PROCESSED AT :
Thyrocare
CP-67, Viraj Khand,
Gomti Nagar, Lucknow – 226 010

NAME : ALINA ASIF(25Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS
IRON	PHOTOMETRY	117	µg/dL
Bio. Ref. Interval. : Male : 65 - 175 Female : 50 - 170 **Method :** Ferrozine method without deproteinization			
TOTAL IRON BINDING CAPACITY (TIBC)	PHOTOMETRY	349	µg/dL
Bio. Ref. Interval. : Male: 225 - 535 µg/dl Female: 215 - 535 µg/dl **Method :** Spectrophotometric Assay			
% TRANSFERRIN SATURATION	CALCULATED	33	%
Bio. Ref. Interval. : 13 - 45 **Method :** Derived from IRON and TIBC values			
UNSAT.IRON-BINDING CAPACITY(UIBC)	PHOTOMETRY	232.18	µg/dL
Bio. Ref. Interval. : 162 - 368 **Method :** SPECTROPHOTOMETRIC ASSAY			

Please correlate with clinical conditions.

Sample Collected on (SCT) : 19 Sep 2023 12:01
Sample Received on (SRT) : 19 Sep 2023 18:13
Report Released on (RRT) : 19 Sep 2023 20:13
Sample Type : SERUM
Labcode : 1909090127/PP004
Barcode : BP752388

Dr.Shaffaly Gagneja MD (Path)

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TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TOTAL CHOLESTEROL	PHOTOMETRY	168	mg/dL	< 200
HDL CHOLESTEROL - DIRECT	PHOTOMETRY	57	mg/dL	40-60
LDL CHOLESTEROL - DIRECT	**PHOTOMETRY**	**102**	**mg/dL**	**< 100**
TRIGLYCERIDES	PHOTOMETRY	75	mg/dL	< 150
TC/ HDL CHOLESTEROL RATIO	**CALCULATED**	**3**	**Ratio**	**3 - 5**
TRIG / HDL RATIO	CALCULATED	1.32	Ratio	< 3.12
LDL / HDL RATIO	CALCULATED	1.8	Ratio	1.5-3.5
HDL / LDL RATIO	CALCULATED	0.56	Ratio	> 0.40
NON-HDL CHOLESTEROL	CALCULATED	110.77	mg/dL	< 160
VLDL CHOLESTEROL	CALCULATED	15.04	mg/dL	5 - 40

Please correlate with clinical conditions.

Method :

CHOL - Cholesterol Oxidase, Esterase, Peroxidase
HCHO - Direct Enzymatic Colorimetric
LDL - Direct Measure
TRIG - Enzymatic, End Point
TC/H - Derived from serum Cholesterol and Hdl values
TRI/H - Derived from TRIG and HDL Values
LDL/ - Derived from serum HDL and LDL Values
HD/LD - Derived from HDL and LDL values.
NHDL - Derived from serum Cholesterol and HDL values
VLDL - Derived from serum Triglyceride values

***REFERENCE RANGES AS PER NCEP ATP III GUIDELINES:**

TOTAL CHOLESTEROL	(mg/dl)	HDL	(mg/dl)	LDL	(mg/dl)	TRIGLYCERIDES	(mg/dl)
DESIRABLE	<200	LOW	<40	OPTIMAL	<100	NORMAL	<150
BORDERLINE HIGH	200-239	HIGH	>60	NEAR OPTIMAL	100-129	BORDERLINE HIGH	150-199
HIGH	>240			BORDERLINE HIGH	130-159	HIGH	200-499
				HIGH	160-189	VERY HIGH	>500
				VERY HIGH	>190		

Alert !!! 10-12 hours fasting is mandatory for lipid parameters. If not, values might fluctuate.

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NAME : ALINA ASIF(25Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALKALINE PHOSPHATASE	PHOTOMETRY	107.86	U/L	45-129
BILIRUBIN - TOTAL	PHOTOMETRY	0.87	mg/dL	0.3-1.2
BILIRUBIN -DIRECT	PHOTOMETRY	0.18	mg/dL	< 0.3
BILIRUBIN (INDIRECT)	CALCULATED	0.69	mg/dL	0-0.9
GAMMA GLUTAMYL TRANSFERASE (GGT)	PHOTOMETRY	10.89	U/L	< 38
ASPARTATE AMINOTRANSFERASE (SGOT)	PHOTOMETRY	24.95	U/L	< 31
ALANINE TRANSAMINASE (SGPT)	PHOTOMETRY	20.4	U/L	< 34
SGOT / SGPT RATIO	CALCULATED	1.22	Ratio	< 2
PROTEIN - TOTAL	PHOTOMETRY	7.01	gm/dL	5.7-8.2
ALBUMIN - SERUM	PHOTOMETRY	4.18	gm/dL	3.2-4.8
SERUM GLOBULIN	CALCULATED	2.83	gm/dL	2.5-3.4
SERUM ALB/GLOBULIN RATIO	CALCULATED	1.48	Ratio	0.9 - 2

Please correlate with clinical conditions.

