

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)

LABORATORY TEST REPORT

Name	: Ms. MANISHA		
Sample ID	: 24202363		
Age/Gender	: 28 Years/Female	Reg. No	: 0312411100046
Referred by	: Dr. K J N REDDY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 10-Nov-2024 07:14 PM
Primary Sample	: Whole Blood	Received On	: 10-Nov-2024 08:44 PM
Sample Tested In	: Serum	Reported On	: 10-Nov-2024 09:27 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY				
Test Name Results Units Biological Reference Interval		Biological Reference Interval		
C-Reactive protein-(CRP)	<u>13.0</u>	mg/L	Upto:6.0	

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

*** End Of Report ***



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Name	: Ms. MANISHA		
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Referred by	: Dr. K J N REDDY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 10-Nov-2024 07:14 PM
Primary Sample	: Whole Blood	Received On	: 10-Nov-2024 08:44 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 10-Nov-2024 10:09 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY					
Test Name	Results	Units	Biological Reference Interval		
Complete Blood Picture(CBP)					
Haemoglobin (Hb) (Methad: Cynneth Method)	12.1	g/dL	12-15		
Method: Calculated)	<u>37.0</u>	%	40-50		
RBC Count	4.23	10^12/L	3.8-4.8		
(Method: Calculated)	87	fl	81-101		
MCH (Method: Calculated)	28.6	pg	27-32		
MCHC	32.7	g/dL	32.5-34.5		
RDW-CV	13.2	%	11.6-14.0		
Platelet Count (PLT)	317	10^9/L	150-410		
Total WBC Count	5.8	10^9/L	4.0-10.0		
Differential Leucocyte Count (DC)					
Neutrophils (Method: Cell Impedence)	66	%	40-70 and Care		
Lymphocytes (Method: Cell Impedence)	25	%	20-40		
Monocytes	05	%	2-10		
Eosinophils (Method: Microscopy)	04	%	1-6		
Basophils	00	%	1-2		
	3.83	10^9/L	2.0-7.0		
Absolute Lymphocyte Count Method: Impedance)	1.45	10^9/L	1.0-3.0		
	0.29	10^9/L	0.2-1.0		
Absolute Eosinophils Count (Method: Calculated)	0.23	10^9/L	0.02-0.5		
Absolute Basophil ICount (Nethod: Calculated)	0.00	10^9/L	0.0-0.3		
Morphology (Method: PAPs Statning.)	Normocytic no	ormochromic W	/ith Adequate.		
Malarial Parasite (Identification)	Negative		Negative		

Comments : Malaria is protozoan parasitic infection, prevalent in the Tropical & Subtropical areas of the world. Four species of plasmodium paraties are responsible for malaria infections in human viz. P.Falciparum, p.Vivax, P.Ovale & P.malariae. Falciparum infections are associated with Cerebral malaria and drug resistance where as vivex infection is associated with high rate of infectivity and relapse. Differentiation between P.Falciparum and P.Vivex is utmost importance for better patient management and speedy recovery.





*** End Of Report ***

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Primary Sample	: Whole Blood	Received On	: 10-Nov-2024 08:44 PM
Sample Tested In	: Serum	Reported On	: 10-Nov-2024 09:17 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY				
Test Name	Results	Units	Biological Reference Interval	
Thyroid Profile-I(TFT)				
	108.66	ng/dL	70-204	
	9.2	µg/dL	3.2-12.6	
TSH -Thyroid Stimulating Hormone	3.67	µIU/mL	0.35-5.5	

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.

*** End Of Report ***







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