



	MD (Pathology 6 Chairman & Col	nsultant Pathologist	CEO & Consultant Pa	ithology) thologist
NAME	: Mr. JASHAN SINGH			
AGE/ GENDER	: 15 YRS/MALE	PATI	ENT ID	: 1713455
COLLECTED BY	: SURJESH	REG. I	NO./LAB NO.	: 012501010008
REFERRED BY	: CENTRAL PHOENIX CLUB (A	AMBALA CANTT) REGIS	TRATION DATE	: 01/Jan/2025 09:15 AM
BARCODE NO.	: 01523282	COLLI	ECTION DATE	: 01/Jan/2025 09:24AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPO	RTING DATE	: 01/Jan/2025 04:49PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD	, AMBALA CANTT		
CLIENT ADDRESS Test Name	: 6349/1, NICHOLSON ROAD,	AMBALA CANTT Value	Unit	Biological Reference interva
	: 6349/1, NICHOLSON ROAD,			Biological Reference interva
		Value	DLOGY	Biological Reference interva

3. Most cortisol in the blood is bound to a protein; only a small percentage is "free" and biologically active. Blood cortisol testing evaluates both protein-bound and free cortisol while urine and saliva testing evaluate only free cortisol, which should correlate with the levels of free cortisol in the blood. Multiple blood and/or saliva cortisol levels collected at different times, such as at 8 am and 4 pm, can be used to evaluate both cortisol levels and diurnal variation. A 24-hour urine cortisol sample will not show diurnal variation; it will measure the total amount of unbound cortisol excreted in 24 hours.

CORTISOL FUNCTIONS:

1.It helps the body use sugar (glucose) and fat for energy (metabolism), and it helps the body manage stress.

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- 2.Bone growth
- 3.Blood pressure control
- 4.Immune system function
- 5. Metabolism of fats, carbohydrates, and protein
- 6.Nervous system function
- 7.Stress response

THINGS TO KNOW ABOUT CORTISOL MEASUREMENT:

1. An increased or normal cortisol level just after waking along with a level that does not drop by bedtime suggests excess cortisol and Cushing syndrome. If this excess cortisol is not suppressed after an overnight dexamethasone suppression test, or if the 24-hour urine cortisol is elevated, or if the late-night salivary cortisol level is elevated, it suggests that the excess cortisol is due to abnormal increased ACTH production by the pituitary or a tumor outside of the pituitary or abnormal production by the adrenal glands. Additional testing will help to determine the exact cause

2.If insufficient cortisol is present and the person tested responds to an ACTH stimulation test, then the problem is likely due to insufficient ACTH production by the pituitary. If the person does not respond to the ACTH stimulation test, then it is more likely that the problem is based in the adrenal glands. If the adrenal glands are underactive, due to pituitary dysfunction and/or insufficient ACTH production, then the person is said to have secondary adrenal insufficiency. If decreased cortisol production is due to adrenal damage, then the person is said to have primary adrenal insufficiency or Addison disease.

3. Once an abnormality has been identified and associated with the pituitary gland, adrenal glands, or other cause, then the health practitioner may use other testing such as CT (computerized tomography) or MRI (magnetic resonance imaging) scans to locate the source of the excess (such





DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY)

KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt -133 001, Haryana KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt - 133 001, Haryana 0171-2643898, +91 99910 43898 care@koshealthcare.com www.koshealthcare.com







	Dr. Vinay ChopraDr. Yugam ChopraMD (Pathology & Microbiology)MD (Pathology)Chairman & Consultant PathologistCEO & Consultant Pathologist			
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as a pituitary, adrenal, or other tumor) and to evaluate the extent of any damage to the glands.

4.Similar to those with adrenal insufficiency, people with a condition called congenital adrenal hyperplasia (CAH) have low cortisol levels and do not respond to ACTH stimulation tests. Cortisol measurement is one of many tests that may be used to help evaluate a person for CAH. 5.Heat, cold, infection, trauma, exercise, obesity, and debilitating disease can influence cortisol concentrations. Pregnancy, physical and emotional stress, and illness can increase cortisol levels. Cortisol levels may also increase as a result of hyperthyroidism or obesity. A number of drugs can also increase levels, particularly oral contraceptives (birth control pills), hydrocortisone (the synthetic form of cortisol), and spironolactone.

6.Adults have slightly higher cortisol levels than children do.

7. Hypothyroidism may decrease cortisol levels. Drugs that may decrease levels include some steroid hormones.

8. Salivary cortisol testing is being used more frequently to help diagnose Cushing syndrome and stress-related disorders but still requires specialized expertise to perform.

NOTE:

1.Normally, cortisol levels rise during the early morning hours and are highest about 7 a.m. They drop very low in the evening and during the early phase of sleep. But if you sleep during the day and are up at night, this pattern may be reversed. If you do not have this daily change (diurnal rhythm) in cortisol levels, you may have overactive adrenal glands. This condition is called Cushing's syndrome. 2.The timing of the cortisol test is very important because of the way cortisol levels vary throughout a day. If your doctor thinks you might make too much cortisol, the test will probably be done late in the day. If your doctor thinks you may not be making enough, a test is usually done in the morning.

** End Of Report ***





DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY) DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY)

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