SagePath®
Excellence In Health Care

Sagepath Labs Pvt. Ltd.

Lab Address:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana.
ICMR Reg .No. SAPALAPVLHT (Covid -19)

REPORT

Name	: Mrs. TABASSUM	Sample ID	: A0934439
Age/Gender	: 29 Years/Female	Reg. No	: 0312409180012
Referred by	: Dr. Nivedita Ashrit MD (Obs/Gyn)	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Sep-2024 11:16 AM
Primary Sample	: Whole Blood	Received On	: 18-Sep-2024 04:28 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 18-Sep-2024 05:09 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)	12.1	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	**33.8**	%	40-50	Calculated
RBC Count	4.37	10^12/L	3.8-4.8	Cell Impedence
MCV	**77**	fl	81-101	Calculated
MCH	27.7	pg	27-32	Calculated
MCHC	33.5	g/dL	32.5-34.5	Calculated
RDW-CV	**15.6**	%	11.6-14.0	Calculated
Platelet Count (PLT)	339	10^9/L	150-410	Cell Impedance
Total WBC Count	**11.2**	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	70	%	40-70	Cell Impedence
Lymphocytes	23	%	20-40	Cell Impedence
Monocytes	05	%	2-10	Microscopy
Eosinophils	02	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	**7.84**	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.58	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.56	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.22	10^9/L	0.02-0.5	Calculated
Absolute Basophil lCount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	Anisocytosis with Normocytic normochromic with Mild Leucocytosis			PAPs Staining

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DR.SWARNA BALA
MD PATHOLOGY

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REPORT

Name	: Mrs. TABASSUM	Sample ID	: A0934440
Age/Gender	: 29 Years/Female	Reg. No	: 0312409180012
Referred by	: Dr. Nivedita Ashrit MD (Obs/Gyn)	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Sep-2024 11:16 AM
Primary Sample	: Whole Blood	Received On	: 18-Sep-2024 04:28 PM
Sample Tested In	: Serum	Reported On	: 18-Sep-2024 05:50 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
CA125 - Cancer Marker	12.1	U/mL	< 35.0	CLIA

Interpretation:

The CA-125 blood test measures the level of the protein CA-125 in the blood.CA-125 is a protein that is found more in ovarian cancer cells than in other cells.
This blood test is often used to monitor women who have been diagnosed with ovarian cancer. The test is useful if the CA-125 level was high when the cancer was first diagnosed. In these cases, measuring the CA-125 over time is a good tool to determine if ovarian cancer treatment is working.
The CA-125 test may also be done if a woman has symptoms or findings on ultrasound that suggest ovarian cancer.
In general, this test is not used to screen healthy women for ovarian cancer when a diagnosis has not yet been made.
In a woman who has ovarian cancer, a rise in CA-125 usually means that the disease has progressed or come back (recurred). A decrease in CA-125 usually means the disease is responding to current treatment.
In a woman who has not been diagnosed with ovarian cancer, a rise in CA-125 may mean a number of things. While it may mean that she has ovarian cancer, it can also indicate other types of cancer, as well as several other diseases, such as endometriosis, which are not cancer.
In healthy women, an elevated CA-125 usually does not mean ovarian cancer is present. Most healthy women with an elevated CA-125 do not have ovarian cancer, or any other cancer.
Any woman with an abnormal CA-125 test needs further tests. Sometimes surgery is needed to confirm the cause.

PRL(Prolactin)	14.83	ng/mL	Refer Table	CLIA

Interpretation:

Age	Reference Range: Male (ng/mL)	Reference Range: Female(ng/mL)
Puberty Tanner Stage		
1	< 10.0	3.6-12.0
2-3	< 6.1	2.6-18.0
4-5	2.8-11.0	3.2-20.0
Adult	2.1-17.7	Nonpregnant :2.8–29.2 Pregnant :9.7–208.5 Postmenopausal :1.8–20.3

- Prolactin is a 23kD sized hormone produced by the lactotroph cells of the pituitary gland, a grape-sized organ found at the base of the brain. Normally present in low amounts in men and non-pregnant women, prolactin's main role is to promote lactation (breast milk production).
- Breast milk production that is not related to childbirth (galactorrhea)
- Erection problems in men
- Irregular or no menstrual periods (amenorrhea)

*** End Of Report ***

Laboratory is NABL Accredited

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DR.VAISHNAVI
MD BIOCHEMISTRY

Result rechecked and verified for abnormal cases

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Sample Tested In	: Serum	Reported On	: 18-Sep-2024 05:46 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Thyroid Profile-I(TFT)				
T3 (Triiodothyronine)	129.65	ng/dL	70-204	CLIA
T4 (Thyroxine)	11.1	µg/dL	3.2-12.6	CLIA
TSH -Thyroid Stimulating Hormone	3.68	µIU/mL	0.35-5.5	CLIA

Pregnancy & Cord Blood

T3 (Triiodothyronine):	T4 (Thyroxine)	TSH (Thyroid Stimulating Hormone)
First Trimester : 81-190 ng/dL	15 to 40 weeks:9.1-14.0 µg/dL	First Trimester : 0.24-2.99 µIU/mL
Second&Third Trimester :100-260 ng/dL		Second Trimester: 0.46-2.95 µIU/mL
		Third Trimester : 0.43-2.78 µIU/mL
Cord Blood: 30-70 ng/dL	Cord Blood: 7.4-13.0 µg/dL	Cord Blood: : 2.3-13.2 µIU/mL

Interpretation:

- Thyroid gland is a butterfly-shaped endocrine gland that is normally located in the lower front of the neck. The thyroid's job is to make thyroid hormones, which are secreted into the blood and then carried to every tissue in the body. Thyroid hormones help the body use energy, stay warm and keep the brain, heart, muscles, and other organs working as they should.
- Thyroid produces two major hormones: triiodothyronine (T3) and thyroxine (T4). If thyroid gland doesn't produce enough of these hormones, you may experience symptoms such as weight gain, lack of energy, and depression. This condition is called hypothyroidism.
- Thyroid gland produces too many hormones, you may experience weight loss, high levels of anxiety, tremors, and a sense of being on a high. This is called hyperthyroidism.
- 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.

Correlate Clinically.

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*** End Of Report ***

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