TEST: FOLLICLE STIMULATING HORMONE (FSH)

PRINCIPLE:
FSH is secreted by the anterior pituitary under the control of hypothalamic gonadotrophin releasing hormone. The function of FSH in both males and females is to facilitate the development and maintenance of the gonadal tissues. These tissues synthesize and secrete steroid hormones, which in turn control FSH concentrations by negative feedback. At menopause, ovarian function and steroid secretion cease, causing FSH concentrations to rise due to a lack of negative feedback control. FSH concentrations are similarly raised in women of pre-menopausal age who suffer ovarian failure, or whose ovaries failed to mature during puberty. Elevated FSH concentrations are found in males when the testes have failed to develop to functional maturity, or, in cases of infertility due to primary testicular failure.

SPECIMEN REQUIREMENTS:
2ml serum collected in a red top tube with no additive or in a serum separator tube (gel barrier). Serum should be separated from the clot as soon as possible to avoid hemolysis. Store/transport sample at room temperature (15-30°C) for no longer than 8 hours or at 2-8°C for up 48 hours. If testing is further delayed, sera should be frozen at -20°C or lower. Avoid repeat freeze-thaw cycles.

METHOD:
Enhanced Chemiluminescence.

REFERENCES:

Normal Range:
Normal Female Mid Follicular phase: 3.85-8.78 mIU/ml
Normal Female Mid Cycle Peak: 4.54-22.51 mIU/ml
Normal Female Mid Luteal Phase: 1.79-5.12 mIU/ml
Postmenopausal Female: 21.5-131 mIU/ml
Normal Male: 1.27-19.26 mIU/ml

Turnaround Time: 3 days