

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 LABORATORY TEST

Name Sample ID	: Mrs. SAJIDA : A0451499			
Age/Gender	: 21 Years/Female	Reg. No	: 0312409260005	
Referred by	: Dr. PADMAJA	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 26-Sep-2024 08:39 AM	
Primary Sample	: Whole Blood	Received On	: 26-Sep-2024 12:46 PM	
Sample Tested In	: Whole Blood EDTA	Reported On	: 26-Sep-2024 01:55 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

HAEMATOLOGY				
Test Name	Results	Units	Biological Reference Interval	
(Method: Cymreth Method)	7.7	g/dL	12-15	





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LABORATORY TEST REPORT

	Name : Mrs. SAJIDA				
	Sample ID	: A0451501			
	Age/Gender : 21 Years/Female		Reg. No	: 0312409260005	
L	Referred by	eferred by : Dr. PADMAJA		: SPL-CV-172	
L	Referring Customer: V CARE MEDICAL DIAGNOSTICSPrimary Sample: Whole BloodSample Tested In: SerumClient Address: Kimtee colony ,Gokul Nagar,Tarnaka		Collected On	: 26-Sep-2024 08:39 AM	
L			Received On	: 26-Sep-2024 12:46 PM	
L			Reported On	: 26-Sep-2024 02:04 PM	
			Report Status	: Final Report	

lient Address : Kimtee colony ,Gokul Nagar,Tarnaka		naka	Report Status	: Final Report		
CLINICAL BIOCHEMISTRY						
Test Name		Results	Units	Biological Refere	nce Interval	
TSH -Thyroid Stim	nulating Hormone	<u>6.42</u>	µIU/mL	0.35-5.5		
Pregnancy & Cord Blood	l					
	TSH (Thyroid Stimulating	g Hormone (μIU/mL)				
First Trimester : 0.24-2	2.99					
Second Trimester : 0.46-2	.95					
Third Trimester : 0.43-2	2.78					
Cord Blood : 2.3-13	3.2					

• 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.

*** End Of Report ***







