

Registered Office:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana.

ICMR Reg .No. SAPALAPVLHT (Covid -19)

Ph:- 040-40125441, Email:- info@sagepathlabs.com

→ Website:- www.sagepathlabs.com

REPORT

Name : Mrs. PADMA Sample ID : 24863769

Age/Gender : 40 Years/Female Reg. No : 0312310040035

Referred by : Dr. Nivedita Ashrit MD (Obs/Gyn) SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 04-Oct-2023 01:01 PM
Primary Sample : Whole Blood Received On : 04-Oct-2023 04:07 PM

Sample Tested In : Serum Reported On : 04-Oct-2023 05:48 PM

Client Address : Kimtee colony , Gokul Nagar, Tarnaka Report Status : Final Report

CLINICAL BIOCHEMISTRY

Test Name Results Units Ref. Range Method	Test Name	Results	Units	Ref. Range	Method
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C-Reactive protein-(CRP) 10.21 mg/L Upto:6.0 Immunoturbidimetry

Interpretation:

C-reactive protein (CRP) is produced by the liver. The level of CRP rises when there is inflammation throughout the body. It is one of a group of proteins called acute phase reactants that go up in response to inflammation. The levels of acute phase reactants increase in response to certain inflammatory proteins called cytokines. These proteins are produced by white blood cells during inflammation.

A positive test means you have inflammation in the body. This may be due to a variety of conditions, including:

- Connective tissue disease
- Heart attack
- Infection
- Inflammatory bowel disease (IBD)
- Lupus
- Pneumonia
- Rheumatoid arthritis

Result rechecked and verified for abnormal cases

*** End Of Report ***







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Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 04-Oct-2023 01:01 PM
Primary Sample : Whole Blood Received On : 04-Oct-2023 04:07 PM
Sample Tested In : Whole Blood EDTA Reported On : 04-Oct-2023 04:32 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

HAEMATOLOGY						
Test Name	Results	Units	Ref. Range	Method		
Complete Blood Picture(CBP)						
Haemoglobin (Hb)	10.1	g/dL	12-15	Cynmeth Method		
Haematocrit (HCT)	32.3	%	40-50	Calculated		
RBC Count	4.30	10^12/L	4.5-5.5	Cell Impedence		
MCV	70	fl	81-101	Calculated		
MCH	21.9	pg	27-32	Calculated		
MCHC	31.3	g/dL	32.5-34.5	Calculated		
RDW-CV	15.5	%	11.6-14.0	Calculated		
Platelet Count (PLT)	344	10^9/L	150-410	Cell Impedance		
Total WBC Count	7.7	10^9/L	4.0-10.0	Impedance		
Differential Leucocyte Count (DC)						
Neutrophils	63	%	40-70	Cell Impedence		
Lymphocytes	30	%	20-40	Cell Impedence		
Monocytes	05	%	2-10	Microscopy		
Eosinophils	02	%	1-6	Microscopy		
Basophils	00	%	1-2	Microscopy		
Absolute Neutrophils Count	4.85	10^9/L	2.0-7.0	Impedence		
Absolute Lymphocyte Count	2.31	10^9/L	1.0-3.0	Impedence		
Absolute Monocyte Count	0.39	10^9/L	0.2-1.0	Calculated		
Absolute Eosinophils Count	0.15	10^9/L	0.02-0.5	Calculated		
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated		
Morphology	Anisocytosis	with Microcy	ic hypochromic anemia	PAPs Staining		

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited







Swarnabala - M DR.SWARNA BALA MD PATHOLOGY



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Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 04-Oct-2023 01:01 PM
Primary Sample : Whole Blood Received On : 04-Oct-2023 04:07 PM
Sample Tested In : Serum Reported On : 04-Oct-2023 04:57 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

CLINICAL BIOCHEMISTRY

OLINIOAE BIOGREGIA					
Test Name	Results	Units	Ref. Range	Method	

TSH -Thyroid Stimulating Hormone 4.07 µIU/mL 0.35-5.5 CLIA

Pregnancy & Cord Blood

		TSH (Thyroid Stimulating Hormone (μIU/mL)
First Trimester	: 0.24-2.99	
Second Trimester	r: 0.46-2.95	
Third Trimester	: 0.43-2.78	
Cord Blood	: 2.3-13.2	

- TSH is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production.
- TSH interacts with specific cell receptors on the thyroid cell surface and exerts two main actions. The first action is to stimulate cell reproduction and hypertrophy. Secondly, TSH stimulates the thyroid gland to synthesize and secrete T3 and T4
- The ability to quantitate circulating levels of TSH is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low
- TRH stimulation differentiates secondary and tertiary hypothyroidism by observing the change in patient TSH levels. Typically, the TSH response to TRH stimulation is absent in cases of secondary hypothyroidism, and normal to exaggerated in tertiary hypothyroidism
- Historically, TRH stimulation has been used to confirm primary hyperthyroidism, indicated by elevated T3 and T4 levels and low or undetectable TSH levels. TSH assays with increased sensitivity and specificity provide a primary diagnostic tool to differentiate hyperthyroid from euthyroid patients.











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Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 04-Oct-2023 01:01 PM Primary Sample : 04-Oct-2023 04:07 PM Received On

Sample Tested In : Urine Reported On : 04-Oct-2023 05:16 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status Final Report

CLINICAL PATHOLOGY

Test Name	Results	Units	Ref. Range	Method	

Complete Urine Analysis (CUE)

Physical Examination

Pale Yellow Colour Straw to light amber

Appearance Clear Clear

Chemical Examination

Negative Strip Reflectance Glucose Negative Protein Absent Negative Strip Reflectance Bilirubin (Bile) Negative Negative Strip Reflectance Urobilinogen Negative Negative Ehrlichs reagent Ketone Bodies Negative Negative Strip Reflectance Specific Gravity 1.015 1.000 - 1.030 Strip Reflectance Blood Negative Negative Strip Reflectance 6.0 5.0 - 8.5 Reaction (pH)

Reagent strip Reflectance -Double indicator Principle

Nitrites Negative Negative Strip Reflectance

Leukocyte esterase Negative Reagent Strip Reflectance Negative

Microscopic Examination (Microscopy)

PUS(WBC) Cells 02-03 /hpf 00-05 Microscopy R.B.C. Nil /hpf Nil Microscopic **Epithelial Cells** 01-02 /hpf 00-05 Microscopic Casts Absent Absent Microscopic Absent Absent Microscopic Crystals Nil Nil Bacteria

Budding Yeast Cells Nil Absent Microscopy

Others Microscopic

Comments:

Urine analysis is one of the most useful laboratory tests as it identifies a wide range of medical conditions including renal damage, urinary tract infections, diabetes, hypertension and drug

Correlate Clinically.

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*** End Of Report ***







Swarnabala-M DR.SWARNA BALA MD PATHOLOGY