

Sagepath Labs Pvt. Ltd. Registered Office:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana. ICMR Reg .No. SAPALAPVLHT (Covid -19) Website:-www.sagepathlabs.com

REPORT						
Name	: Miss. AKHILA	Sample ID	: 24754117			
Age/Gender	: 27 Years/Female	Reg. No	: 0312312130008			
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172			
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 13-Dec-2023 10:21 AM			
Primary Sample	: Whole Blood	Received On	: 13-Dec-2023 12:47 PM			
Sample Tested In	: Whole Blood EDTA	Reported On	: 13-Dec-2023 01:37 PM			
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report			

HAEMATOLOGY							
Test Name Results Units Ref. Range Method							
Complete Blood Count (CBC)							
Haemoglobin (Hb)	12.8	g/dL	12-15	Cynmeth Method			
RBC Count	4.64	10^12/L	4.5-5.5	Cell Impedence			
Total WBC Count	5.1	10^9/L	4.0-10.0	Impedance			
Platelet Count (PLT)	194	10^9/L	150-410	Cell Impedance			
Haematocrit (HCT)	39.4	%	40-50	Calculated			
MCV	85	fl	81-101	Calculated			
MCH	27.5	pg	27-32	Calculated			
MCHC	32.4	g/dL	32.5-34.5	Calculated			
RDW-CV	13.8	%	11.6-14.0	Calculated			
Differential Count by Flowcytometry /Microscopy							
Neutrophils	48	%	40-70	Cell Impedence			
Lymphocytes	40	%	20-40	Cell Impedence			
Monocytes	08	%	2-10	Microscopy			
Eosinophils	04	%	1-6	Microscopy			
Basophils	0	%	1-2	Microscopy			
<u>Smear</u>							
WBC	Within norr	nal limits.					
RBC	Normocytic	c normochromic	c blood picture				
Platelets	Adequate			Microscopy			
Result rechecked and verified for abr		Of Report **	*				

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*TESTS CONDUCTED @ CENTRAL LAB, HYDERABAD



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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 13-Dec-2023 10:21 AM			
Primary Sample	: Whole Blood	Received On	: 13-Dec-2023 12:47 PM			
Sample Tested In	: Serum	Reported On	: 13-Dec-2023 01:38 PM			
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report			

		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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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Primary Sample	: Whole Blood	Received On	: 13-Dec-2023 12:47 PM			
Sample Tested In	: Serum	Reported On	: 13-Dec-2023 02:24 PM			
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report			

CLINICAL BIOCHEMISTRY								
Test Name Results Units Ref. Range Method								
154	mg/dL	< 200	CHOD-POD					
55	mg/dL	< 150	GPO-POD					
48	mg/dL	40-60	Direct					
95	mg/dL	< 100	Calculated					
11	mg/dL	7-35	Calculated					
106	mg/dL	< 130	Calculated					
3.21	%	0-4.0	Calculated					
0.51								
1.98	%	0-3.5	Calculated					
	Results 154 55 48 95 11 106 3.21 0.51	Results Units 154 mg/dL 55 mg/dL 48 mg/dL 95 mg/dL 11 mg/dL 106 mg/dL 3.21 % 0.51 %	Results Units Ref. Range 154 mg/dL < 200					

The National Cholesterol Education program's third Adult Treatment Panel (ATPIII) has issued its recommendations on evaluating and treating lipid discorders for primary and secondary.

NCEP Recommendations	Cholesterol Total in (mg/dL)	Triglycerides in (mg/dL)	HDL Cholesterol (mg/dL)	LDL Cholesterol	Non HDL Cholesterol in (mg/dL)
Ontimal	Adult: < 200 Children: < 170	< 150	40-59	Adult:<100 Children: <110	<130
Above Optimal				100-129	130 - 159
Borderline High	Adult: 200-239 Children:171-199	150-199		Adult: 130-159 Children: 111-129	160 - 189
High	Adult:>or=240 Children:>or=200	200-499	≥ 60	Adult:160-189 Children:>or=130	190 - 219
Very High		>or=500		Adult: >or=190 	>=220

Note: LDL cholesterol cannot be calculated if triglyceride is >400 mg/dL (Friedewald's formula). Calculated values not provided for LDL and VLDL

Correlate Clinically.

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*** End Of Report ***





ac-MF



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