

# 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

DR. BARURE'S  
Trust on us  
Prime Health Care Provider

Jeevan Health Preventive Health Check-up

निदान

EMERGENCY 24 HRS SERVICE  
HOME FACILITY BY APPOINTMENT

Timing : Monday to Saturday 7.30 a.m. to 9.30 p.m.  
Sunday 7.30 a.m. to 2 p.m.

पॅथॉलॉजी लॅबोरेटरी 18100019302

Reg No : 201810019451029 / OPD  
Name : Ms. SHITAL KSHIRSAGAR  
Referred Dr : DR. GEETA PAWAR  
Serial No : 6436

Sex / Age : Female / 27 Y  
Reg Date : 24/10/2018 04:20 PM  
Report Date : 25/10/2018 11:45 AM

Test Name	SPECIAL TEST		
	Result	Unit	Reference Range
<b>Thyroid Profile - Total T3, Total T4, TSH (TFT)</b>			
Total T3 <small>Serum, Method: CLIA</small>	97.94	ng/dL	60 - 200
Total T4 <small>Serum, Method: CLIA</small>	6.7	g/dL	4.5 - 12.0
TSH (Thyroid Stimulating Hormone) <small>Serum, Method: CLIA</small>	<u>9.811</u>	IU/ml	0.35 - 5.5

**Interpretation :**

1. Triiodothyronine (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 hypothyroidism.
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, hypothyroidism, illness.
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)
First trimester	0.1-2	571-175	6.5-10.1
Second trimester	0.2-3.0	91-195	7.5-10.3
Third trimester	0.3-3.5	104-182	6.3-9.7

End of Report

Hypothyroid.

Dr. Chhaya Barure  
M.B.B.