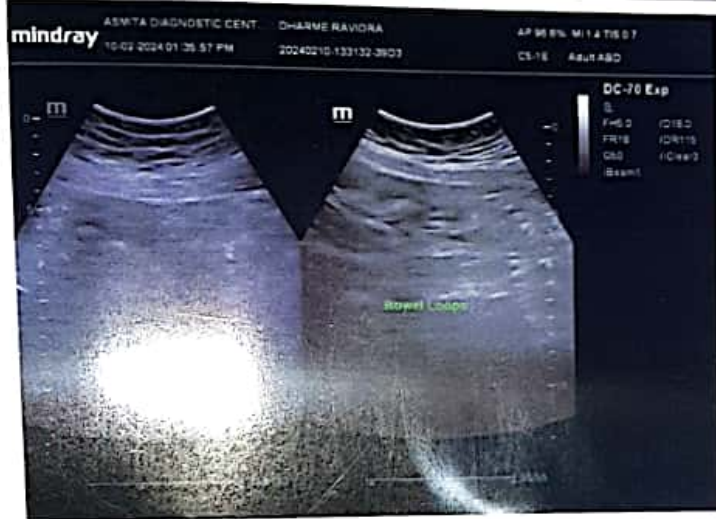
IMPRESSION : < FATTY LIVER -GRADE 1.

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 रिपोर्ट्स, सोनोग्राफी रिपोर्ट्स 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 RAVINDRA DHARME	AGE/SEX :	34Y/MALE
REF BY :	PARTH LAB	DATE :	10/02/2024

CHEST X-RAY PA

Both side lungs fields are normal

Both costophrenic angles appear normal

The tracheal lucency is centrally placed


The mediastinal & diaphragmatic outlines appear normal.

The heart shadow is normal

IMPRESSION :

