



LABORATORY REPORT

NAME : MR.BC0638 REFERRED BY : SELF VISIT NO : VAMP26148078
AGE : 40Y 0M 0D ZERO TARIFF CLIENT CODE COLLECTED ON : 21-04-2026 10:00
GENDER : Male LAB MR# : AAMP01479357 RECEIVED ON : 21-04-2026 19:51
OP / IP / DG # : APPROVED ON : 22-04-2026 17:59
REPORT STATUS : Final Report



Test Name	Result	Biological Ref. Interval	Unit
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Growth Disorder Panel (Hgh, Igf-1, Igfbp-3)

BIOCHEMISTRY

Growth Hormone (GH) (Serum)

Growth Hormone (GH) ECLIA	3.200	Reference values for dynamic testing - Normal basal range: Upto 5.0 Normal response to Insulin Tolerance: >10 Normal response to Arginine: >7.5 Normal response to L-Dopa: >7.5	ng/ml
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Interpretation:

- Growth hormone is secreted from inferior pituitary "master gland"
- Growth hormone excess is typically associated with gigantism and acromegaly
- Growth hormone deficiency results in short stature in children

Growth hormone (GH) levels in normal and diseased populations overlap, GH suppression and stimulation tests are needed to evaluate conditions of GH excess and deficiency; random GH levels are inadequate.

As the GH test has limited value in assessing growth hormone secretion in normal children, Insulin-Like Growth Factor 1 serum is recommended as the first test for assessing deficient or excess growth during childhood and adolescent development.

Growth hormone is secreted in surges; single measurements are of limited diagnostic value.

IGF-1 (Insulin like Growth Factor 1) SOMATOMEDIN-C (Serum)

IGF-1 CLIA	145.00	101-267	ng/mL
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IGF Binding Protein-3 (IGFBP-3) (Serum)

IGF Binding Protein-3 (IGFBP-3) CLIA	4.20	3.5 - 7.0	ug/ml
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Interpretation:

IGFBP-3 is used as an aid in the evaluation of growth disorders. It is growth hormone (GH) dependent and therefore useful in the evaluation of GH secretion





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Growth Disorder Panel (Hgh, Igf-1, Igfbp-3)			

Sanjeeta

Dr. Sanjeeta
MBBS,MD (Biochemistry)
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.

