

NAME : MS FARINA

Ref. By : DR. BANCHORE R. (DGO)

Address :

Years / Female Reg No. : 21344 Reg. Date : 27/08/2022 07:47AM

Collected At : MedZone Center

INVESTIGATION REPORT

24

CLINICAL BIOCHEMISTRY

<u>TEST</u>	RESULT	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD
FSH (Follicle Stimulating Hormone)				
Sample Type	: SERUM			
FSH (Follicle Stimulating Hormone)	: <0.100 Test repeated verified. PLease corealt Advice Repeat	mIU/ml twice,same e clinically. test if requ	Normal menstruating refsemble ledstained ; Toda & Scontrol als 10.2 : Follicular phase 3.4 - 33.4 : Mid Cycle phase ired Schißically euteal phase	Fully Automated O ^{Roche E411 (ECL)}
			23 - 116.3 :Postmenopausal <0.3 : Pregnant	

FSH (follicle stimulating hormone), like LH (luteinizing hormone), belongs the gonadotropin family. FSH to and LH synergistically regulate and stimulate the growth and function of the gonads (ovaries and testes). Similarly to LH, TSH and hCG, FSH is a glycoprotein consisting of two subunits (alpha- and beta-chains). Its molecular weight is approx. 32,000 D In women, the gonadotropins act within the hypothalamus-pituitary-ovary regulating circuit to control the menstrual cycle. FSH and LH are released in pulses from the gonadotropic cells of the anterior pituitary. The levels of the circulating controlled by steroid hormones via negative feedback to the hypothalamus. In the hormones are ovaries FSH. together with LH, stimulates the growth and maturation of the follicle and hence also the biosynthesis of estrogens in the follicles The FSH level shows a peak at mid-cycle, although this is less marked than with LH. Due function to changes in ovarian reduced estrogen secretion. high FSH concentrations occur during FSH induce and menopause. In men. serves to development. utilized spermatogonium The determination of FSH is in the elucidation of functional disorders within the hypothalamus-pituitary-gonad The determination of FSH together with is indicated for the following system. LH congenital diseases with chromosome aberrations, amenorrhea (causes), polycystic ovaries (PCO) and menopausal FSH different syndrome. Depressed gonadotropin levels in occur in azoospermia. Roche Cobas employs two men monoclonal antibodies specifically directed against human FSH. Cross-reactivity with LH, TSH, hCG, hPL hGH and is negligible.

METHOD: One-step sandwich and competitive FEIA

INSTRUMENT: TOSHO AIA-360 JAPAN



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INVESTIGATION REPORT

CLINICAL BIOCHEMISTRY

TEST	<u>RESULT</u>	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD	
LH (Luteinising Hormone)					
Sample Type	: SERUM				
LH (Luteinising Hormone)	: <0.100 Test repeated	mIU/mL d twice,same	Follicular Phase :2.4 - 12.6 e re3vultatiobtePhade; Tolda9/95control a	Fully Automated Ilso ^{Roche E411 (ECL)}	
	verified.		LutealPhase : 1.0 - 11.4		
	PLease corea	Ite clinically.	Postmenopause :7.7 - 58.5		
	Advice Repea	Advice Repeat test if required clinically.			

LH (luteinizing hormone), together with FSH (follicle stimulating hormone), belongs to the gonadotropin family. LH and FSH regulate and stimulate the growth and function of the gonads (ovaries and testes) synergistically. Like FSH, TSH and hCG, LH is a glycoprotein consisting of two subunits (alpha- and beta-chains). This proteohormone, which consists of 121 three sugar chains, has a molecular weight of 29,500 dalton. Within the control system amino acids and between the anterior pituitary and ovary, the gonadotropins serve to control the menstrual cycle in women. hypothalamus. LH and FSH are released in pulses from the gonadotropic cells of the anterior pituitary and pass via the bloodstream to the gonadotropins stimulate the growth and maturation of the follicle hence the ovaries. Here the and biosynthesis of estrogens and progesterones. The highest LH-concentrations occur during the mid-cycle peak and induce ovulation and formation of the corpus luteum, the principal secretion product of which is progesterone. In the Leydig cells of the testes production of testosterone. Determination LH concentration LH stimulates the of the is used in the elucidation 0 hypothalamus-pituitary-gonads ESH dvsfunctions within the system. The determination of LH in coniunction with i with utilized following indications: diseases for the congenital chromosome aberrations (e.g. syndrome) Turner's ovaries (PCO), clarifying amenorrhea, menopausal syndrome and polycystic the causes of suspected Leydig cell insufficiency. The Elecsys LH test detects all of the LH species described in the literature. The two specific antibodies used recognize particular conformations, with the biotinylated antibody detecting an epitope constructed from both subunits whereas the antibody with the ruthenium complex* label detects an epitope from the b-subunit. As a result, the Roche Cobas LH assay shows negligible cross-reactivity with FSH, TSH, hCG, hGH and hPL.

METHOD: One-step sandwich and competitive FEIA

INSTRUMENT: TOSHO AIA-360 JAPAN

Sample Registered On Sample Received On Report Released On

Sample Barcode :



--- End Of Report ---

Checked By:gopal

Dr. VANDANA CHANDANI