

PROCESSED AT :
Thyrocare



Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703 98706 66333 wellness@thyrocare.com

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

NAME : XXXXXXXXXXXXXXXXXXXX
REF. BY : XXXXXXXXXXXXXXXXXXXX
TEST ASKED : TORCH ALL TEN (C.M.I.A)

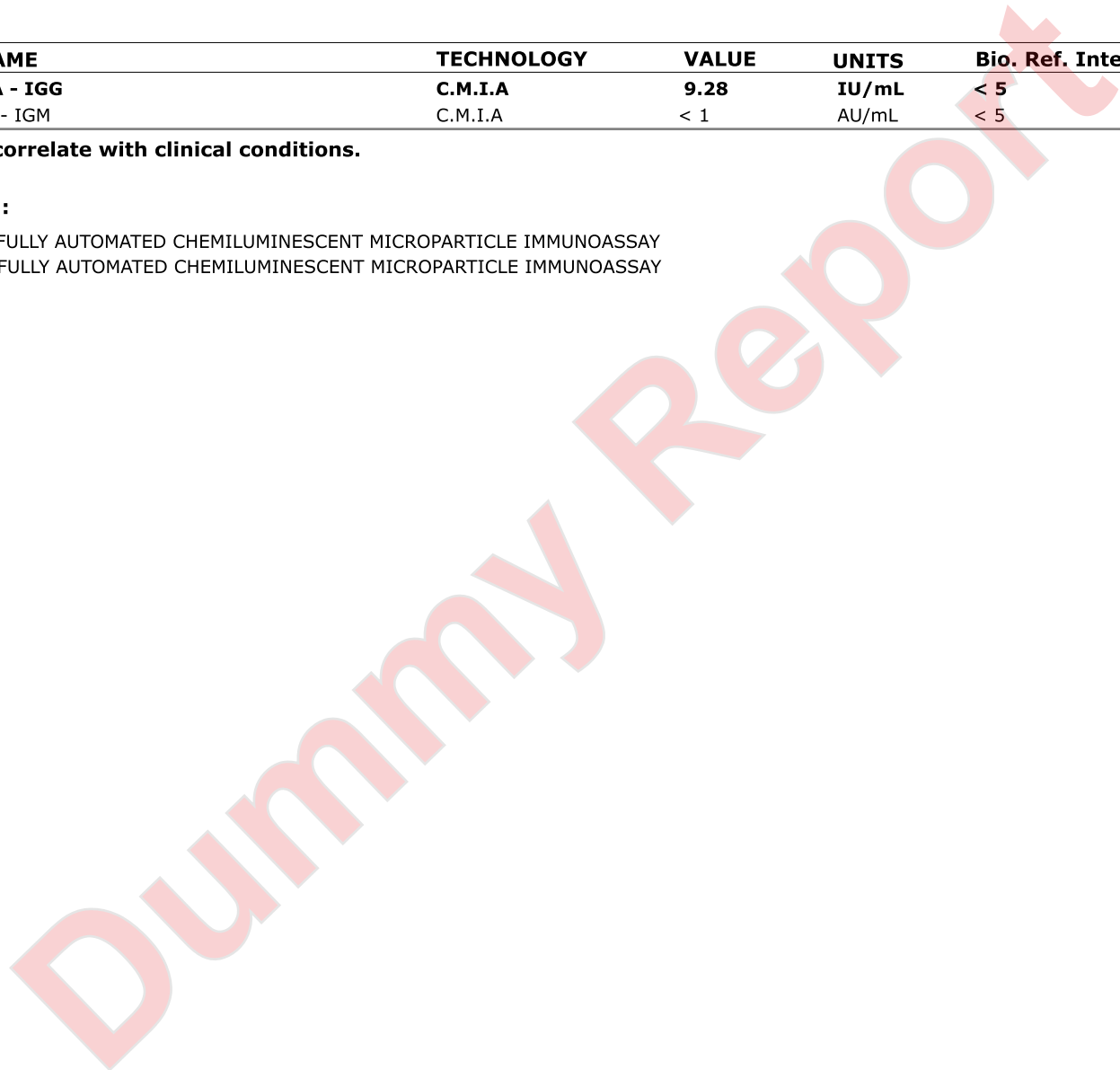
SAMPLE COLLECTED AT :
XX

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
RUBELLA - IGG	C.M.I.A	9.28	IU/mL	< 5
RUBELLA - IGM	C.M.I.A	< 1	AU/mL	< 5

Please correlate with clinical conditions.

Method :

CRB_G - FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY
CRB_M - FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY



Sample Collected on (SCT) : Sample collection time
Sample Received on (SRT) : Sample receiving time at Lab
Report Released on (RRT) : Report release time
Sample Type : SERUM
Labcode :
Barcode :

Doctor 1 Sign Doctor 2 Sign

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REF. BY : XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
TEST ASKED : TORCH ALL TEN (C.M.I.A)

TEST NAME	TECHNOLOGY	VALUE	UNITS
TOXO GONDII - IGG Bio. Ref. Interval. : Negative : < 0.81 Equivocal : 0.81 - 1.20 Positive : > 1.20 Method : FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	C.M.I.A	< 0.1	IU/mL
CYTOMEGALO VIRUS (CMV) - IGG Bio. Ref. Interval. : Negative : < 10 Equivocal : 10 - 14 Positive : > 14 Method : FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	C.M.I.A	> 1000	AU/mL
HERPES SIMPLEX VIRUS I (HSV)-IGG Bio. Ref. Interval. : Negative : < 14 Equivocal : 14 - 19 Positive : > 19 Method : FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	C.M.I.A	222.7	AU/mL
CYTOMEGALO VIRUS (CMV) - IGM Bio. Ref. Interval. : Negative : < 8 Equivocal : 8 - 12 Positive : > 12 Method : FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	C.M.I.A	< 1	AU/mL
HERPES SIMPLEX VIRUS II (HSV)-IGG Bio. Ref. Interval. : Negative : < 9 Equivocal : 9 - 13 Positive : > 13 Method : FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY	C.M.I.A	< 1	AU/mL

Please correlate with clinical conditions.

Sample Collected on (SCT) : Sample collection time
Sample Received on (SRT) : Sample receiving time at Lab
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Sample Type : SERUM
Labode :
Barcode :

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NAME : XXXXXXXXXXXXXXXXXXXX **SAMPLE COLLECTED AT :**
REF. BY : XXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
TEST ASKED : TORCH ALL TEN (C.M.I.A)

TEST NAME	TECHNOLOGY	VALUE	UNITS
TOXO GONDII - IGM	C.M.I.A	< 1	AU/mL
HERPES SIMPLEX VIRUS I (HSV)-IGM	C.M.I.A	< 1	AU/mL
HERPES SIMPLEX VIRUS II (HSV)-IGM	C.M.I.A	< 1	AU/mL

Bio. Ref. Interval. :-

Negative : < 6
Equivocal : 6 - 10
Positive : > 10

Please correlate with clinical conditions.

Method :

CTX_M - FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY
CHS1M - FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY
CHS2M - FULLY AUTOMATED CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

~~ End of report ~~

Sample Collected on (SCT) : Sample collection time
Sample Received on (SRT) : Sample receiving time at Lab
Report Released on (RRT) : Report release time
Sample Type : SERUM
Labcode :
Barcode :

Doctor 1 Sign Doctor 2 Sign