Method :

ALKP - Modified IFCC method
BILT - Vanadate Oxidation
BILD - Vanadate Oxidation
BILI - Derived from serum Total and Direct Bilirubin values
GGT - Modified IFCC method
SGOT - IFCC* Without Pyridoxal Phosphate Activation
SGPT - IFCC* Without Pyridoxal Phosphate Activation
OT/PT - Derived from SGOT and SGPT values.
PROT - Biuret Method
SALB - Albumin Bcg[1]method (Colorimetric Assay Endpoint)
SEGB - DERIVED FROM SERUM ALBUMIN AND PROTEIN VALUES
A/GR - Derived from serum Albumin and Protein values

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TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
BLOOD UREA NITROGEN (BUN)	PHOTOMETRY	10.87	mg/dL	7.94 - 20.07
CREATININE - SERUM	PHOTOMETRY	0.6	mg/dL	0.55-1.02
BUN / SR.CREATININE RATIO	CALCULATED	18.12	Ratio	9:1-23:1
UREA (CALCULATED)	CALCULATED	23.26	mg/dL	Adult : 17-43
UREA / SR.CREATININE RATIO	CALCULATED	38.77	Ratio	< 52
CALCIUM	PHOTOMETRY	9.63	mg/dL	8.8-10.6
URIC ACID	PHOTOMETRY	4.9	mg/dL	3.2 - 6.1

Please correlate with clinical conditions.

Method :

BUN - Kinetic UV Assay.
SCRE - Creatinine Enzymatic method
B/CR - Derived from serum Bun and Creatinine values
UREAC - Derived from BUN Value.
UR/CR - Derived from UREA and Sr.Creatinine values.
CALC - Arsenazo III Method, End Point.
URIC - Uricase / Peroxidase Method

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*9 out of 10 Doctors Trust that Thyrocare Reports are **Accurate & Reliable***

NAME : ALINA ASIF(25Y/F)
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TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TOTAL TRIIODOTHYRONINE (T3)	E.C.L.I.A	112	ng/dL	80-200
TOTAL THYROXINE (T4)	E.C.L.I.A	8.94	µg/dL	4.8-12.7
TSH - ULTRASENSITIVE	E.C.L.I.A	5.09	µIU/mL	0.54-5.30

Comments : ***

The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

Method :

T3 - Fully Automated Electrochemiluminescence Compititive Immunoassay
T4 - Fully Automated Electrochemiluminescence Compititive Immunoassay
USTSH - Fully Automated Electrochemiluminescence Sandwich Immunoassay

Pregnancy reference ranges for TSH/USTSH :
Trimester || T3 (ng/dl) || T4 (µg/dl) || TSH/USTSH (µIU/ml)
1st || 83.9-196.6 || 4.4-11.5 || 0.1-2.5
2nd || 86.1-217.4 || 4.9-12.2 || 0.2-3.0
3rd || 79.9-186 || 5.1-13.2 || 0.3-3.5

References :

1. Carol Devilia, C I Parhon. First Trimester Pregnancy ranges for Serum TSH and Thyroid Tumor reclassified as Benign. Acta Endocrinol. 2016; 12(2) : 242 - 243
2. Kulhari K, Negi R, Kalra DK et al. Establishing Trimester specific Reference ranges for thyroid hormones in Indian women with normal pregnancy : New light through old window. Indian Journal of Contemporary medical research. 2019; 6(4)

Disclaimer : Results should always be interpreted using the reference range provided by the laboratory that performed the test. Different laboratories do tests using different technologies, methods and using different reagents which may cause difference. In reference ranges and hence it is recommended to interpret result with assay specific reference ranges provided in the reports. To diagnose and monitor therapy doses, it is recommended to get tested every time at the same Laboratory.

