

PATIENT INFORMATION:

Ofer Yehudai

Phone (H): (833) 753-1851

DOB: 02/11/1981

Gender: Male Age: 43

Patient ID: 35049843

STATUS: Final

Source: Quest
 Time Reported: 11/15/2024 04:15 AM UTC
 Received: 11/15/2024 04:19 AM UTC
 Accession Number: SZ983211Q
 Lab Ref #: 773650

ORDERING PHYSICIAN:

Joshua A Emdur, D.O.

600 Congress Avenue
 Floor 14
 Austin, TX, 78701

Test	In Range	Out Of Range	Reference Range	Lab
IRON, TIBC AND FERRITIN PANEL Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC				
IRON, TOTAL	52		50-180 mcg/dL	UL
IRON BINDING CAPACITY	320		250-425 mcg/dL (calc)	UL
% SATURATION		16 L	20-48 % (calc)	UL
FERRITIN	160		38-380 ng/mL	UL
LIPOPROTEIN (a) Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC				
LIPOPROTEIN (a)	61		nmol/L	EN
Reference Range	<75			
Risk:				
Optimal	<75			
Moderate	75-125			
High	>125			
Cardiovascular event risk category cut points (optimal, moderate, high) are based on Tsimika S. JACC 2017;69:692-711.				
URIC ACID Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC				
URIC ACID	5.0		4.0-8.0 mg/dL	UL
Therapeutic target for gout patients: <6.0 mg/dL				
COMPREHENSIVE METABOLIC PANEL Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC				
GLUCOSE	99		65-99 mg/dL	UL
Fasting reference interval				
UREA NITROGEN (BUN)	25		7-25 mg/dL	UL
CREATININE	1.02		0.60-1.29 mg/dL	UL
EGFR	94		> OR = 60 mL/min/1.73m ²	UL
BUN/CREATININE RATIO	SEE NOTE:		6-22 (calc)	UL
Not Reported: BUN and Creatinine are within reference range.				
SODIUM	140		135-146 mmol/L	UL
POTASSIUM	4.5		3.5-5.3 mmol/L	UL
CHLORIDE	103		98-110 mmol/L	UL
CARBON DIOXIDE	31		20-32 mmol/L	UL
CALCIUM	9.3		8.6-10.3 mg/dL	UL



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PROTEIN, TOTAL	6.9		6.1-8.1 g/dL	UL
ALBUMIN	4.6		3.6-5.1 g/dL	UL
GLOBULIN	2.3		1.9-3.7 g/dL (calc)	UL
ALBUMIN/GLOBULIN RATIO	2.0		1.0-2.5 (calc)	UL
BILIRUBIN, TOTAL	0.4		0.2-1.2 mg/dL	UL
ALKALINE PHOSPHATASE	44		36-130 U/L	UL
AST	24		10-40 U/L	UL
ALT	25		9-46 U/L	UL

ALBUMIN, RANDOM URINE W/O CREATININE Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

ALBUMIN, URINE 0.5 See Note: mg/dL UL

Reference Range:

Reference Range

Not established

RAM

The ADA defines abnormalities in albumin excretion as follows:

Albuminuria Category	Result (mg/g creatinine)
Normal to Mildly increased	<30
Moderately increased	30-299
Severely increased	> OR = 300

The ADA recommends that at least two of three specimens collected within a 3-6 month period be abnormal before considering a patient to be within a diagnostic category.

URINALYSIS, COMPLETE Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

COLOR	YELLOW	YELLOW	UL
APPEARANCE	CLEAR	CLEAR	UL
SPECIFIC GRAVITY	1.021	1.001-1.035	UL
PH	6.0	5.0-8.0	UL
GLUCOSE	NEGATIVE	NEGATIVE	UL
BILIRUBIN	NEGATIVE	NEGATIVE	UL
KETONES	NEGATIVE	NEGATIVE	UL
OCCULT BLOOD	NEGATIVE	NEGATIVE	UL
PROTEIN	NEGATIVE	NEGATIVE	UL
NITRITE	NEGATIVE	NEGATIVE	UL
LEUKOCYTE ESTERASE	NEGATIVE	NEGATIVE	UL
WBC	NONE SEEN	< OR = 5 /HPF	UL
RBC	NONE SEEN	< OR = 2 /HPF	UL



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Test	In Range	Out Of Range	Reference Range	Lab
SQUAMOUS EPITHELIAL CELLS	NONE SEEN		< OR = 5 /HPF	UL
BACTERIA	NONE SEEN		NONE SEEN /HPF	UL
HYALINE CAST	NONE SEEN		NONE SEEN /LPF	UL
NOTE				UL

This urine was analyzed for the presence of WBC,
 RBC, bacteria, casts, and other formed elements.
 Only those elements seen were reported.

