



John M Kelly

Patient Health Summary, generated on May 19, 2022

Patient Demographics - Male; born Feb. 06, 1976

Patient Address	Communication	Language	Race / Ethnicity	Marital Status
44 CORTLAND AVE (Home) SAN FRANCISCO, CA 94110-5410	510-326-3623 (Home) 510-326-3623 (Work) 510-326-3623 (Mobile) jhnlly@gmail.com	English - Spoken (Preferred) English - Written (Preferred)	White / Not Hispanic or Latino	Married

Former (Sep. 29, 2014 - Dec. 11, 2018):

44 CORTLAND AVE.
(Home)
SAN FRANCISCO, CA
94110

Note from Kaiser Permanente Northern California

This document contains information that was shared with John M Kelly. It may not contain the entire record from Kaiser Permanente Northern California.

Allergies

Bee Venom - High Severity

Medications

Desonide (DESOWEN/TRIDESILON) 0.05 % Top Lotn (Started 8/23/2016)

Apply twice daily as needed to ears or scalp

EPINEPPhrine (ADRENAClick/EPIPEN) 0.3 mg/0.3 mL Inj AutoInjector (Started 6/30/2020)

Inject 0.3 mL into thigh at the first sign of severe allergic reaction or as directed

Cetirizine (ZyrTEC) 10 mg Oral Tab (Started 6/30/2020)

Take 1 tablet by mouth daily

Omeprazole (PriLOSEC) 20 mg Oral CPDR SR Cap (Started 3/11/2022)

Take 1 capsule by mouth daily 30 minutes before breakfast

buPROPion (WELLBUTRIN XL) 150 mg Oral 24hr XL Tab (Started 4/5/2022)

Take 3 tablets orally daily. This replaces Bupropion XL 450mg

Mupirocin (CENTANY) 2 % Top Oint (Started 5/10/2022)

Apply to affected area(s) 2 times a day

Fluocinonide (LIDEX) 0.05 % Top Oint (Started 5/10/2022)

Apply to affected area(s) 2 times a day as needed for rash . Stop when rash is gone. Do not use on face, neck, or skin folds

predniSONE (DELTASONE) 5 mg Oral Tab (Started 5/18/2022)

Take 5 tablets (25 mg) daily for 1 month

Ended Medications

predniSONE (DELTASONE) 5 mg Oral Tab (Started 4/11/2022) **(Discontinued)**

Alternate between 5 and 6 tablets by mouth every day.

predniSONE (DELTASONE) 5 mg Oral Tab (Started 5/4/2022) **(Discontinued)**

Take 5 tablets by mouth daily

Active Problems

ADHD, COMBINED PRESENTATION (Noted 4/28/2014)

ANXIETY DISORDER (Noted 3/24/2014)

BEE VENOM ALLERGY (Noted 7/9/2013)

DYSTHYMIA (Noted 3/24/2014)

HEMOLYTIC ANEMIA, DUE TO WARM ANTIBODY (Noted 11/19/2021)

MAJOR DEPRESSIVE DISORDER, RECURRENT EPISODE (Noted 3/24/2014)

MIGRAINE (Noted 8/14/2008)

PANCYTOPENIA (REDUCTION OF ALL BLOOD ELEMENTS) (Noted 11/19/2021)

Immunizations

COVID-19 Moderna, External Administration (Given 12/29/2021, 5/24/2021, 4/26/2021)

COVID-19 mRNA LNP-S, PF (Moderna) (Given 1/24/2022)

HBV (Hepatitis B) (Given 12/16/1994, 7/15/1994, 6/14/1994)

INFS Pres Free 18yrs-adult (Flublok quadrivalent) (influenza) (Given 9/11/2019)

INFS Pres Free 6mos-Adult (Flulaval Quadrivalent) (Influenza) (Given 9/23/2020)

INFS pres free 6mos-adult (quadrivalent) (influenza) (Given 12/4/2018)

INFS, external administration (Given 10/5/2021)

MMR (Measles, Mumps, Rubella) (Given 4/19/1990)

Tdap (ADACEL) (Tetanus, diphtheria, acellular pertussis) (Given 7/30/2012)

td 7yrs-adult (tetanus, diphtheria), adsorbed (Given 4/19/1990)

Social History

Tobacco Use	Types	Packs/Day	Years Used	Date
Never Smoker				
Smokeless Tobacco: Never Used				
Alcohol Use	Standard Drinks/Week			
Yes	5.8 (1 standard drink = 0.6 oz pure alcohol)			
Substance Use	Types	Use/Week		
No				
Sex Assigned at Birth	Date Recorded			
Not on file				

