

# Adrenocorticotrophic Hormone (ACTH) Test

## PATIENT INFORMATION

Full Name:: \_\_\_\_\_ Date of Birth:: \_\_\_\_\_ dd / mm / yyyy  
Gender:: \_\_\_\_\_ Address:: \_\_\_\_\_  
Phone Number:: \_\_\_\_\_ Email:: \_\_\_\_\_  
Date of Test:: \_\_\_\_\_ dd / mm / yyyy

## MEDICAL HISTORY

Current Medications:

Previous Diseases/Conditions:

Known Allergies:

## ACTH TEST RESULTS

Sample Time:: \_\_\_\_\_

Normal Range: 10 to 50 pg/mL

ACTH Level:: \_\_\_\_\_

## FINDINGS

Normal ACTH Levels:

Elevated ACTH Levels:

Decreased ACTH Levels:

## INTERPRETATION

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Interpretation

Clinical Impression:

Recommendations:

Overall Interpretation: