

PF-PTD-158

Serum hCG



Synonyms

Clinical Indication

Human Chorionic Gonadotrophin (HCG)

For diagnosis of pregnancy, qualitative urine testing by POCT should routinely be used and is reliable from at least 10 days after a missed menstrual period. Follow-up with serum HCG testing is only necessary if there is believed to be an issue with the pregnancy. Ectopic pregnancy should be considered and serum hCG measured in any young woman with unexplained abdominal pain whether or not she has missed a period or had abnormal vaginal bleeding.

Results should not be interpreted in isolation but in the context of clinical features.

Serum hCG can be positive within 7-9 days of conception.

If an ectopic pregnancy or a miscarriage is suspected, two specimens should be taken 48 hours apart. For an intrauterine pregnancy, the hCG should double during this period. Generally the rate of increase is slower for ectopic pregnancies, although for early ectopic pregnancies the hCG can still double in 48 hours.

For a complete miscarriage, the hCG should halve during this period. If the serum hCG is over 5,000 U/L, it should be possible to confirm intrauterine pregnancy by transvaginal (not abdominal) ultrasound scan.

Part of Profile / See Also

Request Form

Availability / Frequency of

Analysis

Turnaround Time

Patient Preparation

Sample Requirements

Specimen Type

Volume

Acceptable Containers

Combined Pathology manual Blood form or ICE request

On request if specific criteria met.

Same Day

None required

Serum and plasma

1 ml



Yellow top (SST) tube



Green top (lithium-heparin) tube



paediatric orange top (lithium-heparin)



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paediatric green top (lithium-heparin)

Plain serum samples may also be used.

Reference Range & Units

Non-pregnancy levels < 5 U/mL.

Pregnancy levels:

| Time since LMP | Approximate serum hCG (IU/L) |
|----------------|------------------------------|
| <1 week | 5 - 50 |
| 1 - 2 weeks | 50 - 500 |
| 2 - 3 weeks | 100 - 5,000 |
| 3 - 4 weeks | 500 - 10,000 |
| 4 - 5 weeks | 1,000 - 50,000 |
| 5 - 6 weeks | 10,000 - 100,000 |
| 6 - 8 weeks | 15,000 - 200,000 |
| 2 - 3 months | 10,000 - 100,000 |

Interferences

Levels may remain raised for up to 2 weeks following childbirth and up to 4 weeks following abortion. Patients receiving courses of hCG (e.g. Pregnyl) or hMG (Perganol) may give false positive results for a few days after administration of the drug.

In post-menopausal women on dialysis, serum hCG can be up to ten times the upper reference limit due to reduced renal excretion of physiologically produced hCG

Interpretation & Clinical

Decision Value (if applicable)

A low serum HCG does not exclude pregnancy. False negative results can occur in very early or abnormal pregnancy.

References

Association for Clinical Biochemistry and Laboratory Medicine Analyte Monographs http://www.acb.org.uk/docs/default-source/committees/scientific/amalc/hcg.pdf

Test code

BHCG

Lab Handling

Analysed from primary tube and stored at 4°C Serum and plasma stable for 7 days at 4°C.