CBC (INCLUDES DIFF/PLT) Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

WHITE BLOOD CELL COUNT	5.3		3.8-10.8 Thousand /uL	UL
RED BLOOD CELL COUNT	4.62		4.20-5.80 Million/uL	UL
HEMOGLOBIN		12.7 L	13.2-17.1 g/dL	UL
HEMATOCRIT	39.9		38.5-50.0 %	UL
MCV	86.4		80.0-100.0 fL	UL
MCH	27.5		27.0-33.0 pg	UL
MCHC		31.8 L	32.0-36.0 g/dL	UL

For adults, a slight decrease in the calculated MCHC value (in the range of 30 to 32 g/dL) is most likely not clinically significant; however, it should be interpreted with caution in correlation with other red cell parameters and the patient's clinical condition.

RDW	12.7		11.0-15.0 %	UL
PLATELET COUNT	184		140-400 Thousand /uL	UL
MPV	10.6		7.5-12.5 fL	UL
ABSOLUTE NEUTROPHILS	2873		1500-7800 cells/uL	UL
ABSOLUTE LYMPHOCYTES	1701		850-3900 cells/uL	UL
ABSOLUTE MONOCYTES	429		200-950 cells/uL	UL
ABSOLUTE EOSINOPHILS	249		15-500 cells/uL	UL
ABSOLUTE BASOPHILS	48		0-200 cells/uL	UL
NEUTROPHILS	54.2		%	UL
LYMPHOCYTES	32.1		%	UL
MONOCYTES	8.1		%	UL
EOSINOPHILS	4.7		%	UL
BASOPHILS	0.9		%	UL

HS CRP Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

HS CRP	<0.2		mg/L	UL
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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:



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Test	In Range	Out Of Range	Reference Range	Lab
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.			

Pearson TA, Mensah GA, Alexander RW, et al. Markers of inflammation and cardiovascular disease: application to clinical and public health practice: A statement for healthcare professionals from the Centers for Disease Control and Prevention and the American Heart Association. Circulation 2003; 107(3): 499-511.

CORTISOL, TOTAL, LC/MS Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

CORTISOL, TOTAL, LC/MS	13.8	mcg/dL	EZ
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Adult Reference Ranges for Cortisol, Total:

8-10 AM 4.6-20.6 mcg/dL
 4-6 PM 1.8-13.6 mcg/dL

Cortisol Response to ACTH
 Peak >20.0 mcg/dL
 Peak >16.0 mcg/dL after IM injection

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

INSULIN Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

INSULIN	3.8	uIU/mL	EN
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Reference Range < or = 18.4

Risk:
 Optimal < or = 18.4
 Moderate NA
 High >18.4



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Test	In Range	Out Of Range	Reference Range	Lab
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Adult cardiovascular event risk category cut points (optimal, moderate, high) are based on Insulin Reference Interval studies performed at Quest Diagnostics in 2022.

T4, FREE Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

T4, FREE	1.1	0.8-1.8 ng/dL	UL
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TSH Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

TSH	2.13	0.40-4.50 mIU/L	UL
-----	------	-----------------	----

T3, FREE Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

T3, FREE	3.3	2.3-4.2 pg/mL	UL
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VITAMIN D,25-OH,TOTAL,IA Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

VITAMIN D,25-OH,TOTAL,IA	30	30-100 ng/mL	UL
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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).

See Note 1

APOLIPOPROTEIN B Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

APOLIPOPROTEIN B	85	mg/dL	EN
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Reference Range < 90

Risk Category:

Optimal <90
 Moderate 90-119
 High > or = 120

Cardiovascular event risk category cut points (optimal, moderate, high) are based on National Lipid Association recommendations-Jacobson



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Test	In Range	Out Of Range	Reference Range	Lab
TA et al. J of Clin Lipid. 2015; 9: 129-169 and Jellinger PS et al. Endocr Pract. 2017;23(Suppl 2):1-87.				

HEMOGLOBIN A1c Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

HEMOGLOBIN A1c	5.5	<5.7 % of total Hgb	UL
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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).

