

Patient Information	Specimen Information	Client Information

<pre>IPID PANEL, STANDARD</pre>		TING:YES				-
CHOLESTEROL, TOTAL 198 <200 mg/dL E HDL CHOLESTEROL 44 > 0 R = 40 mg/dL E TRIGLYCERIDES 206 H <150 mg/dL E TRIGLYCERIDES 206 H <150 mg/dL E TRIGLYCERIDES 206 H <150 mg/dL E If a non-fasting specimen was collected, consider repeat triglyceride testing on a fasting specimen if clinically indicated. Jacobson et al. J. of Clin. Lipidol. 2015;9:129-169. LDL-CHOLESTEROL 122 H mg/dL (calc) E Reference range: <100 Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with > or = 2 CHD risk factors. LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C. Martin SS et al. JAMA. 2013;310(19): 2061-2068 (http://education.QuestDiagnostics.com/faq/FAQ164) CHOL/HDLC RATIO 4.5 <5.0 (calc) E NON HDL CHOLESTEROL 5154 H <130 mg/dL (calc) E For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic option. S CRP 1.1 mg/L E Reference Range Optimal <1.0 Average relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. 3.1-10.0 Fersistent elevation, upon retesting, may be associated with infection and inflammation. OMPREHENSIVE METABOLIC P			n Range	Out Of Range	Reference Range	La
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	GLUCOSE	R	18		65-99 mg/dL	

CLIENT SERVICES: 866.697.8378



Patient Information	Specimen Informat	tion	Client Information	
Test Name	In Range	Out Of Range	Reference Range	Lab
UREA NITROGEN (BUN) CREATININE EGFR The eGFR is based on the CM the new eGFR from a previou result, go to https://www.k kdoqi/gfr%5Fcalculator BUN/CREATININE RATIO SODIUM POTASSIUM CHLORIDE CARBON DIOXIDE CALCIUM PROTEIN, TOTAL ALBUMIN GLOBULIN ALBUMIN/GLOBULIN RATIO BILIRUBIN, TOTAL ALKALINE PHOSPHATASE AST ALT	ns Creatinine of NOT APPLICA 136 4.6 100 29 9.9 7.4 4.8 2.6 1.8 0.5 42 37	or Cystatin C essionals/	6-22 (calc) 135-146 mmol/L 3.5-5.3 mmol/L 98-110 mmol/L 20-32 mmol/L 8.6-10.3 mg/dL 6.1-8.1 g/dL 3.6-5.1 g/dL 1.9-3.7 g/dL (calc) 1.0-2.5 (calc) 0.2-1.2 mg/dL 36-130 U/L 10-40 U/L 9-46 U/L	
<pre>HEMOGLOBIN A1c For the purpose of screenir diabetes: <5.7% Consistent with 5.7-6.4% Consistent with (prediabetes) > or =6.5% Consistent with This assay result is consist of diabetes. Currently, no consensus exi hemoglobin A1c for diagnosi According to American Diabe guidelines, hemoglobin A1c control in non-pregnant dia metrics may apply to specif Standards of Medical Care i </pre>	the absence of increased ris diabetes stent with a de sts regarding s of diabetes etes Association <7.0% represent abetic patients fic patient pop	of diabetes sk for diabetes ecreased risk use of in children. on (ADA) ats optimal s. Different oulations.	<5.7 % of total Hgb	EN
GGT TSH TESTOSTERONE, TOTAL, MALES (ADULT), IA	24 1.82 429		3-90 U/L 0.40-4.50 mIU/L 250-827 ng/dL	EN EN EN

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Specimen Information	Client Information
	Specimen Information

Endocrinology

Test Name		Result	Reference Range	Lab
VITAMIN D,25-OH,TOTAL,IA		23 L	30-100 ng/mL	EN
Vitamin D Status	25-OH Vitamin D:			
Deficiency: Insufficiency: Optimal:	<pre><20 ng/mL 20 - 29 ng/mL > or = 30 ng/mL</pre>			

For 25-OH Vitamin D testing on patients on D2-supplementation and patients for whom quantitation of D2 and D3 fractions is required, the QuestAssureD(TM) 25-OH VIT D, (D2,D3), LC/MS/MS is recommended: order code 92888 (patients >2yrs).

For additional information, please refer to http://education.QuestDiagnostics.com/faq/FAQ199 (This link is being provided for informational/ educational purposes only.)

Physician Comments:

PERFORMING SITE:

EN QUEST DIAGNOSTICS-WEST HILLS, 8401 FALLBROOK AVENUE, WEST HILLS, CA 91304-3226 Laboratory Director: TAB TOOCHINDA, MD, CLIA: 05D0642827