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 CIN : U85195GJ2009PLC057059



TEST REPORT

Reg. No. : 40900715968 **Reg. Date** : 14-Sep-2024 10:44 **Ref.No** : **Approved On** : 14-Sep-2024 12:12
Name : MOUNIKA VELPULA **Collected On** : 14-Sep-2024 10:44
Age : 35 Years **Gender**: Female **Pass. No.** : **Dispatch At** :
Ref. By : **Tele No.** :
Location : SPECTRA DIAGNOSTIC @ LP SAVANI ROAD

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <i>Method:CLIA</i>	1.19	ng/mL	0.6 - 1.81
T4 (Thyroxine), Total <i>Method:CLIA</i>	9.5	µg/dL	4.5 - 12.6
TSH (Ultra Sensitive) <i>Method:CLIA</i>	1.477	µIU/mL	0.55 - 4.78
Sample Type: Serum			

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

----- End Of Report -----

This is an electronically authenticated report. "Please verify the authenticity of this report by scanning the QR code to ensure data integrity."

Test done from collected sample.

Generated On : 14-Sep-2024 12:19

Dr. Dhaval Bamania
 Pathologist
 G-16880

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