

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS RANJEET KAR 41 Years / Female Reg No. : 7011
Ref. By : . SELF Reg. Date : 28/03/2022 02:01PM
Address : Flat No. A03, Power Emperia Bku, Sharda Vihar , KORBA , 495677 Collected At : MedZone Center

INVESTIGATION REPORT**CLINICAL BIOCHEMISTRY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>BIOLOGICAL REF RANGE</u>	<u>TEST METHOD</u>
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Glucose - Random

Sample Type : PLASMA - NaF

Blood Glucose - Random (Methodology : : 105 mg/dl 70 - 150
GOD / POD)

TSH (Thyroid Stimulating Hormone)

Sample Type : SERUM

TSH (Thyroid Stimulating Hormone)	: 3.32	μIU/mL	0.37 - 4.8 : Adults	ECL
			0.46 - 8.1 : 1mon-5 Yrs	
			0.52 - 16.0 : 1 - 30 Days	

Thyroid-stimulating hormone (TSH, thyrotropin) is a glycoprotein having a molecular weight of approx. 30,000 daltons and consisting of two subunits. The beta-subunit carries the TSH-specific immunological and biological information, whereas the alpha-chain carries species-specific information and has an identical amino acid sequence to the alpha-chains of LH, FSH and hCG. TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH has a stimulating action in all stages of thyroid hormone formation and secretion; it also has a proliferative effect. The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. Roche Cobas TSH employs monoclonal antibodies specifically directed against human TSH. The antibodies labeled with ruthenium complex* consist of a chimeric construct from human and mouse-specific components. As a result, interfering effects due to HAMA (human anti-mouse antibodies) are largely eliminated.

METHOD: One-step sandwich and competitive FEIA

INSTRUMENT: TOSHO AIA-360 JAPAN

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Sample Barcode :



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Dr. VANDANA CHANDANI

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INVESTIGATION REPORT**CLINICAL PATHOLOGY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>TEST METHOD</u>
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CUE (Complete Urine Examination)

Sample Type : URINE

PHYSICAL EXAMINATION :

Color	: Pale Yellow	
Appearance	: clear	
Reaction (pH)	: 5.6	4.8-7.6
Specific Gravity	: 1.015	1.002-1.030

CHEMICAL EXAMINATION :

Proteins	: Absent
Sugar	: Absent

MICROSCOPIC EXAMINATION :

Pus (WBC) Cells	: 1-3/hpf
Epithelial Cells.	: 2-3/hpf
R.B.C	: Absent
Casts	: Absent
Crystals	: Absent

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INVESTIGATION REPORT**HAEMATOLOGY**

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE	TEST METHOD
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CBP (Complete Blood Picture)

Sample Type : WB - EDTA

Haemoglobin	: 9.8	gm%	11.5 - 16.0	
Total Erythrocyte Count	: 5.33	M/cmm	4.0 - 6.2	Cell Counter
Hematocrit (PCV)	: 32.7	Vol %	35.0 - 50.0	
Mean Corpuscular Volume	: 61.4	fL	80 - 100	
Mean Corpuscular Hemoglobin	: 18.4	PG	26 - 34	
MCHC	: 30.0	g/L	31 - 35	
RDW	: 19.6	%	11.5 - 14.5	
Total Leucocyte Count.	: 9200	/cumm	4000 - 11000	

DIFFERENTIAL COUNT :

Neutrophils	: 69	%	40 - 75	
Lymphocytes.	: 24	%	20 - 40	Cell Counter
Monocytes.	: 04	%	2 - 10	Cell Counter
Eosinophils	: 03	%	1 - 6	Cell Counter
Basophils	: 0	%	0 - 1	Cell Counter
Platelet Count	: 374000	/cmm	150000 - 450000	

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