MERCURY, BLOOD Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

MERCURY, BLOOD	4	<OR=10 mcg/L	EN
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See Note 2

Note 1

For additional information, please refer to <http://education.QuestDiagnostics.com/faq/FAQ199>
 (This link is being provided for informational/educational purposes only.)

Note 2

This test was developed and its analytical performance characteristics have been determined by Quest 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.

ABO GROUP AND RH TYPE Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

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Test	In Range	Out Of Range	Reference Range	Lab
ABO GROUP	A			UL
RH TYPE	RH(D) POSITIVE			UL

For additional information, please refer to
<http://education.QuestDiagnostics.com/faq/FAQ111>
 (This link is being provided for informational/
 educational purposes only.)

MAGNESIUM, RBC Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

MAGNESIUM, RBC	4.9	4.0-6.4 mg/dL	Z3E
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(Note)

This test was developed and its analytical performance characteristics have been determined by Quest 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.

MDF
 med fusion
 2501 South State Highway 121, Suite 1100
 Lewisville TX 75067
 972-966-7300
 Ithiel James L. Frame, MD, PhD

LIPOPROTEIN FRACTIONATION ION MOBILITY Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

LDL PARTICLE NUMBER	1643 H	<1138 nmol/L	Z4M
Relative Risk: Optimal <1138; Moderate 1138-1409; High >1409. Male and Female Reference Range: 1016 to 2185 nmol/L.			
LDL SMALL	316 H	<142 nmol/L	Z4M
Relative Risk: Optimal <142; Moderate 142-219; High >219. Male Reference Range: 123 to 441 nmol/L; Female Reference Range: 115 to 386 nmol/L.			
LDL MEDIUM	354 H	<215 nmol/L	Z4M
Relative Risk: Optimal <215; Moderate 215-301; High >301. Male Reference Range: 167 to 485 nmol/L; Female Reference Range: 121 to 397 nmol/L.			
HDL LARGE	6846	>6729 nmol/L	Z4M
Relative Risk: Optimal >6729; Moderate 6729-5353; High <5353. Male Reference Range: 4334 to 10815 nmol/L; Female Reference Range: 5038 to 17886 nmol/L.			
LDL PATTERN	B A	A Pattern	Z4M
Relative Risk: Optimal Pattern A; High Pattern B. Reference Range: Pattern A.			
LDL PEAK SIZE	217.2 L	>222.9 Angstrom	Z4M
This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics			



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Cardiometabolic Center of Excellence at Cleveland HeartLab. It has not been cleared or approved by the U.S. Food and Drug Administration. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. Relative Risk: Optimal >222.9; Moderate 222.9-217.4; High <217.4. Male and Female Reference Range: 216 to 234.3 Angstrom. Adult cardiovascular event risk category cut points (optimal, moderate, high) are based on an adult U.S. reference population plus two large cohort study populations. Association between lipoprotein subfractions and cardiovascular events is based on Musunuru et al. ATVB.2009;29:1975. For additional information, please refer to <http://education.QuestDiagnostics.com/faq/FAQ134> (This link is being provided for informational/educational purposes only.)

CARDIO IQ(R) LIPID PANEL Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

CHOLESTEROL, TOTAL	172	<200 mg/dL	Z4M
HDL CHOLESTEROL	63	>39 mg/dL	Z4M
TRIGLYCERIDES	63	<150 mg/dL	Z4M
LDL-CHOLESTEROL	94	<100 mg/dL (calc)	Z4M

Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with >= 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>) 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	2.7	<5.0 calc	Z4M
NON HDL CHOLESTEROL	109	<130 mg/dL (calc)	Z4M

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. 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.

Enhanced PDF Report SZ983211Q-1 Collected: 11/06/2024 03:32 PM UTC Received: 11/06/2024 03:34 PM UTC

Enhanced PDF Report SZ983211Q- Enhanced PDF Report SZ983211Q-1.pdf [See Appendix 1 for details]



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Test	In Range	Out Of Range	Reference Range	Lab
1				