Last Filed Vital Signs

Vital Sign	Reading	Time Taken	Comments
Blood Pressure	118/70	11/30/2021 1:58 PM PST	
Pulse	67	11/30/2021 1:58 PM PST	
Temperature	36.9 °C (98.5 °F)	11/30/2021 1:58 PM PST	
Respiratory Rate	18	11/22/2021 1:51 PM PST	
Oxygen Saturation	99%	11/30/2021 1:58 PM PST	
Inhaled Oxygen Concentration	-	-	
Weight	77.1 kg (170 lb)	11/30/2021 1:58 PM PST	
Height	188 cm (6' 2")	11/30/2021 1:58 PM PST	
Body Mass Index	21.83	11/30/2021 1:58 PM PST	

Results

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	4.93	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.214	0.025 - 0.115			TPMG REGIONAL	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/16/2022 9:08 AM PDT	05/16/2022 12:10 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

LACTATE DEHYDROGENASE (LDH) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	438	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/16/2022 9:08 AM PDT	05/16/2022 1:24 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/16/2022 9:08 AM PDT	05/16/2022 1:24 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	LABORATORY			

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.2	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				05/16/2022 9:08 AM PDT	05/16/2022 1:24 PM PDT	

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

HAPTOGLOBIN - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				05/16/2022 9:08 AM PDT	05/16/2022 1:24 PM PDT	

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	44	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	44	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	10	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	

Eosinophils %, automated count	0	0 - 7 %	TPMG REGIONAL LABORATORY, MWS
Basophils %, automated count	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	2.7	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time
			05/16/2022 9:08 AM PDT 05/16/2022 12:10 PM PDT
Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (05/16/2022 9:08 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	6.2	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	4.33	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	12.5	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	38.1	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	88	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	15.3	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	130	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	

RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			05/16/2022 9:08 AM PDT	05/16/2022 12:10 PM PDT		
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804				
RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (05/09/2022 9:21 AM PDT)						
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	4.66	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.210	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			05/09/2022 9:21 AM PDT	05/09/2022 1:00 PM PDT		
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804				

LACTATE DEHYDROGENASE (LDH) - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	413	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Authorizing Provider	Result Type		05/09/2022 9:21 AM PDT	05/09/2022 2:16 PM PDT
Performing Organization	Address	City/State/ZIP Code	Phone Number	
DEEPIKA KUMAR MD	BLOOD	TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/09/2022 9:21 AM PDT	05/09/2022 2:16 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.6	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/09/2022 9:21 AM PDT	05/09/2022 2:16 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

HAPTOGLOBIN - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	

Anatomical Location / Collection Method /

Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Authorizing Provider	Result Type		05/09/2022 9:21 AM PDT	05/09/2022 2:16 PM PDT
Performing Organization	Address	City/State/ZIP Code	Phone Number	
DEEPIKA KUMAR MD	BLOOD	TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	38	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	48	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	11	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	2.3	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/09/2022 9:21 AM PDT	05/09/2022 1:00 PM PDT

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (05/09/2022 9:21 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	6.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY,	

Red blood cells count	4.50	4.10 - 5.70 M/uL	MWS
Hgb	13.2	13.0 - 17.0 g/dL	TPMG REGIONAL LABORATORY, MWS
Hematocrit	38.8	39.0 - 51.0 %	TPMG REGIONAL LABORATORY, MWS
MCV	86	80 - 100 fL	TPMG REGIONAL LABORATORY, MWS
RDW, RBC	15.3	12.0 - 16.5 %	TPMG REGIONAL LABORATORY, MWS
Platelets count	141	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/09/2022 9:21 AM PDT	05/09/2022 1:00 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	4.61	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.201	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/28/2022 9:38 AM PDT	04/28/2022 3:41 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			

Authorizing Provider Result Type
DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

LACTATE DEHYDROGENASE (LDH) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	326	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/28/2022 9:38 AM PDT	04/28/2022 3:44 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/28/2022 9:38 AM PDT	04/28/2022 3:44 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.4	0.2 - 1.2 mg/dL			TPMG REGIONAL	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/28/2022 9:38 AM PDT	04/28/2022 3:44 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

HAPTOGLOBIN - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			04/28/2022 9:38 AM PDT	04/28/2022 3:44 PM PDT		
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710				

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	40	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	47	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	10	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY,	

Neutrophils auto count	2.3	1.8 - 7.9 K/uL	MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time

