

Patient Information	Specimen Informa	ation	Client Information			
	Specimen:					
	Requisition:					
DOB: AGE:	Lab Ref #:					
Gender:	Collected:					
Phone:	Received:					
Patient ID:	Reported:					
Test Name	In Range	Out Of Range	Reference Range Lab			
CHOLESTEROL, TOTAL HEPATIC FUNCTION PANEL	173		<200 mg/dL			
PROTEIN, TOTAL	7.3		6.1-8.1 g/dL			
ALBUMIN	4.5		3.6-5.1 g/dL			
GLOBULIN	2.8		1.9-3.7 g/dL (calc)			
ALBUMIN/GLOBULIN RATIO	1.6	1 5 5	1.0-2.5 (calc)			
BILIRUBIN, TOTAL BILIRUBIN, DIRECT		1.7 H 0.8 H	0.2-1.2 mg/dL < OR = 0.2 mg/dL			
BILIRUBIN, INDIRECT	0.9	0.0 11	0.2-1.2 mg/dL (calc)			
ALKALINE PHOSPHATASE		377 H	40-115 U/L			
AST		178 н	10-40 U/L			
ALT		408 Н 588 Н	9-46 U/L 100-220 U/L			
LD GGT		461 H	3-90 U/L			
PROTHROMBIN TIME-INR		102 11	3 70 0,1			
INR	1.0					
Reference Range Moderate-intensity Warfarin Higher-intensity Warfarin T		3.0				
PT	10.3		9.0-11.5 sec			
For more information on thi http://education.questdiagn						
CBC (INCLUDES DIFF/PLT)						
WHITE BLOOD CELL COUNT		13.5 H	3.8-10.8 Thousand/uL			
RED BLOOD CELL COUNT	5.53 16.0		4.20-5.80 Million/uL			
HEMOGLOBIN HEMATOCRIT	45.5		13.2-17.1 g/dL 38.5-50.0 %			
MCV	82.3		80.0-100.0 fL			
MCH	28.9		27.0-33.0 pg			
MCHC	35.2		32.0-36.0 g/dL			
RDW PLATELET COUNT	13.8 152		11.0-15.0 % 140-400 Thousand/uL			
MPV	11.3		7.5-12.5 fL			
ABSOLUTE NEUTROPHILS	3294		1500-7800 cells/uL			
ABSOLUTE LYMPHOCYTES		7695 Н	850-3900 cells/uL			
ABSOLUTE MONOCYTES	27	2403 H	200-950 cells/uL 15-500 cells/uL			
ABSOLUTE EOSINOPHILS ABSOLUTE BASOPHILS	27 81		0-200 cells/uL			
NEUTROPHILS	24.4		8			
LYMPHOCYTES	57.0		%			
MONOCYTES	17.8		%			
EOSINOPHILS BASOPHILS	0.2 0.6		90			
COMMENT(S)	0.0		70			
· <i>•</i>	Review of pautomated in	peripheral smear results.	confirms			
FERRITIN	a a comacca	1305 H	20-345 ng/mL			
ALPHA FETOPROTEIN,						
TUMOR MARKER	1.6		<6.1 ng/mL			



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

**Report Status: Final** 



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## **Infectious Diseases**

Test Name	Result	Reference Range			Lab
HEPATITIS PANEL, ACUTE W/REFLEX TO CONFIRMATION					
HEPATITIS A IGM	NON-REACTIVE	NON-REACTIVE			
HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM					
HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE	NON-REACTIVE			
HEPATITIS B CORE ANTIBODY (IGM)	NON-REACTIVE	NON-REACTIVE			
HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR					
HEPATITIS C ANTIBODY	NON-REACTIVE	NON-REACTIVE			
SIGNAL TO CUT-OFF	0.02	<1.00			

HCV antibody was non-reactive. There is no laboratory evidence of HCV infection.

In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested.

For additional information please refer to http://education.questdiagnostics.com/faq/FAQ22v1 (This link is being provided for informational/educational purposes only.)

Physician Comments:

## **PERFORMING SITE:**