

DHM - Reference No: 837800849 Status: F

**Patient:** Vanessa EDE **Linked by:** Dr Ashley Fong  
**DOB:** 11/02/1986 **Message:** 1.1  
**Address:** 14 Baringa Street, BLAXLAND 2774  
**Ordered by:** Dr Ashley FONG on 22/08/2023  
**Copy to:** Dr Tristan Nguyen  
**Collected:** 19/11/2023 - 9:09 AM **Notified by:** on 00/00/0000  
**Reported:** 22/11/2023 **Message:**

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IVF DAY 21 OF CYCLE

**Anti-Mullerian Hormone (AMH)**

Anti-Mullerian Hormone (Roche Plus) 1.1 pmol/L ( 1.1 - 53.5 )

Comment on Lab ID 837800849

The reference interval quoted above for the Roche AMH Plus assay is the age-related 2.5 - 97.5 percentile.

Generally accepted fertility criteria (not age-related):

<11.0 pmol/L: Suggestive of reduced ovarian reserve

>24.0 pmol/L: Indicates the possibility of

1. Polycystic Ovarian Syndrome
2. In post-menopausal females - granulosa cell tumour
3. Increased risk of Ovarian Hyperstimulation

Syndrome in a stimulated cycle

AMH is produced by the granulosa cells of developing follicles, and provides an estimate of the number of primordial follicles. Particularly in younger women, a low AMH level does not exclude the possibility of fertility.

Levels may be decreased in the latter part of the menstrual cycle and by the OC pill.

High dose biotin (Vitamin B7) can interfere in the AMH Plus assay, causing a falsely low result. High dose biotin may be used in the treatment of Multiple Sclerosis, and is present in certain vitamin supplements, particularly those for hair and nails. If the patient is taking high dose biotin supplementation (>5 mg/day) this result may not be accurate, please repeat this test after at least 3 days off biotin

Reported by Sullivan and Nicolaides Pathology, a member of the Sonic Healthcare Group.

**To access a PDF version of the report, copy and paste the URL below into your browser before 21-11-2024. Use PIN 3292.**

[Click here](#)

NATA Accreditation No 2178

Tests Completed: CA125(s), LH(s), FSH(s), Oest(s), Prog21(s), Commenting,  
Ferr(s), U-CTPCR, U-NGPCR, AMH(s), Thal(e)

Tests Pending : CHROMO/KARYO BLOOD

Sample Pending :

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IVF DAY 21 OF CYCLE

**Haemoglobinopathy Screen (Thalassaemia & Haemoglobin Variants)**

Haemoglobin A2	2.8	%	( 1.5 - 3.5 )
Haemoglobin F	0.4	%	( 0.0 - 1.0 )
Haemoglobin HPLC	No haemoglobin variants detected		

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**CONCLUSION:**

Negative thalassaemia screen.  
No haemoglobin variants detected.

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Ferr(s), U-CTPCR, U-NGPCR, Thal(e)  
Tests Pending : AMH(s), CHROMO/KARYO BLOOD  
Sample Pending :

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IVF DAY 21 OF CYCLE

**Neisseria gonorrhoeae PCR**

Site	Urine
N.gonorrhoeae DNA	Not Detected

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Ferr(s), U-CTPCR, U-NGPCR  
Tests Pending : AMH(s), CHROMO/KARYO BLOOD, Thal(e)  
Sample Pending :

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IVF DAY 21 OF CYCLE

**Chlamydia trachomatis PCR**

Site	Urine
C.trachomatis DNA	Not Detected

NATA Accreditation No 2178

Tests Completed: CA125(s), LH(s), FSH(s), Oest(s), Prog21(s), Commenting,  
 Ferr(s), U-CTPCR, U-NGPCR

Tests Pending : AMH(s), CHROMO/KARYO BLOOD, Thal(e)

Sample Pending :

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**Reproductive Hormones**

(Abbott Method)

FSH	4.3	IU/L
LH	5.4	IU/L
Oestradiol	277	pmol/L

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FSH	Basal	1.5 - 10
	Mid cycle peak	7.0 - 22
	Post-menopausal	25 - 130

LH	Basal	2.0 - 12
	Mid cycle peak	8.0 - 90
	Post-menopausal	5.0 - 62

Oestradiol	Follicular phase	<320
	Preovulatory phase	450 - 2000
	Luteal phase	125 - 1300
	Post-menopausal	<170

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Tests Completed: CA125(s), LH(s), FSH(s), Oest(s), Prog21(s), Commenting, Ferr(s)

Tests Pending : U-CTPCR, U-NGPCR, AMH(s), CHROMO/KARYO BLOOD, Thal(e)  
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**Progesterone (21 Days)**

Progesterone (21 Days) 26.2 nmol/L

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Progesterone	Follicular phase	0.3 - 4.0
	Luteal phase	5.5 - 90.0
	Midluteal	8.5 - 110.0
	Post-menopausal	<2.6

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Tests Pending : Commenting, U-CTPCR, U-NGPCR, AMH(s), CHROMO/KARYO BLOOD, Thal(e)  
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**Iron Studies**

Ferritin 48 ug/L ( 15 - 200 )

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Sample Pending :

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## Biomarkers

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 Sample Pending :