



MELBOURNE PATHOLOGY

Referred by : DR CARMEN ABAFFY
Reporting Lab : (2133) 103 Victoria Pde, Collingwood, Vic,
Requested : 06/02/2024
Collected : 27/03/2024 @ 0932 1/1

Lab ID: 968365571
UR: 47248962424
SHEPHARD, Rebecca
790 KILLARNEY GAP ROAD
NARRABRI NSW 2390

A8561 Tg: 3141SG Cr: 3141SG

Patient tel#: 0403525345
DOB: 04/12/1989 SEX: F 34Y

To: **DR CARMEN ABAFFY**
INSTANT SCRIPTS
LEVEL 19
644 CHAPEL ST
SOUTH YARRA VIC 3141

HORMONES

Date	27/03/24				
Time	0932				
Lab Id.	968365571				
S FSH	6.4	Units	Reference		
S LH	4.2	IU/L			
S PROLACTIN	189	IU/L			
S OESTRADIOL	202	mIU/L	(90-630)		
S TESTO	0.5	pmol/L			
S SHBG	49	nmol/L	(<1.8)		
S cFREE TEST	7	nmol/L	(25-150)		
		pmol/L	(1-34)		

Comments on Lab Id. 968365571 27/03/24 0932

Reference Intervals	FSH (IU/L)	LH (IU/L)	Oestradiol (pmol/L)	Progesterone (nmol/L)	
Female:					
Follicular phase	2.8 - 9.3	2.8 - 7.6	46 - 607	0.6 - 4.7	
Mid cycle	3.0 - 19.2	10.5 - 85	315 - 1828	2.4 - 9.4	
Luteal phase (D21)	1.7 - 7.7	1.0 - 11.4	161 - 774	5.3 - 86	
Postmenopausal	31 - 153	12.0 - 75	<200	0.3 - 2.5	

PLEASE NOTE: High dose biotin (>5 mg/day) may artefactually affect the hormone results. If the patient is taking 5-20 mg/day of biotin, suggest withhold for at least 8 hours before blood test (if taking 300 mg/day, withhold for at least 72 hours).

For clinical enquiries, please contact Chemical Pathologist
Dr Ken Sikaris on 9287 7720.

Macroprolactin testing not indicated.

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SOUTH YARRA VIC 3141

ANTI-MULLERIAN HORMONE

Date 27/03/24
Time 0932
Lab Id. 968365571
S AMH 7

Units Reference
pmol/L (3-55)

Comments on Lab Id. 968365571 27/03/24 0932

AMH

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

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.

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