

Patient Information	Specimen Information	Client Information

COMMENTS: FASTING: YES

Test Name	In Range	Out Of Range	Reference Range	Lab
LIPID PANEL, STANDARD				
CHOLESTEROL, TOTAL		225 H	<200 mg/dL	EN
HDL CHOLESTEROL	52		> OR = 50 mg/dL	EN
TRIGLYCERIDES	74		<150 mg/dL	EN
LDL-CHOLESTEROL		155 H	mg/dL (calc)	EN
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/HDL-C RATIO	4.3		<5.0 (calc)	EN
NON HDL CHOLESTEROL		173 H	<130 mg/dL (calc)	EN
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.				
HS CRP	1.8		mg/L	EN
Reference Range Optimal <1.0 Jellinger PS et al. Endocr Pract.2017;23(Suppl 2):1-87.				
For ages >17 Years: hs-CRP mg/L Risk According to AHA/CDC Guidelines <1.0 Lower relative cardiovascular risk. 1.0-3.0 Average relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. Consider retesting in 1 to 2 weeks to exclude a benign transient elevation in the baseline CRP value secondary to infection or inflammation. >10.0 Persistent elevation, upon retesting, may be associated with infection and inflammation.				
COMPREHENSIVE METABOLIC PANEL				EN
GLUCOSE	79		65-99 mg/dL	
Fasting reference interval				
UREA NITROGEN (BUN)	10		7-25 mg/dL	
CREATININE	0.75		0.50-0.99 mg/dL	
EGFR	101		> OR = 60 mL/min/1.73m ²	
The eGFR is based on the CKD-EPI 2021 equation. To calculate the new eGFR from a previous Creatinine or Cystatin C				

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result, go to https://www.kidney.org/professionals/kdoqi/gfr%5Fcalculator					
BUN/CREATININE RATIO	NOT APPLICABLE		6-22 (calc)		
SODIUM	140		135-146 mmol/L		
POTASSIUM	4.7		3.5-5.3 mmol/L		
CHLORIDE	107		98-110 mmol/L		
CARBON DIOXIDE	25		20-32 mmol/L		
CALCIUM	9.0		8.6-10.2 mg/dL		
PROTEIN, TOTAL	7.3		6.1-8.1 g/dL		
ALBUMIN	4.2		3.6-5.1 g/dL		
GLOBULIN	3.1		1.9-3.7 g/dL (calc)		
ALBUMIN/GLOBULIN RATIO	1.4		1.0-2.5 (calc)		
BILIRUBIN, TOTAL	1.0		0.2-1.2 mg/dL		
ALKALINE PHOSPHATASE	62		31-125 U/L		
AST	15		10-30 U/L		
ALT	9		6-29 U/L		
HEMOGLOBIN A1c	5.4		<5.7 % of total Hgb	EN	
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).					
GGT	9		3-55 U/L	EN	
TSH	0.61		mIU/L	EN	
Reference Range					
> or = 20 Years				0.40-4.50	
Pregnancy Ranges					
First trimester				0.26-2.66	
Second trimester				0.55-2.73	
Third trimester				0.43-2.91	
TESTOSTERONE, TOTAL, MS	16		2-45 ng/dL	SLI	
For additional information, please refer to http://education.questdiagnostics.com/faq/TotalTestosteroneLCMSMS (This link is being provided for informational/educational purposes only.)					
This test was developed and its analytical performance characteristics have been determined by Quest					

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Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.				

Walk-In Lab

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Endocrinology

Test Name	Result	Reference Range	Lab
VITAMIN D,25-OH,TOTAL,IA	39	30-100 ng/mL	EN
Vitamin D Status 25-OH Vitamin D: Deficiency: <20 ng/mL Insufficiency: 20 - 29 ng/mL Optimal: > or = 30 ng/mL 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
 SLI QUEST DIAGNOSTICS NICHOLS VALENCIA, 27027 TOURNEY ROAD, VALENCIA, CA 91355-5386 Laboratory Director: THOMAS MCDONALD,MD, CLIA: 05D0550302