Thyrocare

Tests you can trust

Name : XXXXXXXX

Date : XXXXXXXXX

Test Asked : Jaanch Menopause Assessment Panel

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 : XXXXXXXXXXX
Referred By : XXXXXXXXXXX
Sample Collected At : XXXXXXXXXXX

Tests Done : **JAANCH MENOPAUSE ASSESSMENT PANEL**

Report Availability Summary

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

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

TEST DETAILS	REPORT STATUS
JAANCH MENOPAUSE ASSESSMENT PANEL	Ready
CALCIUM	Ready
25-OH VITAMIN D (TOTAL)	Ready
ESTRADIOL/OESTROGEN (E2)	Ready
FOLLICLE STIMULATING HORMONE (FSH)	Ready
LUTEINISING HORMONE (LH)	Ready
PROLACTIN (PRL)	Ready
TSH - ULTRASENSITIVE	Ready
HBA PROFILE	Ready
LIPID PROFILE	Ready
ANTI MULLERIAN HORMONE (AMH)	Ready

Dummy Report

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Patient Name	: XXXXXXXXXXX	Tests Done	: **JAANCH MENOPAUSE ASSESSMENT PANEL**
Referred By	: XXXXXXXXXXX		
Sample Collected At	: XXXXXXXXXXX		

Tests Outside Reference Range

Note: Please refer to the table below for tests outside reference range.

Test Name	Observed Value	Units	Bio. Ref. Interval.
INFERTILITY			
LUTEINISING HORMONE (LH)	**15.9**	mIU/mL	Refer Routine Report
LIPID			
LDL / HDL RATIO	**0.9**	Ratio	1.5-3.5
TC/ HDL CHOLESTEROL RATIO	**2.2**	Ratio	3 - 5
VITAMIN			
25-OH VITAMIN D (TOTAL)	**11.62**	ng/mL	30-100

Dummy Report

Disclaimer: The above listed is the summary of the parameters with values outside the BRI. For detailed report values, parameter correlation and clinical interpretation, kindly refer to the same in subsequent pages.

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

TEST NAME	TECHNOLOGY	VALUE	UNITS
HbA1c	H.P.L.C	5.1	%

Bio. Ref. Interval. :

As per ADA Guidelines	Guidance For Known Diabetics
Below 5.7% : Normal	Below 6.5% : Good Control
5.7% - 6.4% : Prediabetic	6.5% - 7% : Fair Control
>=6.5% : Diabetic	7.0% - 8% : Unsatisfactory Control
	>8% : Poor Control

Method : Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG)	CALCULATED	100	mg/dL

Bio. Ref. Interval. :

90 - 120 mg/dl : Good Control
121 - 150 mg/dl : Fair Control
151 - 180 mg/dl : Unsatisfactory Control
> 180 mg/dl : Poor Control

Method : Derived from HBA1c values

Please correlate with clinical conditions.

Dummy Report

Tests Done : HBA PROFILE

Report Remarks : Labcode:1602101984/IT001

Doctor 1 Sign **Doctor 2 Sign**

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

TEST NAME	TECHNOLOGY	VALUE	UNITS
ANTI MULLERIAN HORMONE (AMH)	C.L.I.A	< 7.63	ng/mL

Bio. Ref. Interval. :-

Female

18 - 25 Years	0.96 - 13.34
26 - 30 Years	0.17 - 7.37
31 - 35 Years	0.07 - 7.35
36 - 40 Years	0.03 - 7.15
41 - 45 Years	< 3.27
> 45 Years	< 1.15

Male

> 18	Years	0.73 - 16.05

Clinical Significance:
Antimullerian hormone (AMH), also known as mullerian -inhibiting substance, is a dimeric glycoprotein hormone belonging to the transforming growth factor-beta family. It is produced by Sertoli cells of the testis in males and by ovarian granulosa cells in females.AMH is expressed in the follicles of female of reproductive age and inhibits the transition of follicles from primordial to primary stages. Because of the gender differences in AMH concentration, its changes in circulating concentrations with sexual development, and its specificity for Sertoli and granulosa cells, measurement of AMH has utility in the assessment of gender,gonadal function, fertility, and as a gonadal tumor marker. Since AMH is produced continuously in the granulosa cells of small follicles during the menstrual cycles, it is superior to the episodically released gonadotropins and ovarian steroids as a marker of ovarian reserve.

