

Quest Diagnostics

SPECIMEN INFORMATION

SPECIMEN: LV340301F
 REQUISITION: 00954919
 Lab ref no:

COLLECTED: 2019/02/14 12:54
 RECEIVED: 2019/02/14 12:55
 REPORTED: 2019/02/19 14:43

PATIENT INFORMATION

John, Smith
 DOB: September 11, 1984
 AGE: 20
 GENDER: Male
 FASTING: Unknown

Clinical Info:

REPORT STATUS: FINAL

ORDERING PHYSICIAN

Jane, Doe

CLIENT INFORMATION

2019-02-19 14:43:00 -0800
 Lab Testing API
 280 Madison Avenue
 Room 912, 9th Floor
 New York, NY 10016

Test Name	Result	Flag	Reference Range	Lab
FASTING: YES				
FASTING: YES				
LIPID PANEL, STANDARD				
CHOLESTEROL, TOTAL	237	HIGH	<200 mg/dL	01
HDL CHOLESTEROL	33	LOW	>40 mg/dL	01
TRIGLYCERIDES	366	HIGH	<150 mg/dL	01

If a non-fasting specimen was collected, consider repeat triglyceride testing on a fasting specimen if clinically indicated.
 Jacobson et al. J. of Clin. Lipidol. 2015;9:129-169.

LDL-CHOLESTEROL	148	HIGH	mg/dL (calc)	01
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	7.2	HIGH	<5.0 (calc)	01
NON HDL CHOLESTEROL	204	HIGH	<130 mg/dL (calc)	01

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.

IRON, TIBC AND FERRITIN PANEL

IRON, TOTAL	61	NORMAL	50-180 mcg/dL	01
IRON BINDING CAPACITY	411	NORMAL	250-425 mcg/dL (calc)	01
% SATURATION	15	LOW	20-48 % (calc)	01
FERRITIN	265	NORMAL	38-380 ng/mL	01

MAGNESIUM

MAGNESIUM	2.3	NORMAL	1.5-2.5 mg/dL	01
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URIC ACID

URIC ACID	5.5	NORMAL	4.0-8.0 mg/dL	01
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Therapeutic target for gout patients: <6.0 mg/dL

COMPREHENSIVE METABOLIC PANEL

GLUCOSE	94	NORMAL	65-99 mg/dL	01
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Fasting reference interval

UREA NITROGEN (BUN)	17	NORMAL	7-25 mg/dL	01
CREATININE	1.17	NORMAL	0.60-1.35 mg/dL	01
eGFR NON-AFR. AMERICAN	78	NORMAL	> OR = 60 mL/min/1.73m2	01
eGFR AFRICAN AMERICAN	90	NORMAL	> OR = 60 mL/min/1.73m2	01
BUN/CREATININE RATIO	NOT APPLICABLE	NORMAL	6-22 (calc)	01

SODIUM	139	NORMAL	135-146 mmol/L	01
POTASSIUM	4.7	NORMAL	3.5-5.3 mmol/L	01
CHLORIDE	105	NORMAL	98-110 mmol/L	01
CARBON DIOXIDE	25	NORMAL	20-32 mmol/L	01
CALCIUM	10.1	NORMAL	8.6-10.3 mg/dL	01
PROTEIN, TOTAL	7.6	NORMAL	6.1-8.1 g/dL	01
ALBUMIN	4.8	NORMAL	3.6-5.1 g/dL	01
GLOBULIN	2.8	NORMAL	1.9-3.7 g/dL (calc)	01
ALBUMIN/GLOBULIN RATIO	1.7	NORMAL	1.0-2.5 (calc)	01
BILIRUBIN, TOTAL	0.4	NORMAL	0.2-1.2 mg/dL	01
ALKALINE PHOSPHATASE	57	NORMAL	40-115 U/L	01
AST	19	NORMAL	10-40 U/L	01
ALT	21	NORMAL	9-46 U/L	01

CBC (INCLUDES DIFF/PLT)

