

Specimen ID:
Control ID:
Acct #:
 Walk-In Lab, LLC
 VART verified

Phone: (800) 539-6119 **Rte:** 00

Patient Details	Specimen Details	Physician Details
DOB: Age(y/m/d): Gender: SSN: Patient ID:	Date collected: Date received: Date entered: Date reported:	Ordering: Referring: ID: NPI:

General Comments & Additional Information
Alternate Control Number:
Total Volume:
Ordered Items
Alternate Patient ID:
Fasting:

CBC With Differential/Platelet; HFP7+3AC; Hepatitis Panel (4); Prothrombin Time (PT); AFP, Serum, Tumor Marker; Ferritin, Serum

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
CBC With Differential/Platelet					
WBC	7.5		x10E3/uL	3.4 - 10.8	01
RBC	5.09		x10E6/uL	4.14 - 5.80	01
Hemoglobin	14.7		g/dL	13.0 - 17.7	01
Hematocrit	43.7		%	37.5 - 51.0	01
MCV	86		fL	79 - 97	01
MCH	28.9		pg	26.6 - 33.0	01
MCHC	33.6		g/dL	31.5 - 35.7	01
RDW	13.3		%	11.6 - 15.4	01
Platelets	285		x10E3/uL	150 - 450	01
Neutrophils	50		%	Not Estab.	01
Lymphs	35		%	Not Estab.	01
Monocytes	9		%	Not Estab.	01
Eos	5		%	Not Estab.	01
Basos	1		%	Not Estab.	01
Neutrophils (Absolute)	3.8		x10E3/uL	1.4 - 7.0	01
Lymphs (Absolute)	2.6		x10E3/uL	0.7 - 3.1	01
Monocytes (Absolute)	0.7		x10E3/uL	0.1 - 0.9	01
Eos (Absolute)	0.4		x10E3/uL	0.0 - 0.4	01
Baso (Absolute)	0.1		x10E3/uL	0.0 - 0.2	01
Immature Granulocytes	0		%	Not Estab.	01
Immature Grans (Abs)	0.0		x10E3/uL	0.0 - 0.1	01

HFP7+3AC

Protein, Total	6.7		g/dL	6.0 - 8.5	01
Albumin	4.5		g/dL	4.0 - 5.0	01
Please note reference interval change					
Bilirubin, Total	0.2		mg/dL	0.0 - 1.2	01
Bilirubin, Direct	0.08		mg/dL	0.00 - 0.40	01
Alkaline Phosphatase	87		IU/L	39 - 117	01

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TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
LDH	157		IU/L	121 - 224	01
AST (SGOT)	21		IU/L	0 - 40	01
ALT (SGPT)	27		IU/L	0 - 44	01
GGT	32		IU/L	0 - 65	01
Cholesterol, Total	175		mg/dL	100 - 199	01

Hepatitis Panel (4)

Hep A Ab, IgM	Negative			Negative	01
HBsAg Screen	Negative			Negative	01
Hep B Core Ab, IgM	Negative			Negative	01
Hep C Virus Ab	<0.1		s/co ratio	0.0 - 0.9	01
			Negative:	< 0.8	
			Indeterminate:	0.8 - 0.9	
			Positive:	> 0.9	

The CDC recommends that a positive HCV antibody result be followed up with a HCV Nucleic Acid Amplification test (550713).

Prothrombin Time (PT)

INR	1.0			0.8 - 1.2	01
	Reference interval is for non-anticoagulated patients. Suggested INR therapeutic range for Vitamin K antagonist therapy:				
	Standard Dose (moderate intensity therapeutic range):				2.0 - 3.0
	Higher intensity therapeutic range				2.5 - 3.5
Prothrombin Time	10.7		sec	9.1 - 12.0	01

AFP, Serum, Tumor Marker

	2.0		ng/mL	0.0 - 8.3	01
Roche Diagnostics Electrochemiluminescence Immunoassay (ECLIA)					
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.					
This test is not interpretable in pregnant females.					

Ferritin, Serum

	62		ng/mL	30 - 400	01
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For inquiries, the physician may contact **Branch: 504-828-2666 Lab: 800-762-4344**