

SID No : 105001621

Branch : PUNE

Mrs. MEENA GAHLOT (3714346)

Age / Sex: 49 Y / Female

Ref. By : MEDLIFE LABS - PUNE

Patient ID : A050001658

Control's boundaries are too small

for the barcode

Collected Date: 14/02/2019 / 06:58

Received Date: 14/02/2019 / 09:10

Reported Date: 14/02/2019 / 20:10

**Final Test Report** 

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Specimen

Serum

**Test Name** 

TSH

Result 17.770 Units uIU/ml Reference Range / Method

Adult: 0.270 - 5.350

Premature 28 - 36wk: 0.7 - 27.0 Cord Blood(>37 wk): 2.3 - 13.2

Birth - 4 days : 1.0 - 39.0 10 weeks : 0.6 - 10.1 4 months : 0.4 - 7.0 5 years : 0.4 - 6.0

First Trimester: 0.1 - 2.5 Second Trimester: 0.2 - 3.0 Third Trimester: 0.2 - 3.0 (ECLIA)

Almens.

Dr. Vishwesh Avadhani M.B.B.S., D.C.P.,

Consultant Pathologist

Verified By Mr.J.Anandkumar

Hypothyzoidism

cured with Homeopathy only.

## Department of Endocrinology

### Command Hospital (SC)

RADIO IMMUNOASSAY LABORATORY

Pune 411040

Sample No: 1361

Date: 18-Feb-19 MH: CH(SC)

Relation: W/O Number: 717111 Rank: JWO Age: 49

Sex: Female

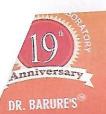
Unit: 9 BRD

Name: K C GAHALOT

Diagnosis: : CH MYALGIA

S.No	RIA Test Name	Patient Value	Normal Range
1	Free Tri-Idiothyroxine (FT3)	3.04 pg/ml	Adults 2.4 to 4.2
2	Free Thyroxine (FT4)	0.91 ng/di	Adults 0.8 to 1.7
3 :	Thyroid Stimulating Hormone	13.31 uIU/ml	Adults
			.5 to 6.5

Q-3-COGY DCC Computerised report signature not required





# DR. BARURE'S NIDAN PATHOLOGY LABORATORY

LARGEST PATHOLOGY LABORATORY IN CHANDANNAGAR, WAGHOLI.

First Floor, Near Pathare High school, In Front of Ganpati Temple, Above Chamunda Jewellery, Chandan Nagar, Bhaji Mandai, Pune - 14. Mobile No: 9822834218 / 9767726282, Office No: 020-27019812

## **d**Glo

EMERGENCY 24 HRS SERVICE

Uार्वेशॉलॉजी लॅबोरेटरी 06000 मिन्नाइ FACILITY BY APPOINTMENT

Reg No

: 201906019450692 / OPD

Name Referred Dr : Mrs. MENA GAHLOT : DR. GEETA PAWAR

Serial No

: 6383

## Jeevan Health Preventive Health Check-up

Timing: Monday to Saturday 7.30 a.m. to 9.30 p.m.

Sunday 7.30 a.m. to 2 p.m.

: Female / 49Y Sex / Age

: 20/06/2019 10:31 AM Reg Date

: 21/06/2019 08:53 AM Report Date

Serial No . 0000			
501.01.710	SPECIAL TEST		
Test Name	Result	Unit	Reference Range
Thyroid Profile - Total T3,Total T	4,TSH (TFT)		20.000
Total T3	124.84	ng/dL	60 - 200
Serum, Method: CLIA	7.27	g/dL	4.5 - 12.0
Total T4 Serum, Method: CLIA	E 29/	IU/ml	0.35 - 5.5
TSH (Thyroid Stimulating Hormon Serum, Method: CLIA	ne) 5.384	.5///	

#### Interpretation:

1. Triodothyronine (T3) is produced by the thyroid gland and along with thyroxine (T4) help control the rate at which the body uses energy. Elevated T3 denote hyperthyroidism while low levels indicate

2. The most common causes of thyroid dysfunction are related to autoimmune disorders. Graves disease causes hyperthyroidism, but it can also be caused by thyroiditis, thyroid cancer, and excessive

production of TSH. Total T3 is used to assess thyroid function.

3. Elevated T4 levels may indicate hyperthyroidism. They may also indicate other thyroid problems, such as thyroiditis or toxic multinodular goiter. Abnormally low levels of T4 may indicate dietary issues, such as fasting, malnutrition, or an iodine deficiency, medications that affect protein levels,

4. Thyroid-stimulating hormone (TSH) stimulates the production and release of T4 (primarily) and T3. They help control the rate at which the body uses energy and are regulated by a feedback system. Most of the T4 circulates in the blood bound to protein, while a small percentage is free (not bound).

5. Thyroid hormone status during pregnancy:

Pregnancy stage	TSH (µIU/ml)	T3 (ng/dl)	T4 (µg/dL) 6.5-10.1
First trimester Second trimester Third trimester	0.1-2.	5 71-175 91-195 104-182	7.5-10.3 6.3-9.7



