To: **Walk In Patients- Bhandup**
Rupa Solitaire Bldg A-1
301,302 and 303, 3rd Floor Millennuim Busness Park- MIDC-Mahape
Navi Mumbai - 400710
Contact: 7045919303
Report Of: Mrs. TEST1
Pt. Contact:

Sample ID	1407202301
Patient ID	10023237
Received on	14/07/2023 16:10
Registered on	14/07/2023 16:09
Reported on	14/07/2023 05:44
Referred by	
Sonography by	**Pooenima Singh**

EVICOSCREEN - EVIDENCE BASED COMPREHENSIVE PRENATAL SCREENING REPORT

Patient Name: Mrs. TEST1 Patient DOB: 01/01/1991

Gender: FEMALE City:

Method: Electro **Sample Type:**Serum

Test Findings

Parameter	Observed Value	Units
ANTI-MULLERIAN HORMONE /MULLERIAN INHIBITING SUBS	**5.00**	**ng/mL**

Interpreting the Results

Adult Reference Group	Age Range (years)	Ranges (ng/mL)
Females	18 - 25	0.96 - 13.34
Females	26 - 30	0.17 - 7.37
Females	31 - 35	0.07 - 7.35
Females	36 - 40	0.03 - 7.15
Females	41 - 15	0.00 - 3.27
Females	≥ 46	0.00 - 1.15

UK NEQAS International Quality Expertise Lab Reg. No. 90968

Verified by
Dr. Suresh Bhanushali
MD (Path), Consultant Pathologist

About The Test

The Anti-Müllerian Hormone (AMH) test is a blood test used to measure the levels of AMH in the bloodstream. AMH is a hormone produced by the ovarian follicles in females and the Sertoli cells in males. The test is primarily used to assess ovarian reserve in females and evaluate testicular function in males.

The AMH test is commonly used in reproductive medicine to assess fertility potential in females. It provides an indication of the number of eggs remaining in the ovaries, known as ovarian reserve. A higher AMH level generally suggests a larger number of eggs and better fertility potential, while a lower AMH level may indicate diminished ovarian reserve. Additionally, AMH can be used to diagnose and monitor women with polycystic ovary syndrome (PCOS).

Whereas in males, the AMH test is used to evaluate testicular function and can be helpful in assessing pubertal development stage & disorders of sexual development, such as ambiguous genitalia or undescended testicles. Elevated levels of AMH indicate the presence of functional testicular tissue, while low or undetectable levels may suggest absent or abnormal testicular development.

The interpretation of AMH test results should be done by a healthcare professional with expertise in reproductive medicine or pediatric endocrinology, depending on the patient's age and clinical context. The results are typically considered in conjunction with other diagnostic tests and the patient's medical history to provide a comprehensive assessment of fertility potential or testicular function.

Notes:

1. AMH Levels reflect the number of eggs or the ovarian reserve.
2. High levels are seen in Polycystic ovarian syndrome, irregular menstrual cycles, Granulosa cell tumor and in menopause.
3. Low levels indicate reduced ovarian reserve.
4. Patients on Biotin supplement may have interference in some immunoassays. For sample collection, at least 8-hours wait time is recommended for individuals taking high dose of Biotin (more than 5 mg per day) supplements.
5. Though AMH do not vary much during menstrual cycle, studies have observed significant variation in a few cases. Clinical correlation with repeat testing may be indicated in such cases.

Disclaimers:

1. The test results released in this report pertain to the submitted specimen and patient information. (The sample was drawn outside the source location)
2. All test results are dependent on the quality of the sample received by the Laboratory.
3. Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring clinician.
4. As with any medical test, there is always a chance of failure or error in sample analysis though extensive measures are taken to avoid these errors.
5. The repeat follow-up testing (if needed) will be chargeable at each instance.
6. Test results may show inter-laboratory variations & Lilac Insights does not bear responsibility for such findings.
7. Any disputes or claims concerning the test or test results are exclusively subject to the Courts/Forum at Mumbai jurisdiction.
8. Test results are not valid for medico legal purposes.
9. Each sample received at Lilac Insights' processing centre is handled with the utmost sensitivity and care. All samples received on Sundays and National holidays are stored as per specific guidelines for the respective specimens and processed on the next day.

References:

1. The Correlations of Anti-Mullerian Hormone, Follicle-Stimulating Hormone and Antral Follicle Count in Different Age Groupsof Infertile Women. Royan Institute International Journal of Fertility and Sterility Vol 8, No 4, Jan-Mar 2015, Pages: 393-398
2. Age-specific serum antimullerian hormone levels in women with and without polycystic ovary syndrome. Fertility and Sterility Vol. 102, No. 1, July 2014
3. Anti-Mullerian Hormone: A New Marker of Ovarian Function. J Obstet Gynaecol India. 2014 Apr; 64(2): 130–133.
4. AMH- ovarian reserve marker.Fertil steril. 2005; 83(4): 979-87. Human Reprod. 2007 Mar; 22(3).
5. Grinspon & Ray: AMH & Sertoli cell function in paediatrics. Horm Res Paediatr 73: 81-92, 2010.
6. Instructions for use- Access Anti-Mullerian Hormone (AMH) - B13127

Verified by
Dr. Suresh Bhanushali
MD (Path), Consultant Pathologist

UK NEQAS
International Quality Expertise
Lab Reg. No. 90968