

FSH

Acceptable Tube Type



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| Alternate Name: | Follicle Stimulating Hormone |
| Performing Lab: | New Hanover |
| Specimen Container: | Yellow serum separator tube, green top tube (lithium heparin), or a red top tube. |
| Minimum Volume Required: | 1.0 mL |
| Testing Availability | Routine: 24 hours/day Stat: Yes |
| Turnaround Time: | Routine: 4 hours Stat: <1 hour |
| Special Handling: | None |
| Patient Preparation: | None |
| Specimen Stability: | 24 hours at room temp, 7 days at 2-8C, or 14 days frozen. |

Reference Range:

Normally menstruating females:

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| Follicular phase | 2.3 – 12.6 mIU/mL |
| Midcycle peak | 5.2 – 17.5 mIU/mL |
| Luteal phase | 1.7 – 9.5 mIU/mL |

Post-menopausal on MHT: 5.9 – 72.8 mIU/mL

Post-menopausal not on MHT: 12.7 – 132.2 mIU/mL

Males: 0.7 – 10.8 mIU/mL

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| Critical Value: | None |
| CPT Code: | 83001 |
| Testing Methodology: | Homogeneous, sandwich chemiluminescent immunoassay based on LOCI technology. |
| Causes for Specimen Rejection: | Improper labeling |
| Other Comments: | |
| Clinical Significance: | <p>In females FSH stimulates maturation of eggs and induces follicles to secrete Estradiol and progesterone. FSH secretion typically rises within the female menstruation cycle; as estrogen levels decline at menopause, FSH levels become and remain high. In males FSH stimulates spermatogenesis.</p> <p>Serial FSH measurements may be used in evaluation of fertility, as a guide in induction of pregnancy via assisted reproductive techniques, and in assessing onset of menopause. Similarly for males, FSH levels may be used to evaluate reproductive capacity under control of the pituitary and testes.</p> <p>Elevated LH and FSH levels may indicate primary ovarian or testicular failure. Menopause and polycystic ovary disease in females may also cause high FSH levels.</p> <p>Low FSH and LH levels indicate either pituitary deficiency or suppression from hypergonadism in both sexes.</p> |