04/28/2022 9:38 AM PDT 04/28/2022 3:41 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (04/28/2022 9:38 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	5.7	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	4.35	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	12.9	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	38.0	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	87	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	14.6	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	133	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
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04/28/2022 9:38 AM PDT 04/28/2022 3:41 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (04/19/2022 9:06 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	5.29	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.223	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/19/2022 9:06 AM PDT	04/19/2022 1:47 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

LACTATE DEHYDROGENASE (LDH) - Final result (04/19/2022 9:06 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	317	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/19/2022 9:06 AM PDT	04/19/2022 4:00 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (04/19/2022 9:06 AM PDT)

Ref Analysis

Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Comment: Repeat and Confirmed						
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
				04/19/2022 9:06 AM PDT	04/19/2022 4:00 PM PDT	
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	LABORATORY					
Performing Organization	Address		City/State/ZIP Code	Phone Number		
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South		Richmond, CA 94804			

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (04/19/2022 9:06 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.3	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Comment: Repeat and Confirmed						
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
				04/19/2022 9:06 AM PDT	04/19/2022 4:00 PM PDT	
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address		City/State/ZIP Code	Phone Number		
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South		Richmond, CA 94804			

HAPTOGLOBIN - Final result (04/19/2022 9:06 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Comment: Repeat and Confirmed						
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
				04/19/2022 9:06 AM PDT	04/19/2022 4:00 PM PDT	
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address		City/State/ZIP Code	Phone Number		
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway		Berkeley, CA 94710			

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (04/19/2022 9:06 AM PDT)

Ref Analysis

Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Neutrophils %, automated count	38	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	49	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	11	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	0	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	2.0	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/19/2022 9:06 AM PDT	04/19/2022 1:47 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (04/19/2022 9:06 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	5.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	4.21	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	12.7	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	37.9	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	

MCV	90	80 - 100 fL	TPMG REGIONAL LABORATORY, MWS
RDW, RBC	15.5	12.0 - 16.5 %	TPMG REGIONAL LABORATORY, MWS
Platelets count	118	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/19/2022 9:06 AM PDT	04/19/2022 1:47 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RBC's, morphology	NORMAL				TPMG REGIONAL LABORATORY, MWS	
Platelets,bld,ql, man ct	CONFIRMD				TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 3:34 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	4.14	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count,	0.171	0.025 -			TPMG	

absolute, auto	0.115 M/uL	REGIONAL LABORATORY, MWS
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Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 3:34 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

LACTATE DEHYDROGENASE (LDH) - Final result (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	325	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 4:41 PM PDT

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 4:41 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.3	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 4:41 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	1.8	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 4:41 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

HAPTOGLOBIN - Final result (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 4:41 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	38	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	49	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	11	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	

Eosinophils %, automated count	0	0 - 7 %	TPMG REGIONAL LABORATORY, MWS
Basophils %, automated count	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	1.9	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time
			04/11/2022 9:19 AM PDT 04/11/2022 3:34 PM PDT
Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Edited Result - FINAL (04/11/2022 9:19 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	5.0	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	4.13	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	12.5	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	37.5	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	91	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	16.4	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	138	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0			TPMG	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/11/2022 9:19 AM PDT	04/11/2022 3:34 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	5.15	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.207	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 2:06 PM PDT

Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	4.92	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.197	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 2:08 PM PDT

Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL	914 Marina Way South	Richmond, CA 94804		

LACTATE DEHYDROGENASE (LDH) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	310	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

when performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 3:08 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 3:08 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	LABORATORY			

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.4	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 3:08 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

HAPTOGLOBIN - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 3:08 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL LABORATORY, BERKELEY 1725 Eastshore Highway Berkeley, CA 94710

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	37	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	49	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	11	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	2.0	1.8 - 7.9			TPMG	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 2:08 PM PDT

Authorizing Provider	Result Type
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DEEPIKA KUMAR MD	LABORATORY
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Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (04/03/2022 8:36 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	5.4	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	4.01	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	11.8	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	36.8	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	92	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	15.5	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	134	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			04/03/2022 8:36 AM PDT	04/03/2022 2:08 PM PDT

Authorizing Provider	Result Type
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DEEPIKA KUMAR MD	BLOOD
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Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL	914 Marina Way South	Richmond, CA 94804	

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	6.24	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.238	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/25/2022 9:14 AM PDT	03/25/2022 12:03 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

LACTATE DEHYDROGENASE (LDH) - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	396	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/25/2022 9:14 AM PDT	03/25/2022 12:30 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (03/25/2022 9:14 AM PDT)