NORMAL CHEST X RAY

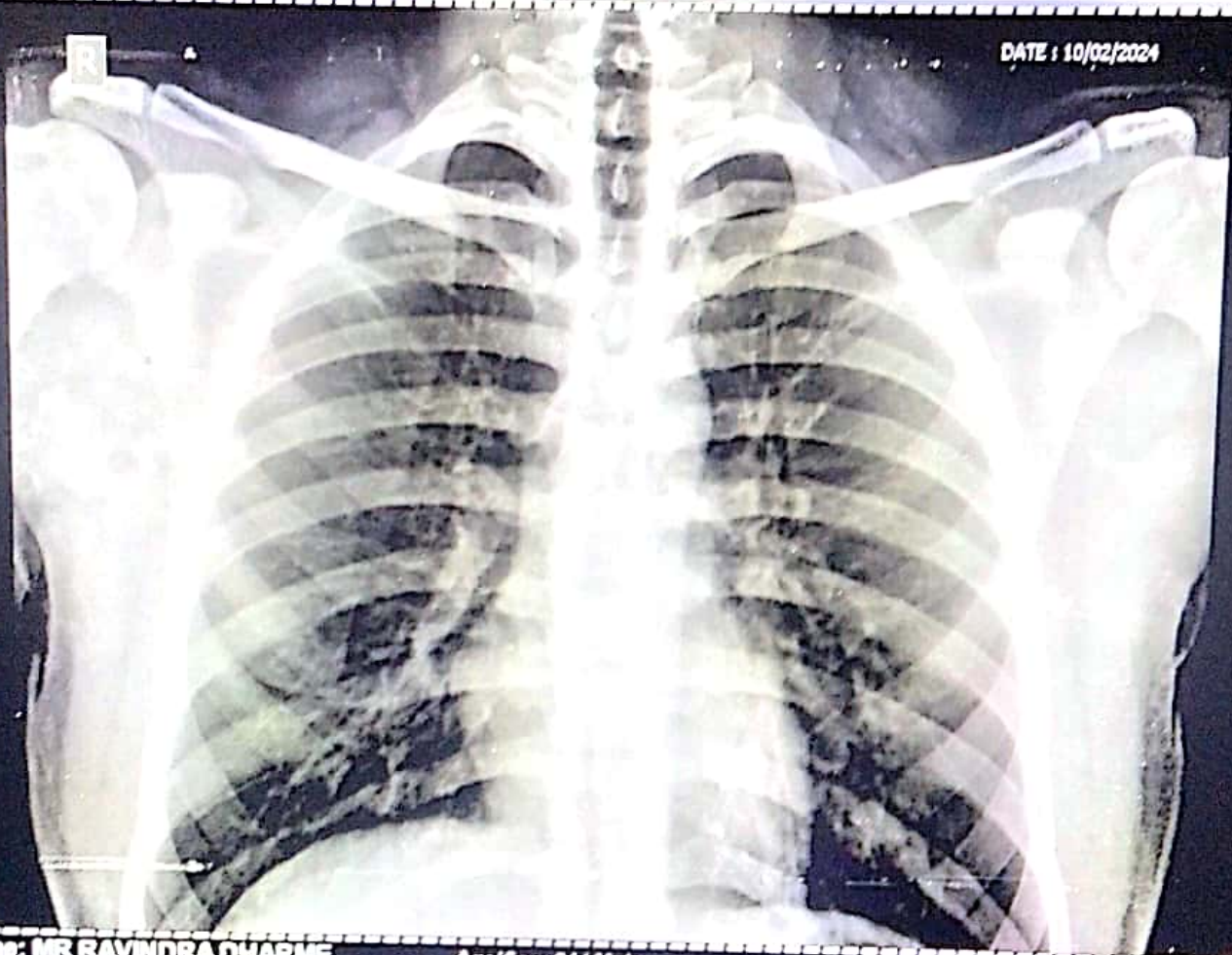
ADV: Clinical correlated


DR SAKSHAM GUPTA
MBBS, MD Radio diagnosis FRCR UK
Consultant Radiologist

Mob. 9890185675

Address : Bramhanand, Near Tawanappa Patne High School, Rajarampur 10 Galli, Kolhapur.

DATE: 10/02/2024



Name: MR RAVINDRA DHARME

Age/Sex: 34 / Male

Re: Dr. PARTH LAB

SWARA DIGITAL X-RAY RAJARAMPURI 10TH LANE KOLHAPUR

Chest PA



Corporate Office : HY PATHO LAB

CB 252, GROUND & FIRST FLOOR NARAINA, NEW DELHI 110028

7718962488

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www.hypatholab.in

Toll Free No. : 18001030287

REPORT

PT Name : RAVINDRA DHARME

Age : 34 Year | Sex : Male

SAMPLE COLLECTED AT :

Ref By : DR. VANDANA POWAR

Registered on : 10-02-2024 03:56 PM

Reg No : HL6500266552 / MH145

Received on : 11-02-2024 08:07 AM

Barcode : Y11289666

Reported on : 11-02-2024 11:52 AM



INV : PSA- Total (Prostrate Specific Antigen Total)

SAMPLE : Serum

PSA- TOTAL (PROSTRATE SPECIFIC ANTIGEN TOTAL)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
PROSTATE SPECIFIC ANTIGEN (PSA)	0.17	ng/ml	0 - 4.0

Method: CLIA

Interpretation

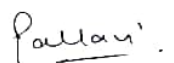
Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

Note:

Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

Please correlate with clinical conditions.

--End of report--



Dr. PALLAVI SAXENA (MD PATH)
Consultant Pathologist



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Toll Free No. : 18001030287

REPORT

PT Name : RAVINDRA DHARME

Age : 34 Year | Sex : Male

SAMPLE COLLECTED AT :

Ref By : DR. VANDANA POWAR

Registered on : 10-02-2024 03:56 PM

Reg No : HL6500266552 / MH145

Received on : 11-02-2024 08:07 AM

Barcode : Y11289666

Reported on : 11-02-2024 10:30 AM



INV : THYROID PROFILE -3 (T3 T4 TSH)

SAMPLE : Serum

THYROID PROFILE -3 (T3 T4 TSH)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3) Method: CLIA	1.45	ng/mL	0.80 - 2.00
TOTAL THYROXINE (T4) Method: CLIA	7.05	µg/dl	5.10 - 14.10
THYROID STIMULATING HORMONE (TSH) Method: CLIA	1.56	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

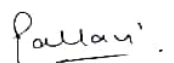
6-10 years: 0.6-4.8

Interpretation

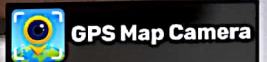
1. Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
2. Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3. Patients having either 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--



Dr. PALLAVI SAXENA (MD PATH)
Consultant Pathologist



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