Thyrocare

Tests you can trust

Name : XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Date : XXXXXXXX

Test Asked : Allergy Inhalant Comprehensive Package (by Phadia)

Report Status : Complete Report

Dummy Report



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



Accredited by

NABL From 2005# | ISO 9001: 2015 - From 2015 | CAP From 2011~

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

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

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 : XXXXXXXXXXXXXXX
Referred By : XXXXXXXXXXXXXXX
Sample Collected At : XXXXXXXXXXXXXXX

Tests Done : **ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)**

Report Availability Summary

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

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

TEST DETAILS	REPORT STATUS
ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)	Ready
ALLERGY ANIMAL PANEL (BY PHADIA)	Ready
ALLERGY ASTHMA / RHINITIS SCREENING (BY PHADIA)	Ready
ALLERGY POLLEN PANEL (BY PHADIA)	Ready

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALLERGY CAT DANDER (BY PHADIA)	FEIA	0.12	kUA/L	< 0.35
ALLERGY HORSE DANDER (BY PHADIA)	FEIA	0.01	kUA/L	< 0.35
ALLERGY COW DANDER (BY PHADIA)	FEIA	0.01	kUA/L	< 0.35
ALLERGY DOG DANDER (BY PHADIA)	FEIA	0.3	kUA/L	< 0.35

Please correlate with clinical conditions.

Method :

APCAT - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APHOR - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APCOW - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APDOG - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD

Dummy Report

Tests Done : ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)

Report Remarks : Labcode:0603002648/IT001

Doctor 1 Sign

Doctor 2 Sign

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALLERGY HOUSE DUST (BY PHADIA)	**FEIA**	**0.5**	**kUA/L**	**< 0.35**
Allergy House Dust Mite - D.Pteronyssinus (By Phadia)	FEIA	0.13	kUA/L	< 0.35
Allergy House Dust Mite- D.Farinae (By Phadia)	FEIA	0.01	kUA/L	< 0.35
ALLERGY COCKROACH GERMAN (BY PHADIA)	**FEIA**	**0.92**	**kUA/L**	**< 0.35**
ALLERGY PENICILLIUM CHRYSOGENUM (BY PHADIA)	**FEIA**	**0.92**	**kUA/L**	**< 0.35**
ALLERGY CLADOSPORIUM HERBARUM (BY PHADIA)	**FEIA**	**0.9**	**kUA/L**	**< 0.35**
ALLERGY ASPERGILLUS FUMIGATUS (BY PHADIA)	FEIA	0.14	kUA/L	< 0.35
ALLERGY ALTERNARIA ALTERNATA (BY PHADIA)	FEIA	0.01	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
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

Dummy Report

Tests Done : ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)

Report Remarks : Labcode:0603002648/IT001

Doctor 1 Sign

Doctor 2 Sign

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

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
ALLERGY MUGWORT (BY PHADIA)	**FEIA**	**0.4**	**kUA/L**	**< 0.35**
ALLERGY COMMON SILVER BIRCH (BY PHADIA)	**FEIA**	**0.7**	**kUA/L**	**< 0.35**
ALLERGY TIMOTHY GRASS (BY PHADIA)	**FEIA**	**0.8**	**kUA/L**	**< 0.35**
ALLERGY BERMUDA GRASS (BY PHADIA)	FEIA	0.11	kUA/L	< 0.35
ALLERGY MESQUITE (BY PHADIA)	FEIA	0.3	kUA/L	< 0.35
ALLERGY JOHNSON GRASS (BY PHADIA)	**FEIA**	**0.6**	**kUA/L**	**< 0.35**

Please correlate with clinical conditions.

Method :

APMUG - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APCO2 - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APTIM - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APBER - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APMES - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD
APJOH - IMMUNOCAP, FLUORESCENT ENZYME IMMUNOASSAY (FEIA) METHOD

~~ End of report ~~

Dummy Report

Tests Done : ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)

Report Remarks : Labcode:0603002648/IT001

Doctor 1 Sign **Doctor 2 Sign**

CUSTOMER DETAILS

As declared in our data base

Name: XXXXXXXXXX **Age:** XX **Sex:** XX

Barcodes/Sample_Type	:	XXXXXXXXXXXX
Labcode	:	XXXXXXXXXXXX
Ref By	:	XXXXXXXXXXXX
Sample_Type/Tests	:	SERUM SPL:ALLERGY INHALANT COMPREHENSIVE PACKAGE (BY PHADIA)
Sample Collected At	:	XXXXXXXXXXXX
Sample Collected on (SCT)	:	XXXXXXXXXXXX
Report Released on (RRT)	:	XXXXXXXXXXXX
Amount Collected	:	**XXXXXXXXXXXX**

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

Dummy Report

CONDITIONS OF REPORTING

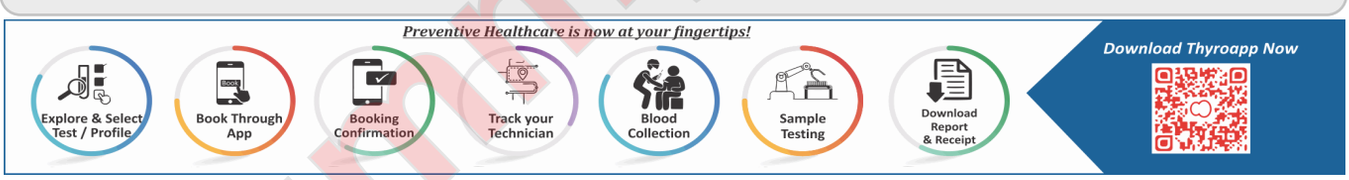
- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for 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