

**PatientReport** 

Specimen ID:
Control ID:

Phone: (800) 539-6119

Rte: 00

**Patient Details** 

DOB: Age(y/m/d):

Gender: Patient ID: Specimen Details
Date collected:
Date received:

Date received: Date entered: Date reported: **Physician Details** 

Ordering: Referring: ID: NPI:

General Comments & Additional

Information

Alternate Control Number: Total Volume: Not Provided

**Ordered Items** 

Alternate Patient ID: Fasting:

Acct#:

Walk-In Lab, LLC

**VART** verified

FSH and LH; Testosterone, Free and Total; Hemoglobin A1c; Thyroxine (T4) Free, Direct, S; DHEA-Sulfate; Cortisol; TSH; Prolactin; Estradiol; Prostate-Specific Aq, Serum; IGF-1; Vitamin D, 25-Hydroxy; Growth Hormone, Serum; Progesterone; Insulin

TESTS	RESULT	FLAG	UNITS R	EFERENCE INTERVAL	LAB
FSH and LH					
LH	9.7	High	mIU/mL	1.7-8.6	01
FSH	5.1		mIU/mL	1.5-12.4	01
Testosterone, Free and Total	L				
Testosterone, Serum Adult male reference in the healthy nonobese males Travison, et.al. JCEM	s (BMI <30) be	etween 19	and 39 yea	rs old.	01
Free Testosterone (Direct)	13.3		pg/mL	9.3-26.5	02
Hemoglobin Alc					
Hemoglobin Alc	5.1		90	4.8-5.6	01
Please Note:					01
Prediabetes:					
Diabetes: >6. Glycemic cont	rol for adult	ts with d	iabetes: <7	.0	
Thyroxine (T4) Free, Direct	t, S				
T4, Free (Direct)	1.27		ng/dL	0.82-1.77	01
DHEA-Sulfate	417.0		ug/dL	138.5-475.2	01
Cortisol	11.2		ug/dL		01
		Cort	isol AM	6.2 - 19.4	0 =
		Cort	isol PM	2.3 - 11.9	
тѕн	1.810		uIU/mL	0.450-4.500	01
Prolactin	14.2		ng/mL	4.0-15.2	01
<b>Estradiol</b> Roche ECLIA methodolog	18.8		pg/mL	7.6-42.6	01



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TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB			
Prostate Specific Ag, Serum  Prostate Specific Ag, Serum 0.8 ng/mL 0.0-4.0 01  Roche ECLIA methodology.  According to the American Urological Association, Serum PSA should decrease and remain at undetectable levels after radical prostatectomy. The AUA defines biochemical recurrence as an initial PSA value 0.2 ng/mL or greater followed by a subsequent confirmatory PSA value 0.2 ng/mL or greater.  Values obtained with different assay methods or kits cannot be used interchangeably. Results cannot be interpreted as absolute evidence of the presence or absence of malignant disease.								
IGF-1								
Insulin-Like Growth Factor	225		ng/mL	101-307	03			
Vitamin D, 25-Hydroxy  50.7  Ng/mL  Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2).  The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).  1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.  2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7):1911-30.								
Growth Hormone, Serum	<0.1		ng/mL	0.0-10.0	02			
Progesterone	0.1		ng/mL	0.0-0.5	01			
Insulin	6.8		uIU/mL	2.6-24.9	01			

For inquiries, the physician may contact Branch: 504 828-2666 Lab: 206-861-7000

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