



itDose

Taking You Beyond The Limits

Visit ID : ITD1310	Registration : 25/Jan/2023 12:24PM
UHID/MR No : ITD.0000001185	Collected : 25/Jan/2023 12:25PM
Patient Name : MR. SHEIKH	Received : 25/Jan/2023 12:26PM
Age/Gender : 25 Y 0 M 0 D /M	Reported : 25/Jan/2023 12:30PM
Ref Doctor : Dr.SELF	Status : Final Report
Client Name : STANDARD	Client Code : 78
Client Add : D 159, 1st Floor, Sector 7, No	Barcode No : 10059959

DEPARTMENT OF HORMONE ASSAYS

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
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LEUTINISING HORMONE

Sample Type : Serum

LEUTINISING HORMONE	30	N	mIU/ml	Refer Interpretation	CLIA
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NORMAL RANGE:

Normally Menstruating Females	Biological Reference Range
Follicular	1.9-12.5
Mid Cycle	8.7-76.3
Luteal	0.5-16.9
Pregnant	<1.0-1.5
Post Menopausal Female	15.9-54.0
Male	
20-70 Years	1.5-9.3
>70 Years	3.1-34.6
Children	<1.0-6.0

COMMENTS:
It is essential for-

- The prediction of ovulation.
- Evaluation of infertility.
- Diagnosis of pituitary and gonadal disorders.
- Gonadal failure a cause of infertility is indicated by elevated concentrations of LH and FSH accompanied by low concentration of global steroids. In the females, elevated concentration can indicate primary amenorrhoea, menopause, premature ovarian failure, polycystic ovarian syndrome or hypergonadotropic hypogonadism.
- In the male elevated concentrations of LH can result from primary testicular failure, seminiferous tubule dysgenesis (Klinefelters syndrome), sertoli cell failure, anorchia or hypogonadotropic hypogonadism.

LIMITATIONS:

- For diagnostic purposes results should be used in conjunction with other clinical data.
- Specimens from patients who have received preparations of mouse monoclonal antibodies for diagnosis or therapy may show either false positive or depressed values.

*** End Of Report ***

Dr. Pritha Ghose
MBBS, MD (Pathology)
Consultant Pathologist

Dr. Sourav Gangopadhyay
MBBS, MD (Pathology)
Consultant Pathologist

Dr. Ranjan Basu
MBBS, MD (Microbiology)
Consultant Microbiologist

Dr. Shrinwanti Karmakar
MBBS, MD (Biochemistry)
Consultant Biochemist





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