UL	Quest Diagnostics-Sacramento - Northgate. 3714 Northgate Blvd, Sacramento, CA 95834-1617	Dir: Shirley Y Shen
EN	Quest Diagnostics-West Hills. 8401 Fallbrook Ave, West Hills, CA 91304-3226	Dir: Thomas J McDonald
EZ	Quest Diagnostics/Nichols SJC-San Juan Capistrano,. 33608 Ortega Hwy, San Juan Capistrano, CA 92675-2042	Dir: Irina Maramica MD,PhD,MBA
Z3E	MedFusion-MedFusion. 2501 South State Highway 121, Suite 1100, Lewisville, TX 75067-8188	Dir: Ithiel James L Frame MD,PhD
Z4M	Cleveland HeartLab Inc.-Cleveland HeartLab Inc.. 6701 Carnegie Ave, Suite 500, Cleveland, OH 44103-4623	Dir: Sami Albeiroti PhD,DABCC

Range Flags Legend: L - Below low normal; H - Above high normal; A - Abnormal;



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Report Status: Final

YEHUDAI, OFER

Patient Information	Specimen Information	Client Information
YEHUDAI, OFER DOB: 02/11/1981 AGE: 43 Gender: M Phone: 833.753.1851 Patient ID: 35049843 Health ID: 8573035612986618	Specimen: SZ983211Q Requisition: 0049494 Lab Ref #: 773650 Collected: 11/06/2024 / 07:32 PST Received: 11/07/2024 / 00:58 PST Reported: 11/14/2024 / 20:15 PST	Client #: 73917267 MAIL992 EMDUR, JOSHUA FUNCTION HEALTH INC 600 CONGRESS AVE FL 14 AUSTIN, TX 78701-3263

Test Name	In Range	Out Of Range	Reference Range	Lab
IRON, TIBC AND FERRITIN PANEL				UL
IRON AND TOTAL IRON BINDING CAPACITY				UL
IRON, TOTAL	52		50-180 mcg/dL	
IRON BINDING CAPACITY	320		250-425 mcg/dL (calc)	
% SATURATION		16 L	20-48 % (calc)	
FERRITIN	160		38-380 ng/mL	UL
LIPOPROTEIN (a)	61		nmol/L	EN
			Reference Range <75	
			Risk:	
			Optimal <75	
			Moderate 75-125	
			High >125	
			Cardiovascular event risk category cut points (optimal, moderate, high) are based on Tsimika S. JACC 2017;69:692-711.	
ALBUMIN, RANDOM URINE W/O CREATININE				UL
ALBUMIN, URINE	0.5		mg/dL	
	Reference Range			
	Not established			

The ADA defines abnormalities in albumin excretion as follows:

Albuminuria Category	Result (mg/g creatinine)
Normal to Mildly increased	<30
Moderately increased	30-299
Severely increased	> OR = 300

The ADA recommends that at least two of three specimens collected within a 3-6 month period be abnormal before considering a patient to be within a diagnostic category.

HS CRP	<0.2	mg/L	UL
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		



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Test Name	In Range	Out Of Range	Reference Range	Lab
inflammation.				

Pearson TA, Mensah GA, Alexander RW, et al. Markers of inflammation and cardiovascular disease: application to clinical and public health practice: A statement for healthcare professionals from the Centers for Disease Control and Prevention and the American Heart Association. Circulation 2003; 107(3): 499-511.

APOLIPOPROTEIN B	85		mg/dL	EN
		Reference Range	< 90	

Risk Category:
Optimal <90
Moderate 90-119
High > or = 120

Cardiovascular event risk category cut points (optimal, moderate, high) are based on National Lipid Association recommendations-Jacobson TA et al. J of Clin Lipid. 2015; 9: 129-169 and Jellinger PS et al. Endocr Pract. 2017;23(Suppl 2):1-87.

COMPREHENSIVE METABOLIC PANEL				UL
GLUCOSE	99		65-99 mg/dL	

Fasting reference interval

UREA NITROGEN (BUN)	25		7-25 mg/dL	
CREATININE	1.02		0.60-1.29 mg/dL	
EGFR	94		> OR = 60 mL/min/1.73m2	
BUN/CREATININE RATIO	SEE NOTE:		6-22 (calc)	
	Not Reported: BUN and Creatinine are within reference range.			

