

PAULA KINDELAN

Lab ID 646769922 DOB 10/12/1969 (49 Yrs FEMALE)

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Requested 28/05/2019

Collected 29/05/2019 08:51 AEDT Received 29/05/2019 08:55 AEDT

Gonadal Hormones

Copy to

FSH	35	IU/L
LH	23	IU/L
Oestradiol	72	pmol/L
Progesterone	< 0.5	nmol/L

FSH IU/L 2 - 10 7 - 24 1 - 10 20 - 140	LH IU/L 2 - 7 9 - 74 1 - 9 10 - 65	pmol/L 110 - 180 550 - 1650	
20 - 140 <5	10 - 65 <9	<200 <80	<2.2 <1.5
	IU/L 2 - 10 7 - 24 1 - 10 20 - 140	IU/L IU/L 2 - 10 2 - 7 7 - 24 9 - 74 1 - 10 1 - 9 20 - 140 10 - 65	IU/L IU/L pmol/L 2 - 10 2 - 7 110 - 180 7 - 24 9 - 74 550 - 1650 1 - 10 1 - 9 180 - 840 20 - 140 10 - 65 <200

Comments

The combination of amenorrhoea in a women who is not pregnant and has an intact uterus with hot flushes is indicative of the menopausal state. FSH levels greater than 20 IU/L on at least 3 occasions 4 weeks apart confirms the diagnosis. Elevated FSH levels due to mid-cycle peak can be distinguished by measuring LH and oestradiol levels in conjunction with the FSH.

Falsely elevated Abbott oestradiol levels may be seen in patients on fulvestrant (FASLODEX) or mifepristone (MIFEGYNE, MIFEPRE) therapies. This elevation can be observed in patients treated with mifepristone for up to two weeks post treatment.

EΑ

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