



# Labsmart Software

## Sample Letterhead

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yourlabname@gmail.com

<https://www.yourlabname.in/>**Mr. Dummy**

Age / Sex : 28 YRS / M  
Referred by : Dr. Sachin Patil (MBBS)  
Reg. no. : 1098



1098

Registered on : 19/11/2024 05:48 PM  
Collected on : 19/11/2024  
Received on : 19/11/2024  
Reported on : 19/11/2024 05:48 PM

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**SEROLOGY & IMMUNOLOGY**

TEST	VALUE	UNIT	REFERENCE
PROGESTERONE	0.8	ng/mL	

**Menstrual Cycle Phase:**

- Follicular Phase (Early): Serum progesterone levels are typically low (<1 ng/mL), as progesterone is produced in significant amounts only after ovulation.
- Luteal Phase (Mid to Late): Progesterone levels rise significantly, usually ranging from 5 to 20 ng/mL. This increase is due to the secretion of progesterone by the corpus luteum, which supports the uterine lining for potential implantation.
- Postmenopausal Women: Progesterone levels are generally low (<1 ng/mL) due to the cessation of ovarian function.

**Pregnancy:**

First Trimester: Progesterone levels increase substantially, often ranging from 11 to 44 ng/mL, to support the early stages of pregnancy and maintain the uterine lining.  
Second and Third Trimester: Progesterone levels continue to rise, often exceeding 100 ng/mL, to sustain pregnancy and prepare the body for labor.

**Ovulation Assessment:**

Ovulation Detection: Progesterone levels are assessed around day 21 of a 28-day cycle. A level above 5 ng/mL typically indicates that ovulation has occurred.

**Hormonal Imbalances:**

Low Progesterone Levels: May indicate conditions such as luteal phase defect, where the corpus luteum fails to produce adequate progesterone, potentially leading to infertility or recurrent miscarriage.

Elevated Progesterone Levels: Can be seen in conditions such as ovarian cysts or tumors, or if there is ongoing pregnancy.

**Supplemental Progesterone:** During Treatment: If a patient is on progesterone supplements, levels should be monitored to ensure therapeutic levels are achieved and to adjust dosages as needed.

**Progesterone in Endocrine Disorders:**

Polycystic Ovary Syndrome (PCOS): Progesterone levels may be lower due to anovulation.

Adrenal Disorders: Elevated levels may be seen in conditions involving adrenal hyperplasia or tumors.

Note: Interpretation of serum progesterone levels should always be correlated with clinical findings, menstrual history, and other relevant laboratory tests for accurate diagnosis and treatment planning.

~~~ End of report ~~~

Mr. Sachin Sharma  
DMLT, Lab Incharge

Dr. A. K. Asthana  
MBBS, MD Pathologist

NOT VALID FOR MEDICO LEGAL PURPOSE

Work timings: Monday to Sunday, 8 am to 8 pm

Please correlate clinically. Although the test results are checked thoroughly, in case of any unexpected test results which could be due to machine error or typing error or any other reason please contact the lab immediately for a free evaluation.