

LABORATORY REPORT

NAME : MR.BC0283	REFERRED BY : SELF	VISIT NO : VAMP26148150
AGE : 40Y 0M 0D	ZERO TARIFF CLIENT CODE	COLLECTED ON : 21-04-2026 10:00
GENDER : Male	LAB MR# : AAMP01479429	RECEIVED ON : 21-04-2026 19:51
OP / IP / DG # :		APPROVED ON : 22-04-2026 18:03
		REPORT STATUS : Final Report



Test Name	Result	Biological Ref. Interval	Unit
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BIOCHEMISTRY

Inhibin B (Serum)

Inhibin B EIA	162.00	151.7 - 173.9	pg/mL
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Interpretation:

INHIBIN B (FEMALES):

Inhibin B is a nonsteroid hormone which originates in the ovarian follicles and regulates follicle-stimulating hormone (FSH) secretion. Inhibin B seems to be directly related to fertility. Inhibin B levels decrease in the late follicular phase. The timing of the inhibin B rise suggests that it plays a role in regulation of folliculogenesis via negative feedback on the production of FSH. At menopause, with the depletion of ovarian follicles, serum inhibin B decreases to very low or undetectable levels.

Low levels of inhibin B is associated with :

- Impaired ovulation
- Decreased success with IVF
- Lower pregnancy rates
- Increased risk of miscarriage

High levels of inhibin B are associated with granulosa cell tumors and mucinous epithelial ovarian tumors .

It is useful for postoperative surveillance for patients with known ovarian cancer. Elevations of inhibin B after treatment are suggestive of residual, recurrent, or progressive disease.

INHIBIN B (MALES): In men, inhibin B is produced by Sertoli cells and has been considered a good marker of spermatogenesis. In males Inhibin B increases immediately after birth and then decreases to minimal levels before puberty when it again increases to higher levels.

Limitation:

1. Inhibin values fluctuate during the menstrual cycle. Inhibin levels in premenopausal women should be interpreted with caution.
2. Do not interpret serum inhibin levels as absolute evidence of the presence or the absence of malignant disease. Use results in conjunction with information from the clinical evaluation of the patient and other diagnostic procedures.



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Sanjeeta

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Consultant Biochemist

Disclaimer:

1. All results released pertain to the specimen as received by the lab for testing and under the assumption that the patient indicated or identified on the bill/test requisition form is the owner of the specimen.
2. Clinical details and consent forms, especially in Genetic testing, histopathology, as well as wherever applicable, are mandatory to be accompanied with the test requisition form. The non-availability of such information may lead to delay in reporting as well as misinterpretation of test results. The lab will not be responsible for any such delays or misinterpretations thereof.
3. Test results are dependent on the quality of the sample received by the lab. In case the samples are preprocessed elsewhere (e.g., paraffin blocks), results may be compromised.
4. Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
5. Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.
6. Genetic reports as well as reports of other tests should be correlated with clinical details and other available test reports by a qualified medical practitioner. Genetic counselling is advised in genetic test reports by a qualified genetic counsellor, medical practitioner or both.
7. Samples will be discarded post processing after a specified period as per the laboratory's retention policy. Kindly get in touch with the lab for more information.
8. If accidental damage, loss, or destruction of the specimen is not attributable to any direct or negligent act or omission on the part of Ampath Labs or its employees, Ampath shall in no event be liable. Ampath lab's liability for a lack of services, or other mistakes and omissions, shall be restricted to the amount of the patient's payment for the pertinent laboratory services.

