PROCESSED AT :

Thyrocare

CAP ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS

Thyrocare
Tests you can trust

Corporate office : Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400 703
022 - 3090 0000 / 6712 3400 9870666333 wellness@thyrocare.com www.thyrocare.com

REPORT

NAME : XXXXXXXXXXXXXXXXXX
REF. BY : XXXXXXXXXXXXXXXXXX
TEST ASKED : JAANCH - INFERTILITY PROFILE BASIC

SAMPLE COLLECTED AT :
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS
ANTI MULLERIAN HORMONE (AMH)	**C.L.I.A**	**0.92**	**ng/mL**

Reference Range :-

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

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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REPORT

NAME : XXXXXXXXXXXXXXXXXX
REF. BY : XXXXXXXXXXXXXXXXXX
TEST ASKED : JAANCH - INFERTILITY PROFILE BASIC

SAMPLE COLLECTED AT :
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS
FOLLICLE STIMULATING HORMONE (FSH)	E.C.L.I.A	6.39	mIU/mL

Reference Range :
Men : 0-12.4 mIU/ml
Women : Follicular Phase : 0-12.5 mIU/ml
Ovulation Phase : 0-21.5 mIU/ml
Luteal phase : 0-7.7 mIU/ml
Post Menopause 0-134.8 mIU/ml
Method : Fully Automated Electrochemiluminescence Sandwich Immunoassay

LUTEINISING HORMONE (LH)	E.C.L.I.A	5.46	mIU/mL

Reference Range :
Men : 0-8.6 mIU/ml
Women -Follicular Phase : 0-12.6 mIU/ml
Ovulation phase : 0-95.6 mIU/ml
Luteal Phase : 0-11.4 mIU/ml
PostMenopause : 0-58.5 mIU/ml
Method : Fully Automated Electrochemiluminescence Sandwich Immunoassay

PROLACTIN (PRL)	C.L.I.A	9.55	ng/mL

Reference Range :
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

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REPORT

NAME : XXXXXXXXXXXXXXXXXX
REF. BY : XXXXXXXXXXXXXXXXXX
TEST ASKED : JAANCH - INFERTILITY PROFILE BASIC

SAMPLE COLLECTED AT :
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3)	E.C.L.I.A	137	ng/dL	80-200
TOTAL THYROXINE (T4)	E.C.L.I.A	8.5	µg/dL	4.8-12.7
TSH - ULTRASENSITIVE	E.C.L.I.A	3.1	µIU/mL	0.54-5.30

Comments : IF NOT ON DRUGS SUGGESTED FT3 & FT4 ESTIMATION

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

Method :

T3 - Fully Automated Electrochemiluminescence Compititive Immunoassay
T4 - Fully Automated Electrochemiluminescence Compititive Immunoassay
USTSH - Fully Automated Electrochemiluminescence Sandwich Immunoassay

Pregnancy reference ranges for TSH/USTSH :
Trimester || T3 (ng/dl) || T4 (µg/dl) || TSH/USTSH (µIU/ml)
1st || 83.9-196.6 || 4.4-11.5 || 0.1-2.5
2nd || 86.1-217.4 || 4.9-12.2 || 0.2-3.0
3rd || 79.9-186 || 5.1-13.2 || 0.3-3.5

References :

1. Carol Devilia, C I Parhon. First Trimester Pregnancy ranges for Serum TSH and Thyroid Tumor reclassified as Benign. Acta Endocrinol. 2016; 12(2) : 242 - 243
2. Kulhari K, Negi R, Kalra DK et al. Establishing Trimester specific Reference ranges for thyroid hormones in Indian women with normal pregnancy : New light through old window. Indian Journal of Contemporary medical research. 2019; 6(4)

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

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Labcode :
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Doctor 1 Sign Doctor 2 Sign

CONDITIONS OF REPORTING

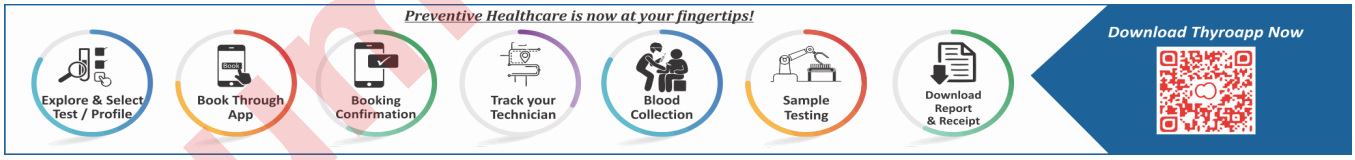
- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for 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 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.
- Thyrocare Discovery video link :- https://youtu.be/nbdYeRgYyQc
- For clinical support please contact @8450950852,8450950853,8450950854 between 10:00 to 18:00

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 or feedback, write to us at **info@thyrocare.com** or call us on **022-3090 0000 / 6712 3400**
- SMS:<Labcode No.> to **9870666333**





Dummy Report