Thyrocare

Tests you can trust

Name : XXXXXXXXXXXXXXXXXXXXXXXXXXX

Date : XXXXXXXX

Test Asked : Allergy Asthma / Rhinitis Screening (by Phadia)

Report Status : Complete Report



First National Diagnostic Chain to have **100% of its Labs with NABL Accreditation#**

98% Reports released within **06 Hours** of sample reaching the lab+

9 out of 10 Doctors Trust that Thyrocare reports are **Accurate & Reliable***

1200+ **Tests & Profiles**

Temperature-Controlled Sample Logistics

Unique Barcode Tracking

Fully Automated Machines Inspected Daily

Abnormal Values Re-Checked Twice

Reports Verified By Expert MD Pathologists Stationed at Every Lab

Your reports are digitally verifiable

Scan the QR code inside the report to check authenticity of reported values

QR code will remain active for 30 days from report release date

Accredited by

NABL From 2005#

ISO 9001: 2015 - From 2015

CAP From 2007~

Dummy Report

Thyrocare
Tests you can trust

Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703. 9870666333 wellness@thyrocare.com

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Patient Name : XXXXXXXXXXXXX
Referred By : XXXXXXXXXXXXX
Sample Collected At : XXXXXXXXXXXXX

Tests Done : ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)

Report Availability Summary

Note: Please refer to the table below for status of your tests.

1 Ready | **0** Ready with Cancellation | **0** Processing | **0** Cancelled in Lab

TEST DETAILS	REPORT STATUS
ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)	Ready

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Patient Name	: XXXXXXXXXXXXX	Sample Collected on (SCT)	: XXXXXXXXXXXXX
Referred By	: XXXXXXXXXXXXX	Sample Received on (SRT)	: XXXXXXXXXXXXX
Sample Collected At	: XXXXXXXXXXXXX	Report Released on (RRT)	: XXXXXXXXXXXXX
		Sample Type | Barcode	: XXXXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALLERGY HOUSE DUST (BY PHADIA)	FEIA	0.23	kUA/L	< 0.35
ALLERGY HOUSE DUST MITE - DERMATOPHAGOIDES PTERONYSSINUS (BY PHADIA)	FEIA	0.22	kUA/L	< 0.35
ALLERGY HOUSE DUST MITE- DERMATOPHAGOIDES FARINAE (BY PHADIA)	FEIA	0.27	kUA/L	< 0.35
ALLERGY COCKROACH GERMAN (BY PHADIA)	FEIA	0.18	kUA/L	< 0.35

Please correlate with clinical conditions.

Method :

APDUS - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APHDP - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APHDF - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APCOC - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD

Dummy Report

Tests Done : ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)

Report Remarks : PatientId:AS28618048 Labcode:0801001080/IT001

Doctor 1 Sign **Doctor 2 Sign**

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Patient Name : XXXXXXXXXXXXX
Referred By : XXXXXXXXXXXXX
Sample Collected At : XXXXXXXXXXXXX

Sample Collected on (SCT) : XXXXXXXXXXXXX
Sample Received on (SRT) : XXXXXXXXXXXXX
Report Released on (RRT) : XXXXXXXXXXXXX
Sample Type | Barcode : XXXXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALLERGY PENICILLIUM CHRYSOGENUM (BY PHADIA)	FEIA	0.2	kUA/L	< 0.35
ALLERGY CLADOSPORIUM HERBARUM (BY PHADIA)	FEIA	0.19	kUA/L	< 0.35
ALLERGY ASPERGILLUS FUMIGATUS (BY PHADIA)	FEIA	0.25	kUA/L	< 0.35
ALLERGY ALTERNARIA ALTERNATA (BY PHADIA)	FEIA	0.15	kUA/L	< 0.35

Please correlate with clinical conditions.

Method :

APENC - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APCLA - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APASF - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APALT - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD

~~ End of report ~~

Dummy Report

Tests Done : ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)

Report Remarks : PatientId:AS28618048 Labcode:0801001080/IT001

Doctor 1 Sign

Doctor 2 Sign

CUSTOMER DETAILS

As declared in our data base

Name: XXXXXXXXXXXX **Age:** XX **Sex:** XX

Barcodes/Sample_Type	:	XXXXXXXXXXXXXXX
Labcode	:	XXXXXXXXXXXXXXX
Ref By	:	XXXXXXXXXXXXXXX
Sample_Type/Tests	:	SERUM SPL:ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)
Sample Collected At	:	XXXXXXXXXXXXXXX
Sample Collected on (SCT)	:	XXXXXXXXXXXXXXX
Report Released on (RRT)	:	XXXXXXXXXXXXXXX
Amount Collected	:	**XXXXXXXXXXXXXX**

Thyrocare,D-37/1,MIDC,Turbhe,Navi Mumbai - 400703. | Phone:022 - 6712 3400 |www.thyrocare.com | info@thyrocare.com

Dummy Report

CONDITIONS OF REPORTING

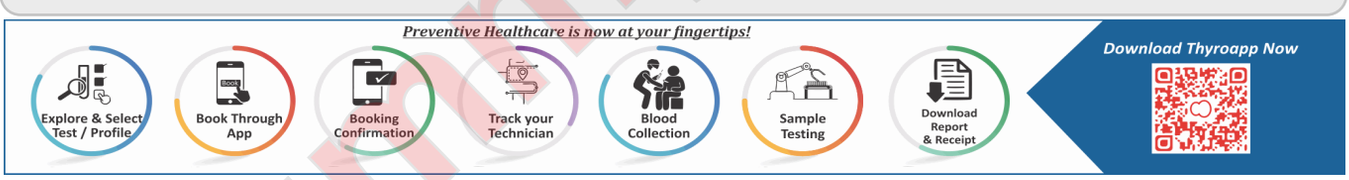
- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- This report is not valid for medico-legal purpose.
- Neither Thyrocare, nor its employees/representatives assume: (a) any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report, (b) any claims of any nature whatsoever arising from or relating to the performance of the requested tests as well as any claim for indirect, incidental or consequential damages. The total liability, in any case, of Thyrocare shall not exceed the total amount of invoice for the services provided and paid for.
- Thyrocare Discovery video link :- https://youtu.be/nbdYeRgYyQc

EXPLANATIONS

- Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- **Name** - The name is as declared by the client and recored by the personnel who collected the specimen.
- **Ref.Dr** - The name of the doctor who has recommended testing as declared by the client.
- **Labcode** - This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- **Barcode** - This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- **SCP** - Specimen Collection Point - This is the location where the blood or specimen was collected as declared by the client.
- **SCT** - Specimen Collection Time - The time when specimen was collected as declared by the client.
- **SRT** - Specimen Receiving Time - This time when the specimen reached our laboratory.
- **RRT** - Report Releasing Time - The time when our pathologist has released the values for Reporting.
- **Reference Range** - Means the range of values in which 95% of the normal population would fall.

SUGGESTIONS

- Values out of reference range requires reconfirmation before starting any medical treatment.
- Retesting is needed if you suspect any quality shortcomings.
- Testing or retesting should be done in accredited laboratories.
- For suggestions, complaints, clinical support or feedback, write to us at **customersupport@thyrocare.com** or call us on **022-3090 0000**





+ T&C Apply, #As on 5th December 2024 (Applicable for all company owned labs except Bhagalpur & Vijayawada),

⋆ As per survey on doctors' perception of laboratory diagnostics (IJARIIT, 2023), -Mumbai Reference Lab is CAP Accredited

Dummy Report