Ref Analysis

Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Bilirubin, direct	0.3	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/25/2022 9:14 AM PDT	03/25/2022 12:30 PM PDT

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY
Performing Organization	
TPMG REGIONAL LABORATORY, MWS	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	1.8	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				03/25/2022 9:14 AM PDT	03/25/2022 12:30 PM PDT	

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	
TPMG REGIONAL LABORATORY, MWS	

HAPTOGLOBIN - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				03/25/2022 9:14 AM PDT	03/25/2022 12:30 PM PDT	

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	
TPMG REGIONAL LABORATORY, BERKELEY	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	35	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	52	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	10	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	1.5	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time	
				03/25/2022 9:14 AM PDT	03/25/2022 12:03 PM PDT	

Authorizing Provider Result Type
DEEPIKA KUMAR MD LABORATORY

Performing Organization Address City/State/ZIP Code Phone Number
TPMG REGIONAL LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (03/25/2022 9:14 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	4.3	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.81	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	11.7	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	35.8	39.0 -			TPMG	

51.0 %

REGIONAL
LABORATORY,
MWS

MCV	94	80 - 100 fL	TPMG REGIONAL LABORATORY, MWS
RDW, RBC	16.7	12.0 - 16.5 %	TPMG REGIONAL LABORATORY, MWS
Platelets count	112	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/25/2022 9:14 AM PDT	03/25/2022 12:03 PM PDT

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	BLOOD		
Performing Organization	Address		City/State/ZIP Code
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South		Richmond, CA 94804

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	8.04	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.278	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/17/2022 9:13 AM PDT	03/17/2022 5:21 PM PDT

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	BLOOD		
Performing Organization	Address		City/State/ZIP Code
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South		Richmond, CA 94804

LACTATE DEHYDROGENASE (LDH) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	489	<=270			TPMG	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/17/2022 9:13 AM PDT	03/17/2022 3:25 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/17/2022 9:13 AM PDT	03/17/2022 3:25 PM PDT
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.7	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/17/2022 9:13 AM PDT	03/17/2022 3:25 PM PDT

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

HAPTOGLOBIN - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				03/17/2022 9:13 AM PDT	03/17/2022 3:25 PM PDT	

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	38	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	51	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	9	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	0	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	1.5	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				03/17/2022 9:13 AM PDT	03/17/2022 5:21 PM PDT	

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (03/17/2022 9:13 AM PDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	4.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.46	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	10.7	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	33.5	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	97	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	18.9	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	111	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/17/2022 9:13 AM PDT	03/17/2022 5:21 PM PDT

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (03/10/2022 10:23 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	36	42 - 76 %			TPMG REGIONAL	

Lymphocytes %, automated count	53	15 - 47 %	TPMG REGIONAL LABORATORY, MWS
Monos %, auto	9	5 - 13 %	TPMG REGIONAL LABORATORY, MWS
Eosinophils %, automated count	0	0 - 7 %	TPMG REGIONAL LABORATORY, MWS
Basophils %, automated count	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	1.5	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/10/2022 10:23 AM PST	03/10/2022 2:40 PM PST

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (03/10/2022 10:23 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	4.2	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.53	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	10.7	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	31.9	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	90	80 - 100 fL			TPMG REGIONAL	

RDW, RBC	19.4	12.0 - 16.5 %	TPMG REGIONAL LABORATORY, MWS
Platelets count	115	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/10/2022 10:23 AM PST	03/10/2022 2:40 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (03/09/2022 9:10 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	7.95	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.289	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/09/2022 9:10 AM PST	03/09/2022 2:42 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

LACTATE DEHYDROGENASE (LDH) - Final result (03/09/2022 9:10 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	629	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories

using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			03/09/2022 9:10 AM PST	03/09/2022 3:06 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (03/09/2022 9:10 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality				Collection Time	Received Time
					03/09/2022 9:10 AM PST	03/09/2022 3:06 PM PST
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	LABORATORY					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804				

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (03/09/2022 9:10 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.4	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality				Collection Time	Received Time
					03/09/2022 9:10 AM PST	03/09/2022 3:06 PM PST
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804				

HAPTOGLOBIN - Final result (03/09/2022 9:10 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time		
				03/09/2022 9:10 AM PST	03/09/2022 3:06 PM PST			
Authorizing Provider	Result Type							
DEEPIKA KUMAR MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code	Phone Number					
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710						