Specifications: Precision: Intra assay (%CV): 1.7 %, Inter assay (%CV): 2.8 %; Sensitivity: < 0.02 ng/ml

Kit Validation reference:
Picard JY Benarous R .Guerrier D Josson Kahn A cloning and expression of DNA for anti-mullerian hormone proc Nath Acad Sci USA 1986;83(15):5468-8

Please correlate with clinical conditions.
Method:- ONE-STEP IMMUNOENZYMATIC ("SANDWICH") ASSAY

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

Doctor 1 Sign **Doctor 2 Sign**

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

TEST NAME	TECHNOLOGY	VALUE	UNITS
25-OH VITAMIN D (TOTAL)	**C.L.I.A**	**11.62**	**ng/mL**

Bio. Ref. Interval. :-

DEFICIENCY : <20 ng/ml || INSUFFICIENCY : 20-<30 ng/ml
SUFFICIENCY : 30-100 ng/ml || TOXICITY : >100 ng/ml

Clinical Significance:

Vitamin D is a fat soluble vitamin that has been known to help the body absorb and retain calcium and phosphorous; both are critical for building bone health. Decrease in vitamin D total levels indicate inadequate exposure of sunlight, dietary deficiency, nephrotic syndrome. Increase in vitamin D total levels indicate Vitamin D intoxication.

Specifications: Precision: Intra assay (%CV):5.3%, Inter assay (%CV):11.9% ; Sensitivity:3.2 ng/ml.

Kit Validation Reference: Holick MF. Vitamin D Deficiency. N Engl J Med. 2007;357:266–81.

Please correlate with clinical conditions.

Method:- Fully Automated Chemi Luminescent Immuno Assay

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

Doctor 1 Sign **Doctor 2 Sign**

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

TEST NAME	TECHNOLOGY	VALUE	UNITS
ESTRADIOL/OESTROGEN (E2)	C.M.I.A	100	pg/mL

Bio. Ref. Interval. :-

Males : 11 - 44 pg/mL

Normal Menstruating Females ;
Follicular Phase : 21 - 251 pg/mL
Mid-Cycle Phase : 38 - 649 pg/mL
Luteal Phase : 21 - 312 pg/mL

Postmenopausal
Females not on HRT: < 10 - 28 pg/mL
Female on HRT : < 10 - 144 pg/mL

Clinical Significance: During the early follicular phase, The Estradiol level is relatively constant and low. By day seven, The dominant follicle is established and the Estradiol level rises significantly. The elevated Estradiol level suppresses the FSH level by negative feedback on the Hypothalamus and Pituitary gland and triggers a rapid rise of LH. Elevated Estradiol levels in females may also result from primary or secondary ovarian hyperfunction. Very high Estradiol levels are found during the induction of ovulation for assisted reproduction therapy or in pregnancy. Decreased Estradiol levels in females may result from either the lack of ovarian synthesis or a lesion in the Hypothalamus-Pituitary Axis.

Specification: Precision: Intra assay (%CV): 6.4, Inter assay (%CV):7.4,Sensitivity: <=10 pg/mL.

Kit Validation References: Muse K, Wilson EA. Monitoring ovulation induction: use of biochemical and biophysical parameters. Sem Reproduct Endocrinol 1986;4(3):301-9

Please correlate with clinical conditions.
Method:- FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

Doctor 1 Sign **Doctor 2 Sign**

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

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TOTAL CHOLESTEROL	PHOTOMETRY	123	mg/dL	< 200
HDL CHOLESTEROL - DIRECT	PHOTOMETRY	56	mg/dL	40-60
LDL CHOLESTEROL - DIRECT	PHOTOMETRY	53.5	mg/dL	< 100
TRIGLYCERIDES	PHOTOMETRY	120	mg/dL	< 150
TC/ HDL CHOLESTEROL RATIO	**CALCULATED**	**2.2**	**Ratio**	**3 - 5**
TRIG / HDL RATIO	CALCULATED	2.12	Ratio	< 3.12
LDL / HDL RATIO	**CALCULATED**	**0.9**	**Ratio**	**1.5-3.5**
HDL / LDL RATIO	CALCULATED	1.05	Ratio	> 0.40
NON-HDL CHOLESTEROL	CALCULATED	66.2	mg/dL	< 160
VLDL CHOLESTEROL	CALCULATED	23.94	mg/dL	5 - 40

Please correlate with clinical conditions.

