Quest Diagnostics

Report Status: Final

Patient Information	Specimen Information	Client Information
DOB: **AGE:** Gender: Phone: Patient ID:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

Test Name	In Range	Out Of Range	Reference Range	Lab
THYROID PANEL WITH TSH				
THYROID PANEL				
T3 UPTAKE	34		22-35 %	
T4 (THYROXINE), TOTAL	7.9		4.9-10.5 mcg/dL	
FREE T4 INDEX (T7)	2.7		1.4-3.8	
TSH	2.47		0.40-4.50 mIU/L	
LIPID PANEL, STANDARD				
CHOLESTEROL, TOTAL		**224 H**	<200 mg/dL	
HDL CHOLESTEROL		**37 L**	>40 mg/dL	
TRIGLYCERIDES		**162 H**	<150 mg/dL	
LDL-CHOLESTEROL		**157 H**	mg/dL (calc)	
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		**6.1 H**	<5.0 (calc)	
NON HDL CHOLESTEROL		**187 H**	<130 mg/dL (calc)	
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.				
COMPREHENSIVE METABOLIC PANEL				
GLUCOSE	90		65-99 mg/dL Fasting reference interval	
UREA NITROGEN (BUN)	18		7-25 mg/dL	
CREATININE		**1.52 H**	0.70-1.33 mg/dL	
For patients >49 years of age, the reference limit for Creatinine is approximately 13% higher for people identified as African-American.				
eGFR NON-AFR. AMERICAN		**50 L**	> OR = 60 mL/min/1.73m2	
eGFR AFRICAN AMERICAN		**58 L**	> OR = 60 mL/min/1.73m2	
BUN/CREATININE RATIO	12		6-22 (calc)	
SODIUM	141		135-146 mmol/L	
POTASSIUM	4.3		3.5-5.3 mmol/L	
CHLORIDE	107		98-110 mmol/L	
CARBON DIOXIDE	27		20-32 mmol/L	
CALCIUM	9.5		8.6-10.3 mg/dL	
PROTEIN, TOTAL	6.4		6.1-8.1 g/dL	
ALBUMIN	4.2		3.6-5.1 g/dL	
GLOBULIN	2.2		1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	1.9		1.0-2.5 (calc)	

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BILIRUBIN, TOTAL	0.8		0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	52		40-115 U/L	
AST	15		10-35 U/L	
ALT	19		9-46 U/L	
HEMOGLOBIN A1c WITH eAG				
HEMOGLOBIN A1c	5.2		<5.7 % of total Hgb	
For the purpose of screening for the presence of diabetes: <5.7% Consistent with the absence of diabetes 5.7-6.4% Consistent with increased risk for diabetes (prediabetes) > or =6.5% Consistent with diabetes This assay result is consistent with a decreased risk of diabetes. Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes in children. According to American Diabetes Association (ADA) guidelines, hemoglobin A1c <7.0% represents optimal control in non-pregnant diabetic patients. Different metrics may apply to specific patient populations. Standards of Medical Care in Diabetes(ADA).				
eAG (mg/dL)	103		(calc)	
eAG (mmol/L)	5.7		(calc)	
PHOSPHATE (AS PHOSPHORUS)	2.8		2.5-4.5 mg/dL	
URIC ACID	7.9		4.0-8.0 mg/dL	
Therapeutic target for gout patients: <6.0 mg/dL				
LD	146		120-250 U/L	
GGT	35		3-85 U/L	
CBC (INCLUDES DIFF/PLT)				
WHITE BLOOD CELL COUNT	5.1		3.8-10.8 Thousand/uL	
RED BLOOD CELL COUNT	4.73		4.20-5.80 Million/uL	
HEMOGLOBIN	14.8		13.2-17.1 g/dL	
HEMATOCRIT	42.6		38.5-50.0 %	
MCV	90.1		80.0-100.0 fL	
MCH	31.3		27.0-33.0 pg	
MCHC	34.7		32.0-36.0 g/dL	
RDW	12.5		11.0-15.0 %	
PLATELET COUNT	242		140-400 Thousand/uL	
MPV	9.9		7.5-12.5 fL	
ABSOLUTE NEUTROPHILS	2876		1500-7800 cells/uL	
ABSOLUTE LYMPHOCYTES	1612		850-3900 cells/uL	
ABSOLUTE MONOCYTES	383		200-950 cells/uL	
ABSOLUTE EOSINOPHILS	199		15-500 cells/uL	
ABSOLUTE BASOPHILS	31		0-200 cells/uL	
NEUTROPHILS	56.4		%	
LYMPHOCYTES	31.6		%	
MONOCYTES	7.5		%	
EOSINOPHILS	3.9		%	
BASOPHILS	0.6		%	

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URINALYSIS, COMPLETE				
COLOR	YELLOW		YELLOW	
APPEARANCE	CLEAR		CLEAR	
SPECIFIC GRAVITY	1.020		1.001-1.035	
PH	< OR = 5.0		5.0-8.0	
GLUCOSE	NEGATIVE		NEGATIVE	
BILIRUBIN	NEGATIVE		NEGATIVE	
KETONES	NEGATIVE		NEGATIVE	
OCCULT BLOOD	NEGATIVE		NEGATIVE	
PROTEIN	NEGATIVE		NEGATIVE	
NITRITE	NEGATIVE		NEGATIVE	
LEUKOCYTE ESTERASE	NEGATIVE		NEGATIVE	
WBC	NONE SEEN		< OR = 5 /HPF	
RBC	NONE SEEN		< OR = 2 /HPF	
SQUAMOUS EPITHELIAL CELLS	NONE SEEN		< OR = 5 /HPF	
BACTERIA	NONE SEEN		NONE SEEN /HPF	
HYALINE CAST	NONE SEEN		NONE SEEN /LPF	
IRON, TOTAL	112		50-180 mcg/dL	
FSH	6.9		1.6-8.0 mIU/mL	
LH	4.0		1.5-9.3 mIU/mL	
PSA, TOTAL		**6.6 H**	< OR = 4.0 ng/mL	

The total PSA value from this assay system is standardized against the WHO standard. The test result will be approximately 20% lower when compared to the equimolar-standardized total PSA (Beckman Coulter). Comparison of serial PSA results should be interpreted with this fact in mind.

This test was performed using the Siemens chemiluminescent method. Values obtained from different assay methods cannot be used interchangeably. PSA levels, regardless of value, should not be interpreted as absolute evidence of the presence or absence of disease.

TESTOSTERONE, FREE (DIALYSIS) AND TOTAL,MS			
TESTOSTERONE, TOTAL, MS	257		250-1100 ng/dL
TESTOSTERONE, FREE	37.8		35.0-155.0 pg/mL

**Data from J Clin Invest 1974:53:819-828 and J Clin Endocrinol Metab 1973;36:1132-1142. Men with clinically significant hypogonadal symptoms and testosterone values repeatedly in the range of the 200-300 ng/dL or less, may benefit from testosterone treatment after adequate risk and benefits counseling.

For additional information, please refer to http://education.questdiagnostics.com/faq/FAQ165 (This link is being provided for informational/ educational purposes only.)

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Nichols Institute Valencia. It has not been cleared or approved by the US Food and Drug Administration. This assay has been validated pursuant to the CLIA regulations and is

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used for clinical purposes.

PERFORMING SITE: