

Patient Name :  
 DOB/Age/Gender : Bill Date :  
 Patient ID / UHID : Sample Collected :  
 Referred By : Sample Received :  
 Sample Type : Report Date :  
 Barcode No : Report Status :

## BIOCHEMISTRY REPORT

### Androgen Index

<b>Testosterone (Total)</b> (Serum,ECLIA)	40.3	ng/dL	15-70
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#### Interpretation :

- Testosterone is the major androgenic hormone. It is responsible for the development of the male external genitalia and secondary sexual characteristics. In females, its main role is as an estrogen precursor. In both genders, it also exerts anabolic effects and influences behavior.
- Testing is useful in males for: Evaluation of symptoms or signs of possible hypogonadism, delayed or precocious puberty, Monitoring testosterone replacement or antiandrogen therapy.
- Testing is useful in females for: Evaluation of symptoms or signs of hirsutism, virilization, and oligo-amenorrhea, possible testosterone deficiency, diagnosis of androgen-secreting tumors, evaluation of infants with ambiguous genitalia or virilization

#### Note :

Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended. Ref: Arch Pathol Lab Med—Vol 141, November 2017

<b>SHBG (Sex Hormone Binding Globulin)</b> (Serum,CLIA)	44.19	nmol/L	18-114 First Trimester : 26 - 241 Second Trimester : 85 - 491 Third Trimester : 85 - 491
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#### Interpretation :-

1. SHBG is important transport protein for estrogens and androgens in peripheral blood. SHBG concentration is a major factor regulating their distribution between the protein-bound and free states.
2. SHBG concentration in plasma is regulated by androgen/estrogen balance, thyroid hormones, insulin and dietary factors.
3. Plasma SHBG concentrations are affected by many different medical conditions.
  - A. High values being found in hyperthyroidism, hypogonadism, androgen insensitivity and hepatic cirrhosis in men.
  - B. Low concentrations are found in myxoedema, hyperprolactinaemia and syndromes of excessive androgen activity.
4. Measurement of SHBG along with Free Androgen index (FAI), which is ratio of testosterone to SHBG helps in identifying excessive androgen activity & useful in the evaluation of mild disorders of androgen metabolism.

<b>Free Androgen Index (FAI)</b>	3.16	Oral contraceptives : Upto 3.4 Postmenopausal, untreated : Upto 6.6 Hirsute : 1.7 - 20.6 Menstrual Cycle : Entire cycle : 0.8 - 10 Follicular phase : 0.8 - 9.3 Mid cycle : 1.3 - 17 Luteal phase : 0.8 - 11
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