

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS SHOBHA CHAUHAN

38 Years / Female

Reg No. : 18815

Ref. By : DR. KHUNTE SUSHILA

Reg. Date : 01/08/2022 11:16AM

Address :

Collected At : MedZone Center

INVESTIGATION REPORT**CLINICAL BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE	TEST METHOD
------	--------	------	----------------------	-------------

Glucose - Fasting

Sample Type : PLASMA - NaF

Blood Glucose-Fasting (Methodology : : 77 mg/dl 70 - 110
GOD/POD)

Protein Total

Sample Type : SERUM

Protein Total : 7.0 g/dl 6.0 - 8.5 Biuret

TSH (Thyroid Stimulating Hormone)

Sample Type : SERUM

TSH (Thyroid Stimulating Hormone) : 1.76 μ IU/mL 0.37 - 4.8 : Adults Fully Automated
0.46 - 8.1 : 1mon-5 Yrs Roche E411 (ECL)
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

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS SHOBHA CHAUHAN

38 Years / Female

Reg No. : 18815

Ref. By : DR. KHUNTE SUSHILA

Reg. Date : 01/08/2022 11:16AM

Address :

Collected At : MedZone Center

INVESTIGATION REPORT**CLINICAL BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE	TEST METHOD
Free T4 (Thyroxine - Free)				
Sample Type	: SERUM			
Free T4 (Thyroxine - Free)	: 1.34	ng/dl	0.48 - 2.32 : 1-30 days 0.76 - 2.00 : 1-12 mon 0.90 - 1.59 : 1-15 yr 0.82 - 1.83 : Adults	E CLIA

The thyroid hormone thyroxine (T4) is physiologically part of the regulating system of the thyroid gland and has an effect on general meta-bolism. The major fraction of the total thyroxine is bound to transport proteins (TBG, prealbumin and albumin). The free thyroxine (fT4) is the physiologically active thyroxine component. The determination of free thyroxine is an important element in clinical routine diagnostics. Free T4 is measured together with TSH when thyroid function disorders are suspected. The determination of fT4 is also suitable for monitoring thyrosuppressive therapy. The determination of free T4 has the advantage of being independent of changes in the concentrations and binding properties of the binding proteins; additional determination of a binding parameter (T-uptake, TBG) is therefore unnecessary. A variety of methods are available for estimating the free thyroid hormone levels. The direct measurement of fT4 and fT3 via equilibrium dialysis or ultrafiltration is mainly used as a reference method for standardizing the indirect procedures generally used for routine diagnostic purposes. In the Elecsys FT4 test the determination of free thyroxine is made with the aid of a specific anti-T4 antibody labeled with a ruthenium complex**. The quantity of antibody used is so small (equivalent to approx. 1-2% of the total T4 content of a normal serum sample) that the equilibrium between bound and unbound T4 remains virtually unaffected.

METHOD: One-step sandwich and competitive FEIA

INSTRUMENT: TOSHO AIA-360 JAPAN

--- End Of Report ---

Sample Registered On : 01/08/2022 11:16AM

Sample Received On : 01/08/2022 11:17AM

Report Released On : 01/08/2022 04:39PM

Sample Barcode :



Checked By: tulesh

Dr. VANDANA CHANDANI

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS SHOBHA CHAUHAN 38 Years / Female Reg No. : 18815
Ref. By : DR. KHUNTE SUSHILA Reg. Date : 01/08/2022 11:16AM
Address : Collected At : MedZone Center

INVESTIGATION REPORT**CLINICAL PATHOLOGY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>TEST METHOD</u>
-------------	---------------	-------------	--------------------

CUE (Complete Urine Examination)

Sample Type : URINE

PHYSICAL EXAMINATION :

Color : Amber
Appearance : hazy
Reaction (pH) : 6.3 4.8-7.6
Specific Gravity : 1.020 1.002-1.030

CHEMICAL EXAMINATION :

Proteins : trace
Sugar : Absent

MICROSCOPIC EXAMINATION :

Pus (WBC) Cells : 12-15 /hpf
Epithelial Cells. : 3-5 /hpf
R.B.C : Absent
Casts : Absent
Crystals : Absent

--- End Of Report ---

Sample Registered On : 01/08/2022 11:16AM

Sample Received On : 01/08/2022 11:17AM

Report Released On : 01/08/2022 01:16PM

Sample Barcode :



Checked By:dharmendra

Dr. VANDANA CHANDANI

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS SHOBHA CHAUHAN 38 Years / Female Reg No. : 18815
Ref. By : DR. KHUNTE SUSHILA Reg. Date : 01/08/2022 11:16AM
Address : Collected At : MedZone Center

INVESTIGATION REPORT**HAEMATOLOGY**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>TEST METHOD</u>
-------------	---------------	-------------	--------------------

Peripheral Smear Examination (Blood Picture)

Sample Type : WB - EDTA

RBC. : Mild to Moderate Hypochromia. Microcytes ++, few macrocytic hypochromic cells+, few target cells+, elliptocytes+

. : Anisopoikilocytosis +

.. : No features of haemolysis seen

WBC : Normal in frequency & distribution.

... : No immature cells seen.

.. . : Few hypersegmented neutrophils seen.

Platelet : Adequate

Haemoparasite : No Haemoparasite seen.

Mentzer Index-17.44

IMPRESSION : S/o predominantly Microcytic hypochromic RBC picture.

CBP (Complete Blood Picture)

Sample Type : WB - EDTA

Haemoglobin	: 9.7	gm%	11.5 - 16.0	
Total Erythrocyte Count	: 4.30	M/cmm	4.0 - 6.2	Cell Counter
Hematocrit (PCV)	: 32.3	Vol %	35.0 - 50.0	
Mean Corpuscular Volume	: 75.1	fL	80 - 100	
Mean Corpuscular Hemoglobin	: 22.6	PG	26 - 34	
MCHC	: 30.0	g/L	31 - 35	
RDW	: 15.9	%	11.5 - 14.5	
Total Leucocyte Count.	: 7890	/cumm	4000 - 11000	
DIFFERENTIAL COUNT :				
Neutrophils	: 75	%	40 - 75	
Lymphocytes.	: 19	%	20 - 40	Cell Counter
Monocytes.	: 05	%	2 - 10	Cell Counter
Eosinophils	: 01	%	1 - 6	Cell Counter
Basophils	: 0	%	0 - 1	Cell Counter
Platelet Count	: 166000	/cmm	150000 - 450000	

**ADVANCE DIAGNOSTICS CENTRE**

C1-C2/17A, NEAR NIHARIKA TALKIES

KORBA- 495677

PH-09228333 MOBILE-9300888178

NAME : MRS SHOBHA CHAUHAN 38 Years / Female Reg No. : 18815
Ref. By : DR. KHUNTE SUSHILA Reg. Date : 01/08/2022 11:16AM
Address : Collected At : MedZone Center

INVESTIGATION REPORT**HAEMATOLOGY**

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

ESR (Erythrocyte Sedimentation Rate)

Sample Type : PLASMA -Na Citrate

ESR (Erythrocyte Sedimentation Rate)	: 30	mm/hr	0 - 20 :1st Hour	Sedimentation me
--------------------------------------	------	-------	------------------	------------------

--- End Of Report ---

Sample Registered On : 01/08/2022 11:16AM

Sample Received On : 01/08/2022 11:17AM

Report Released On : 01/08/2022 04:39PM

Sample Barcode :



Checked By:dharmendra

Dr. VANDANA CHANDANI