WHITE BLOOD CELL COUNT	12.1	HIGH	3.8-10.8 Thousand/uL	01
RED BLOOD CELL COUNT	5.33	NORMAL	4.20-5.80 Million/uL	01
HEMOGLOBIN	14.7	NORMAL	13.2-17.1 g/dL	01
HEMATOCRIT	44.7	NORMAL	38.5-50.0 %	01
MCV	83.9	NORMAL	80.0-100.0 fL	01
MCH	27.6	NORMAL	27.0-33.0 pg	01
MCHC	32.9	NORMAL	32.0-36.0 g/dL	01
RDW	13.6	NORMAL	11.0-15.0 %	01
PLATELET COUNT	477	HIGH	140-400 Thousand/uL	01
MPV	10.3	NORMAL	7.5-12.5 fL	01
ABSOLUTE NEUTROPHILS	7732	NORMAL	1500-7800 cells/uL	01
ABSOLUTE BAND NEUTROPHILS	DNR	NORMAL	0-750 cells/uL	01
ABSOLUTE METAMYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE MYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE PROMYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE LYMPHOCYTES	3485	NORMAL	850-3900 cells/uL	01
ABSOLUTE MONOCYTES	738	NORMAL	200-950 cells/uL	01
ABSOLUTE EOSINOPHILS	73	NORMAL	15-500 cells/uL	01
ABSOLUTE BASOPHILS	73	NORMAL	0-200 cells/uL	01
ABSOLUTE BLASTS	DNR	NORMAL	0 cells/uL	01
ABSOLUTE NUCLEATED RBC	0	NORMAL	0 cells/uL	01
NEUTROPHILS	63.9	NORMAL	%	01
BAND NEUTROPHILS	DNR	NORMAL	%	01
METAMYELOCYTES	DNR	NORMAL	%	01
MYELOCYTES	DNR	NORMAL	%	01
PROMYELOCYTES	DNR	NORMAL	%	01
LYMPHOCYTES	28.8	NORMAL	%	01
REACTIVE LYMPHOCYTES	DNR	NORMAL	0-10 %	01
MONOCYTES	6.1	NORMAL	%	01
EOSINOPHILS	0.6	NORMAL	%	01
BASOPHILS	0.6	NORMAL	%	01
BLASTS	DNR	NORMAL	%	01
NUCLEATED RBC	DNR	NORMAL	0 /100 WBC	01
COMMENT(S)	DNR	NORMAL		01

HS CRP

HS CRP	9.8	HIGH	mg/L	01
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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.

T4, FREE

T4, FREE	1.1	NORMAL	0.8-1.8 ng/dL	01
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TESTOSTERONE, TOTAL, MALES (ADULT), IA

TESTOSTERONE, TOTAL, MALES (ADULT), IA	173	LOW	250-827 ng/dL	01
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In hypogonadal males, Testosterone, Total, LC/MS/MS, is the recommended assay due to the diminished accuracy of immunoassay at levels below 250 ng/dL. This test code (15983) must be collected in a red-top tube with no gel.

TSH

TSH	0.99	NORMAL	0.40-4.50 mIU/L	01
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VITAMIN B12/FOLATE, SERUM PANEL

VITAMIN B12	673	NORMAL	200-1100 pg/mL	01
FOLATE, SERUM	10.2	NORMAL	ng/mL	01

Reference Range

Low: <3.4

Borderline: 3.4-5.4

Normal: >5.4

T3, FREE

T3, FREE	2.9	NORMAL	2.3-4.2 pg/mL	01
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VITAMIN D, 25-OH, TOTAL, IA

VITAMIN D, 25-OH, TOTAL, IA	55	NORMAL	30-100 ng/mL	01
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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 more information on this test, go to:

<http://education.questdiagnostics.com/faq/FAQ163>

(This link is being provided for informational/educational purposes only.)

HEMOGLOBIN A1c

HEMOGLOBIN A1c	5.5	NORMAL	<5.7 % of total Hgb	01
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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).

Performing Laboratory Information:

01: Quest Diagnostics-Wood Dale, 1355 Mittel Blvd, Wood Dale IL, phone: , Medical Director: MD Anthony V Thomas