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HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS
EST. GLOMERULAR FILTRATION RATE (eGFR)	CALCULATED	127	mL/min/1.73 m2

Bio. Ref. Interval. :-

> = 90 : Normal
60 - 89 : Mild Decrease
45 - 59 : Mild to Moderate Decrease
30 - 44 : Moderate to Severe Decrease
15 - 29 : Severe Decrease

Clinical Significance

The normal serum creatinine reference interval does not necessarily reflect a normal GFR for a patient. Because mild and moderate kidney injury is poorly inferred from serum creatinine alone. Thus, it is recommended for clinical laboratories to routinely estimate glomerular filtration rate (eGFR), a "gold standard" measurement for assessment of renal function, and report the value when serum creatinine is measured for patients 18 and older, when appropriate and feasible. It cannot be measured easily in clinical practice, instead, GFR is estimated from equations using serum creatinine, age, race and sex. This provides easy to interpret information for the doctor and patient on the degree of renal impairment since it approximately equates to the percentage of kidney function remaining. Application of CKD-EPI equation together with the other diagnostic tools in renal medicine will further improve the detection and management of patients with CKD.

Reference

Levey AS, Stevens LA, Schmid CH, Zhang YL, Castro AF, 3rd, Feldman HI, et al. A new equation to estimate glomerular filtration rate. Ann Intern Med. 2009;150(9):604-12.

Please correlate with clinical conditions.
Method:- CKD-EPI Creatinine Equation

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TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	TECHNOLOGY	VALUE	UNITS
HbA1c - (HPLC)			
	H.P.L.C	5.3	%

Bio. Ref. Interval. :

Bio. Ref. Interval.: As per ADA Guidelines	Guidance For Known Diabetics
Below 5.7% : Normal 5.7% - 6.4% : Prediabetic >=6.5% : Diabetic	Below 6.5% : Good Control 6.5% - 7% : Fair Control 7.0% - 8% : Unsatisfactory Control >8% : Poor Control

Method : Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	105	mg/dL

Bio. Ref. Interval. :

90 - 120 mg/dl : Good Control
121 - 150 mg/dl : Fair Control
151 - 180 mg/dl : Unsatisfactory Control
> 180 mg/dl : Poor Control

Method : Derived from HBA1c values

Please correlate with clinical conditions.

Sample Collected on (SCT) : 19 Sep 2023 12:01
Sample Received on (SRT) : 19 Sep 2023 18:10
Report Released on (RRT) : 19 Sep 2023 19:37
Sample Type : EDTA
Labcode : 1909090044/PP004
Barcode : BP758707

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NAME : ALINA ASIF(25Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	VALUE	UNITS	Bio. Ref. Interval.
TOTAL LEUCOCYTES COUNT (WBC)	5.62	X 10³ / µL	4.0 - 10.0
NEUTROPHILS	52.5	%	40-80
LYMPHOCYTE	**41.8**	**%**	**20-40**
MONOCYTES	3.4	%	2-10
EOSINOPHILS	1.6	%	1-6
BASOPHILS	0.5	%	0-2
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	0.2	%	0.0-0.4
NEUTROPHILS - ABSOLUTE COUNT	2.95	X 10³ / µL	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	2.35	X 10³ / µL	1.0-3.0
MONOCYTES - ABSOLUTE COUNT	**0.19**	**X 10³ / µL**	**0.2 - 1.0**
BASOPHILS - ABSOLUTE COUNT	0.03	X 10³ / µL	0.02 - 0.1
EOSINOPHILS - ABSOLUTE COUNT	0.09	X 10³ / µL	0.02 - 0.5
IMMATURE GRANULOCYTES(IG)	0.01	X 10³ / µL	0.0-0.3
TOTAL RBC	4.29	X 10^6/µL	3.8-4.8
NUCLEATED RED BLOOD CELLS	0.01	X 10³ / µL	0.0-0.5
NUCLEATED RED BLOOD CELLS %	0.01	%	0.0-5.0
HEMOGLOBIN	12.5	g/dL	12.0-15.0
HEMATOCRIT(PCV)	41.8	%	36.0-46.0
MEAN CORPUSCULAR VOLUME(MCV)	97.4	fL	83.0-101.0
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	29.1	pq	27.0-32.0
MEAN CORP.HEMO.CONC(MCHC)	**29.9**	**g/dL**	**31.5-34.5**
RED CELL DISTRIBUTION WIDTH - SD(RDW-SD)	**50.4**	**fL**	**39.0-46.0**
RED CELL DISTRIBUTION WIDTH (RDW-CV)	14	%	11.6-14.0
PLATELET DISTRIBUTION WIDTH(PDW)	**24.8**	**fL**	**9.6-15.2**
MEAN PLATELET VOLUME(MPV)	**14.9**	**fL**	**6.5-12**
PLATELET COUNT	**135**	**X 10³ / µL**	**150-410**
PLATELET TO LARGE CELL RATIO(PLCR)	**62.9**	**%**	**19.7-42.4**
PLATELETCRIT(PCT)	**0.15**	**%**	**0.19-0.39**

Remarks : Alert!!!Platelets: Mildly reduced in smear. Macroplatelets are seen.

