



Name: GAROT CONKLIN
Date of Birth: 21-Mar-1972
Birth Sex: Male

Results

Order: Liver Elastography Report Ordered On: 09/30/2025

Name	Resulted On	Value	Units
		ERIE COUNTY MEDICAL CENTER CORPORATION Liver Elastography Report 462 Grider St.,Buffalo, NY 14215 (716) 898-3000	
Liver Elastography Report	9/30/2025	Patient's Name CONKLIN,GAROT MR#: M000943022/Account #: V00008145702 Report# 0930-0596 Age/Sex: 53/M Date of Birth: 03/21/1972 Admission Date/Time: Attending Physician: MARTINEZ,ANTHONY D MD Admitting Service: Dictating Provider: PRZYBYL,EMILY A PA-CDictating Date/Time: 09/30/25 1023 Primary Provider: POTEPPA,MICHELE A MD, (RF) Liver Elastography Report Liver Elastography Report Date of Procedure: Sep 30, 2025 Technique Shear-wave elastography of the liver. Multiple ROIs were placed with measurements of velocity and calculations noted below. Elastography performed separately from diagnostic imaging. Clinical Indication: MASLD/MASH IQR < or equal to 30%. Yes Quality sufficient: Yes kPa value 10.7 Fibrosis stage: F3 CAP score 349 Steatosis grade: S3 (>67%) PRZYBYL,EMILY A PA-C Sep 30, 2025 10:23 Attn Physician: MARTINEZ,ANTHONY D MD <Electronically signed by EMILY A PRZYBYL PA-C>, 09/30/25 1023 , , PC Physician: POTEPPA,MICHELE A MD, (RF) Ref Physician: Copies To: These results may not yet have been reviewed by your healthcare provider. Any results should be discussed with your healthcare provider to obtain the best clarity on how they pertain to your health and treatment.	

DISCLAIMER: This information is supplied from the patient's medical record via a patient portal. The medical provider is listed as the source. Items with a source of 'Patient-Entered' were added by the patient. This record may not be complete or up to date, and should not be used for providing medical advice. For an official copy of the individual's medical record, the patient (or custodian) must contact their medical provider.

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