

MORTONPORT REGIONAL HOSPITAL

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Mortonport, CT 04846
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LABORATORY RESULTS

PATIENT INFORMATION

| | |
|----------------|---|
| Patient Name: | Larson, Sara |
| Date of Birth: | 06/28/1990 |
| Age: | 35 |
| MRN: | MRN824549 |
| Address: | 391 Heather Grove Suite 310, Jasonhaven, NC 85089 |
| Phone: | 001-500-480-0470 |

TEST INFORMATION

| | |
|--------------------|------------------|
| Collection Date: | 10/27/2025 |
| Report Date: | 11/20/2025 |
| Ordering Provider: | Donna Walker, DO |

LABORATORY RESULTS

| Test Name | Result | Unit | Reference Range | Flag |
|-------------------|--------|-------|-----------------|------|
| Hemoglobin A1C | 6.5 | % | 4.0-5.6 | H |
| Total Cholesterol | 222 | mg/dL | <200 | H |
| LDL Cholesterol | 187 | mg/dL | <100 | |
| HDL Cholesterol | 44 | mg/dL | >40 | L |
| Glucose | 132 | mg/dL | 70-100 | |

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Medical Director: Donna Walker, DO
NPI: 3571814431