Please Correlate with clinical conditions.
Method : Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)
(This device performs hematology analyses according to the Hydrodynamic Focussing (DC method), Flow Cytometry Method (using a semiconductor laser), and SLS- hemoglobin method)

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Sample Type : EDTA
Labcode : 1909090044/PP004
Barcode : BP758707

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NAME : ALINA ASIF(25Y/F)
REF. BY : SELF
TEST ASKED : AAROGYAM BASIC 2

HOME COLLECTION :
FLAT NO 201 NAVEEN ENCLAVE JAIL ROAD CIVIL LINES KANPUR NEAR BANDHAN GUEST HOUSE

TEST NAME	OBSERVATION	UNITS	Bio. Ref. Interval.
Complete Urinogram			
Physical Examination			
VOLUME	3	mL	-
COLOUR	PALE YELLOW	-	Pale Yellow
APPEARANCE	CLEAR	-	Clear
SPECIFIC GRAVITY	1.01	-	1.003-1.030
PH	6	-	5-8
Chemical Examination			
URINARY PROTEIN	ABSENT	mg/dL	Absent
URINARY GLUCOSE	ABSENT	mg/dL	Absent
URINE KETONE	ABSENT	mg/dL	Absent
URINARY BILIRUBIN	ABSENT	mg/dL	Absent
UROBILINOGEN	Normal	mg/dL	<=0.2
BILE SALT	ABSENT	-	Absent
BILE PIGMENT	ABSENT	-	Absent
URINE BLOOD	ABSENT	-	Absent
NITRITE	ABSENT	-	Absent
MICROALBUMIN	10	mg/L	< 30
Microscopic Examination			
MUCUS	ABSENT	-	Absent
RED BLOOD CELLS	ABSENT	cells/HPF	0-5
URINARY LEUCOCYTES (PUS CELLS)	ABSENT	cells/HPF	0-5
EPITHELIAL CELLS	3	cells/HPF	0-5
CASTS	ABSENT	-	Absent
CRYSTALS	ABSENT	-	Absent
BACTERIA	ABSENT	-	Absent
YEAST	**PRESENT**	**-**	**Absent**
PARASITE	ABSENT	-	Absent

Method : Fully Automated DIRUI H-100 Urinalysis Dipstick Method, Microscopy

~~ End of report ~~

Sample Collected on (SCT) : 19 Sep 2023 12:01
Sample Received on (SRT) : 19 Sep 2023 18:11
Report Released on (RRT) : 19 Sep 2023 19:54
Sample Type : URINE
Labcode : 1909090074/PP004
Barcode : Y6355950

Dr.Shaffaly Gagneja MD (Path)

CONDITIONS OF REPORTING

- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- This report is not valid for medico-legal purpose.
- Neither Thyrocare, nor its employees/representatives assume any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report.
- Thyrocare Discovery video link :- https://youtu.be/nbdYeRgYyQc
- For clinical support please contact @8450950852,8450950853,8450950854 between 10:00 to 18:00

EXPLANATIONS

- Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- **Name** - The name is as declared by the client and recored by the personnel who collected the specimen.
- **Ref.Dr** - The name of the doctor who has recommended testing as declared by the client.
- **Labcode** - This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- **Barcode** - This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- **SCP** - Specimen Collection Point - This is the location where the blood or specimen was collected as declared by the client.
- **SCT** - Specimen Collection Time - The time when specimen was collected as declared by the client.
- **SRT** - Specimen Receiving Time - This time when the specimen reached our laboratory.
- **RRT** - Report Releasing Time - The time when our pathologist has released the values for Reporting.
- **Reference Range** - Means the range of values in which 95% of the normal population would fall.

SUGGESTIONS

- Values out of reference range requires reconfirmation before starting any medical treatment.
- Retesting is needed if you suspect any quality shortcomings.
- Testing or retesting should be done in accredited laboratories.
- For suggestions, complaints or feedback, write to us at **info@thyrocare.com** or call us on **022-3090 0000 / 6712 3400**
- SMS:<Labcode No.> to **9870666333**