SODIUM	140		135-146 mmol/L	
POTASSIUM	4.5		3.5-5.3 mmol/L	
CHLORIDE	103		98-110 mmol/L	
CARBON DIOXIDE	31		20-32 mmol/L	
CALCIUM	9.3		8.6-10.3 mg/dL	
PROTEIN, TOTAL	6.9		6.1-8.1 g/dL	
ALBUMIN	4.6		3.6-5.1 g/dL	
GLOBULIN	2.3		1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	2.0		1.0-2.5 (calc)	
BILIRUBIN, TOTAL	0.4		0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	44		36-130 U/L	
AST	24		10-40 U/L	
ALT	25		9-46 U/L	
HEMOGLOBIN A1c	5.5		<5.7 % of total Hgb	UL

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



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Test Name	In Range	Out Of Range	Reference Range	Lab
<p>(prediabetes) > or =6.5% Consistent with diabetes</p> <p>This assay result is consistent with a decreased risk of diabetes.</p> <p>Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes in children.</p> <p>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).</p>				
URIC ACID	5.0		4.0-8.0 mg/dL	UL
Therapeutic target for gout patients: <6.0 mg/dL				
TSH	2.13		0.40-4.50 mIU/L	UL
T4, FREE	1.1		0.8-1.8 ng/dL	UL
T3, FREE	3.3		2.3-4.2 pg/mL	UL
CBC (INCLUDES DIFF/PLT)				UL
WHITE BLOOD CELL COUNT	5.3		3.8-10.8 Thousand/uL	
RED BLOOD CELL COUNT	4.62		4.20-5.80 Million/uL	
HEMOGLOBIN		12.7 L	13.2-17.1 g/dL	
HEMATOCRIT	39.9		38.5-50.0 %	
MCV	86.4		80.0-100.0 fL	
MCH	27.5		27.0-33.0 pg	
MCHC		31.8 L	32.0-36.0 g/dL	
For adults, a slight decrease in the calculated MCHC value (in the range of 30 to 32 g/dL) is most likely not clinically significant; however, it should be interpreted with caution in correlation with other red cell parameters and the patient's clinical condition.				
RDW	12.7		11.0-15.0 %	
PLATELET COUNT	184		140-400 Thousand/uL	
MPV	10.6		7.5-12.5 fL	
ABSOLUTE NEUTROPHILS	2873		1500-7800 cells/uL	
ABSOLUTE LYMPHOCYTES	1701		850-3900 cells/uL	
ABSOLUTE MONOCYTES	429		200-950 cells/uL	
ABSOLUTE EOSINOPHILS	249		15-500 cells/uL	
ABSOLUTE BASOPHILS	48		0-200 cells/uL	
NEUTROPHILS	54.2		%	
LYMPHOCYTES	32.1		%	
MONOCYTES	8.1		%	
EOSINOPHILS	4.7		%	
BASOPHILS	0.9		%	
URINALYSIS, COMPLETE				UL
COLOR	YELLOW		YELLOW	
APPEARANCE	CLEAR		CLEAR	
SPECIFIC GRAVITY	1.021		1.001-1.035	
PH	6.0		5.0-8.0	
GLUCOSE	NEGATIVE		NEGATIVE	
BILIRUBIN	NEGATIVE		NEGATIVE	
KETONES	NEGATIVE		NEGATIVE	



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Test Name	In Range	Out Of Range	Reference Range	Lab
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	

This urine was analyzed for the presence of WBC, RBC, bacteria, casts, and other formed elements. Only those elements seen were reported.

CORTISOL, TOTAL, LC/MS 13.8 mcg/dL EZ

Adult Reference Ranges for Cortisol, Total:

8-10 AM 4.6-20.6 mcg/dL
4-6 PM 1.8-13.6 mcg/dL

Cortisol Response to ACTH
Peak >20.0 mcg/dL
Peak >16.0 mcg/dL after IM injection

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

INSULIN 3.8 uIU/mL EN
Reference Range < or = 18.4

Risk:
Optimal < or = 18.4
Moderate NA
High >18.4

Adult cardiovascular event risk category cut points (optimal, moderate, high) are based on Insulin Reference Interval studies performed at Quest Diagnostics in 2022.

MERCURY, BLOOD 4 <OR=10 mcg/L EN
See Endnote 1

ABO GROUP AND RH TYPE A UL
ABO GROUP A
RH TYPE RH(D) POSITIVE

For additional information, please refer to
<http://education.QuestDiagnostics.com/faq/FAQ111>
(This link is being provided for informational/educational purposes only.)



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Test Name	In Range	Out Of Range	Reference Range	Lab
MAGNESIUM, RBC	4.9		4.0-6.4 mg/dL	Z3E

(Note)

This test was developed and its analytical performance characteristics have been determined by Quest 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.

MDF

med fusion

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Endnote 1

This test was developed and its analytical performance characteristics have been determined by Quest 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.



