

SPECIMEN INFORMATION

SPECIMEN: _____
 REQUISITION:
 LAB REF NO:

DOB:
 AGE:
 GENDER:
 FASTING:

ORDERING PHYSICIAN

CLIENT INFORMATION

DirectLabs
 4040 Florida St.
 Ste 101
 Mandeville, LA 70448

COLLECTED:

Clinical Info:

RECEIVED:

REPORTED:

Test Name	Result	Flag	Reference Range	Lab
FASTING: YES				
GROWTH HORMONE (GH)				
GROWTH HORMONE (GH)	15.6	HIGH	< OR = 7.1 ng/mL	01

Because of a pulsatile secretion pattern, random (unstimulated) growth hormone (GH) levels are frequently undetectable in normal children and adults and are not reliable for diagnosing GH deficiency. Regarding suppression tests, failure to suppress GH is diagnostic of acromegaly.

Typical GH response in healthy subjects:

Using the glucose tolerance (GH suppression) test, acromegaly is ruled out if the patient's GH level is <1.0 ng/mL at any point in the timed sequence. [Katznelson L, Laws Jr ER, Melmed S, et al. Acromegaly: an Endocrine Society Clinical Practice Guideline. J Clin Endocrinol Metab 2014; 99: 3933-3951].

Using GH stimulation testing, the following result at any point in the timed sequence makes GH deficiency unlikely:

Adults (> or = 20 years):

Insulin Hypoglycemia > or = 5.1 ng/mL
 Arginine/GHRH > or = 4.1 ng/mL
 Glucagon > or = 3.0 ng/mL

Children (< 20 years):

All Stimulation Tests > or = 10.0 ng/mL

This growth hormone assay (Beckman Coulter DxI) produces results approximately 20% lower than the previously-used assay (Siemens Immulite). Interpret results accordingly relative to the provided clinical thresholds, all of which have been prescribed by endocrine professional societies without regard to any specific growth hormone assay.

Performing Laboratory Information:

01: Quest Diagnostics-West Hills, 8401 Fallbrook Ave, West Hills CA, phone:
 Medical Director: MD Enrique Terrazas