Method :

CHOL - Cholesterol Oxidase, Esterase, Peroxidase
HCHO - Direct Enzymatic Colorimetric
LDL - Direct Measure
TRIG - Enzymatic, End Point
TC/H - Derived from serum Cholesterol and Hdl values
TRI/H - Derived from TRIG and HDL Values
LDL/ - Derived from serum HDL and LDL Values
HD/LD - Derived from HDL and LDL values.
NHDL - Derived from serum Cholesterol and HDL values
VLDL - Derived from serum Triglyceride values

***REFERENCE RANGES AS PER NCEP ATP III GUIDELINES:**

TOTAL CHOLESTEROL	(mg/dl)	HDL	(mg/dl)	LDL	(mg/dl)	TRIGLYCERIDES	(mg/dl)
DESIRABLE	<200	LOW	<40	OPTIMAL	<100	NORMAL	<150
BORDERLINE HIGH	200-239	HIGH	>60	NEAR OPTIMAL	100-129	BORDERLINE HIGH	150-199
HIGH	>240			BORDERLINE HIGH	130-159	HIGH	200-499
				HIGH	160-189	VERY HIGH	>500
				VERY HIGH	>190		

Alert !!! 10-12 hours fasting is mandatory for lipid parameters. If not, values might fluctuate.

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

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Sample Collected At	: XXXXXXXXXXX	Report Released on (RRT)	: XXXXXXXXXXX
		Sample Type | Barcode	: XXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS
FOLLICLE STIMULATING HORMONE (FSH)	C.L.I.A	6.17	mIU/mL

Bio. Ref. Interval. :
Female :
Follicular Phase : 2.5 to 10.2 | Mid cycle peak : 3.4 to 33.4 I Luteal Phase : 1.5 to 9.1
Pregnant : < 0.3 I Post Menopausal : 23 to 116.3
Males (13 - 70 Years) : 1.4 to 18.1

Method : Fully Automated Chemiluminescent Immunoassay

LUTEINISING HORMONE (LH)	**C.L.I.A**	**15.9**	**mIU/mL**

Bio. Ref. Interval. :
Female :
Follicular Phase : 1.9 to 12.5 I Mid cycle peak : 8.7 to 76.3
Luteal Phase : 0.5 to 16.9 I Pregnant : 0.1 to 1.5
Post Menopausal : 15.9 to 54 I Children : 0.1 to 6
Male
Age 20 to 70 : 1.5 to 9.3
Age >70 : 3.1 to 34.6

Method : Fully Automated Chemiluminescent Immunoassay

PROLACTIN (PRL)	C.L.I.A	< 11.43	ng/mL

Bio. Ref. Interval. :
Females :
Normally Menstruating : 2.8 - 29.2
Pregnant : 9.7 - 208.5
Postmenopausal : 1.8 - 20.3
Male : 2.1 - 17.7

Method : Fully Automated Bidirectionally Interfaced Chemi Luminescent Immuno Assay

Please correlate with clinical conditions.

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

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Patient Name : XXXXXXXXXXX
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Sample Collected At : XXXXXXXXXXX

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
CALCIUM	PHOTOMETRY	9.62	mg/dL	8.8-10.6

Please correlate with clinical conditions.

Method :

CALC - Arsenazo III Method, End Point.

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

Doctor 1 Sign

Doctor 2 Sign

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

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
TSH - ULTRASENSITIVE	C.M.I.A	<2.92	µIU/mL	0.35-4.94

The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

Method :

USTSH - Fully Automated Chemi Luminescent Microparticle Immunoassay

Disclaimer : Results should always be interpreted using the reference range provided by the laboratory that performed the test. Different laboratories do tests using different technologies, methods and using different reagents which may cause difference. In reference ranges and hence it is recommended to interpret result with assay specific reference ranges provided in the reports. To diagnose and monitor therapy doses, it is recommended to get tested every time at the same Laboratory.

~~ End of report ~~

Dummy Report

Tests Done : JAANCH MENOPAUSE ASSESSMENT PANEL

Report Remarks : Labcode:1602101985/IT001

Doctor 1 Sign

Doctor 2 Sign

CONDITIONS OF REPORTING

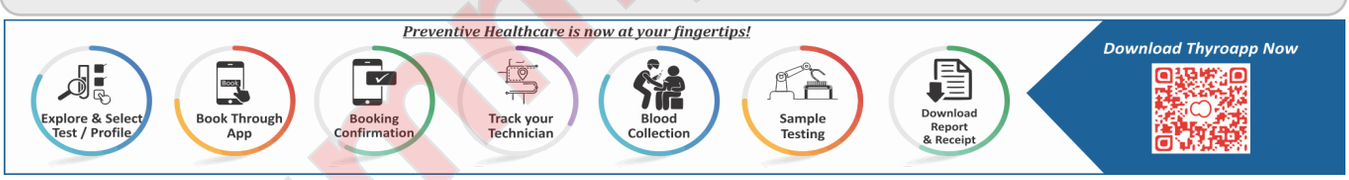
- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for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