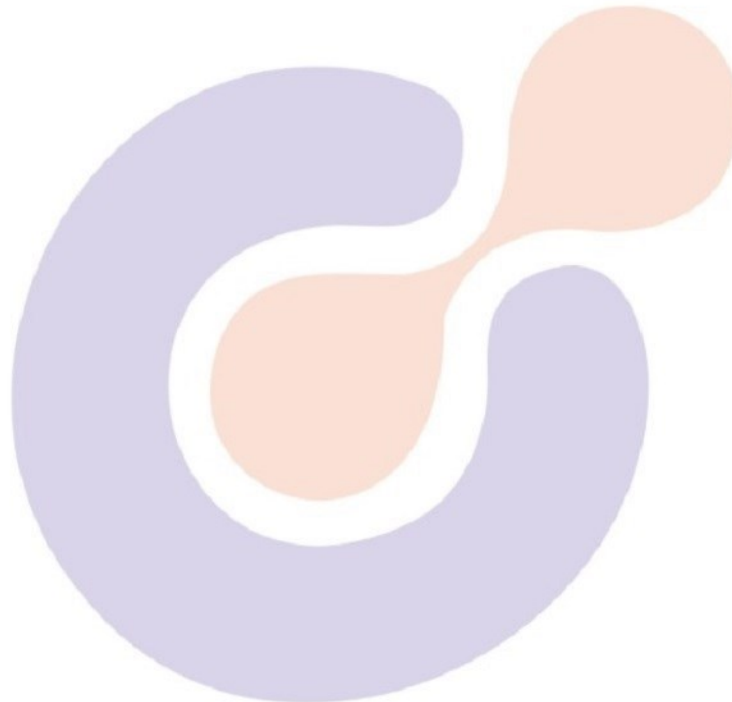


Patient Name : Ms.SANGEETA	Visit No : CHA250033414
Age/Gender : 32 Y/F	Registration ON : 24/Feb/2025 04:13PM
Lab No : 10130710	Sample Collected ON : 24/Feb/2025 04:17PM
Referred By : Dr.ESIC HOSPITAL LUCKNOW	Sample Received ON : 24/Feb/2025 04:30PM
Refer Lab/Hosp : ESIC HOSPITAL LUCKNOW	Report Generated ON : 24/Feb/2025 06:31PM
Doctor Advice : E2,AMH (ANTI MULLERIAN HORMONE)Serum,PROLACTIN,LH,FSH	



Test Name	Result	Unit	Bio. Ref. Range	Method
AMH (ANTI MULLERIAN HORMONE)Serum				
ANTI MULLERIAN HORMONE	8.20	ng/ml	0.73 - 16.05	CLIA



CHARAK

[Checked By]

Print.Date/Time: 24-02-2025 19:05:30

*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADABKHAN
PATHOLOGIST

Dr. SYED SAIF AHMAD
MD (MICROBIOLOGY)

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LH

LUTEINIZING HORMONE **23.25** mIU/ml 20-70 years: 1.5-9.3 -> 70
years: 3.1-34.6 ~Children:<
0.1-6.0

FOLLICLE STIMULATING HORMONE FSH

FOLLICLE STIMULATING HORMONE **5.25** mIU/ml Women (mIU/ml)~1) CLIA
FSH serum Follicular phase: 2.5-10.2
~2) Midcycle peak : 3.4-
33.4 ~3) Luteal phase : 1.5-
9.1 ~4) Pregnant : < 0.3~5)
Postmenopausal:23.0-
116.3

INTERPRETATION:

Normally Menstruating Females	Biological Reference Range
Follicular	2.5-10.2
Mid - Cycle	3.4-33.4
Luteal	1.5-9.1
Post-menopausal Females	23-116.3
Male	1.4-18.1 (13-70 years)

-Circulating levels of follicle stimulating hormone vary throughout the menstrual cycle in response to estradiol and progesterone. A small but significant increase in FSH accompanies the mid-cycle LH surge, while FSH declines in the luteal phase in response to estradiol and progesterone production by the developing corpus luteum.

-At menopause FSH and LH increase sufficiently in response to diminished feedback inhibition of gonadotropin release.

-In males, FSH, LH and testosterone regulate spermatogenesis by sertoli cells in seminiferous tubules of the testis. FSH may also be elevated in Klinefelter's syndrome or as a consequence of sertoli cell failure.

-In females, situations in which FSH is elevated and gonadal steroids are depressed include - menopause, premature ovarian failure and oophorectomy, in polycystic ovarian syndrome the LH/FSH ratio may be increased. Abnormal FSH concentrations may indicate dysfunction of the hypothalamic-pituitary axis. In sexually mature adults, FSH deficiency together with low concentrations of LH and sex steroids may indicate panhypopituitarism.

LIMITATIONS:

-Specimens from patients who have received preparations of mouse monoclonal antibodies for diagnosis or therapy may show either false positive or depressed values.

ESTRADIOL (E2)

ESTRADIOL (E2) **32.21** pg/ml 7.63 - 42.6

*** End Of Report ***



[Checked By]



Signature