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Endocrinology

Test Name	Result	Reference Range	Lab
VITAMIN D,25-OH,TOTAL,IA	30	30-100 ng/mL	UL
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:			



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Cardio IQ®

Test Name	Current		Risk/Reference Interval				Historical
	Result & Risk		Optimal	Moderate	High	Units	Result & Risk
	Optimal	Non-Optimal					
LIPID PANEL							
CHOLESTEROL, TOTAL	172		<200	N/A	>=200	mg/dL	
HDL CHOLESTEROL	63		>=40	N/A	<40	mg/dL	
TRIGLYCERIDES	63		<150	150-199	>=200	mg/dL	
LDL-CHOLESTEROL	94		<100	100-129	>129	mg/dL (calc)	
CHOL/HDLRATIO	2.7		<=3.5	3.6-5.0	>5.0	calc	
NON-HDL CHOLESTEROL	109		<130	130-189	>=190	mg/dL (calc)	
LIPOPROTEIN FRACTIONATION, ION MOBILITY							
LDL PARTICLE NUMBER		1643	<1138	1138-1409	>1409	nmol/L	
LDL SMALL		316	<142	142-219	>219	nmol/L	
LDL MEDIUM		354	<215	215-301	>301	nmol/L	
HDL LARGE	6846		>6729	6729-5353	<5353	nmol/L	
LDL PATTERN		B	A	N/A	B	Pattern	
LDL PEAK SIZE		217.2	>222.9	222.9-217.4	<217.4	Angstrom	

For details on reference ranges please refer to the reference range/comment section of the report.

Medical Information For Healthcare Providers: If you have questions about any of the tests in our Cardio IQ offering, please call Client Services at our Quest Diagnostics-Cleveland HeartLab Cardiometabolic Center of Excellence. They can be reached at 866.358.9828, option 1 to arrange a consult with our clinical education team.



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Reference Range/Comments

Analyte Name	In Range	Out Range	Reference Range	Lab
LDL MEDIUM		354	<215 nmol/L	Z4M
Relative Risk: Optimal <215; Moderate 215-301; High >301. Male Reference Range: 167 to 485 nmol/L; Female Reference Range: 121 to 397 nmol/L.				
LDL PARTICLE NUMBER		1643	<1138 nmol/L	Z4M
Relative Risk: Optimal <1138; Moderate 1138-1409; High >1409. Male and Female Reference Range: 1016 to 2185 nmol/L.				
LDL PATTERN		B	A Pattern	Z4M
Relative Risk: Optimal Pattern A; High Pattern B. Reference Range: Pattern A.				
LDL PEAK SIZE		217.2	>222.9 Angstrom	Z4M
This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Cardiometabolic Center of Excellence at Cleveland HeartLab. It has not been cleared or approved by the U.S. Food and Drug Administration. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. Relative Risk: Optimal >222.9; Moderate 222.9-217.4; High <217.4. Male and Female Reference Range: 216 to 234.3 Angstrom. Adult cardiovascular event risk category cut points (optimal, moderate, high) are based on an adult U.S. reference population plus two large cohort study populations. Association between lipoprotein subfractions and cardiovascular events is based on Musunuru et al. ATVB.2009;29:1975. For additional information, please refer to http://education.QuestDiagnostics.com/faq/FAQ134 (This link is being provided for informational/educational purposes only.)				
LDL SMALL		316	<142 nmol/L	Z4M
Relative Risk: Optimal <142; Moderate 142-219; High >219. Male Reference Range: 123 to 441 nmol/L; Female Reference Range: 115 to 386 nmol/L.				
CHOL/HDL C RATIO	2.7		<5.0 calc	Z4M
CHOLESTEROL, TOTAL	172		<200 mg/dL	Z4M
HDL CHOLESTEROL	63		>39 mg/dL	Z4M
HDL LARGE	6846		>6729 nmol/L	Z4M
Relative Risk: Optimal >6729; Moderate 6729-5353; High <5353. Male Reference Range: 4334 to 10815 nmol/L; Female Reference Range: 5038 to 17886 nmol/L.				
LDL-CHOLESTEROL	94		<100 mg/dL (calc)	Z4M
Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with ≥ 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)				
NON HDL CHOLESTEROL	109		<130 mg/dL (calc)	Z4M
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.				
TRIGLYCERIDES	63		<150 mg/dL	Z4M

PERFORMING SITE:

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