RED BLOOD CELL MORPHOLOGY (RBC MORPHOLOGY) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
RBC's, morphology	NORMAL				TPMG REGIONAL LABORATORY, MWS			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time		
				02/28/2022 10:02 AM PST	02/28/2022 3:33 PM PST			
Authorizing Provider	Result Type							
DEEPIKA KUMAR MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code	Phone Number					
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804						

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Reticulocytes/100 RBC's, automated	8.14	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time		
				02/28/2022 10:02 AM PST	02/28/2022 3:33 PM PST			
Authorizing Provider	Result Type							
DEEPIKA KUMAR MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code	Phone Number					
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804						

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

LACTATE DEHYDROGENASE (LDH) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	728	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/28/2022 10:02 AM PST	02/28/2022 6:16 PM PST

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/28/2022 10:02 AM PST	02/28/2022 6:16 PM PST

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.2	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/28/2022 10:02 AM PST	02/28/2022 6:16 PM PST

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL
LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

HAPTOGLOBIN - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/28/2022 10:02 AM PST	02/28/2022 6:16 PM PST

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL
LABORATORY, BERKELEY 1725 Eastshore Highway Berkeley, CA 94710

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	29	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	59	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	10	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	0	0 - 7 %			TPMG REGIONAL LABORATORY,	

			MWS
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Basophils %, automated count	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	0.9	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time
			02/28/2022 10:02 AM PST
Received Time			02/28/2022 3:33 PM PST

Authorizing Provider	Result Type		
DEEPIKA KUMAR MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (02/28/2022 10:02 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	3.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	2.97	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	9.3	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	28.2	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	95	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	20.1	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	106	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY,	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/28/2022 10:02 AM PST	02/28/2022 3:33 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (02/21/2022 9:14 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	7.27	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.243	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/21/2022 9:14 AM PST	02/21/2022 5:04 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

LACTATE DEHYDROGENASE (LDH) - Final result (02/21/2022 9:14 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	817	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/21/2022 9:14 AM PST	02/21/2022 5:26 PM PST

Authorizing Provider DEEPIKA KUMAR MD	Result Type BLOOD
Performing Organization TPMG REGIONAL LABORATORY, MWS	Address 914 Marina Way South City/State/ZIP Code Richmond, CA 94804

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (02/21/2022 9:14 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment: Repeat and Confirmed

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/21/2022 9:14 AM PST	02/21/2022 5:26 PM PST

Authorizing Provider

DEEPIKA KUMAR MD Result Type

LABORATORY

Performing Organization

Address

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South

City/State/ZIP Code

Richmond, CA 94804

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	4.0	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume		Collection Time	Received Time
					02/21/2022 9:14 AM PST	02/21/2022 5:26 PM PST

Authorizing Provider

DEEPIKA KUMAR MD Result Type

BLOOD

Performing Organization

Address

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South

City/State/ZIP Code

Richmond, CA 94804

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume		Collection Time	Received Time
					02/21/2022 9:14 AM PST	02/21/2022 5:26 PM PST

Authorizing Provider	Result Type				
DEEPIKA KUMAR MD	BLOOD				
Performing Organization	Address	City/State/ZIP Code	Phone Number		
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710			

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (02/21/2022 9:14 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	32	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	51	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	12	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	2	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	2	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	1.3	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
				02/21/2022 9:14 AM PST	02/21/2022 5:04 PM PST	

Authorizing Provider	Result Type				
DEEPIKA KUMAR MD	LABORATORY				
Performing Organization	Address	City/State/ZIP Code	Phone Number		
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804			

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (02/21/2022 9:14 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	4.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.34	4.10 - 5.70			TPMG REGIONAL	

		M/uL	LABORATORY, MWS
Hgb	10.3	13.0 - 17.0 g/dL	TPMG REGIONAL LABORATORY, MWS
Hematocrit	31.3	39.0 - 51.0 %	TPMG REGIONAL LABORATORY, MWS
MCV	94	80 - 100 fL	TPMG REGIONAL LABORATORY, MWS
RDW, RBC	19.9	12.0 - 16.5 %	TPMG REGIONAL LABORATORY, MWS
Platelets count	141	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/21/2022 9:14 AM PST	02/21/2022 5:04 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	6.79	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.240	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/14/2022 9:57 AM PST	02/14/2022 1:36 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

LACTATE DEHYDROGENASE (LDH) - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	712	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/14/2022 9:57 AM PST	02/14/2022 3:26 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality				Collection Time	Received Time
					02/14/2022 9:57 AM PST	02/14/2022 3:26 PM PST
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	LABORATORY					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804				

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.9	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
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Authorizing Provider DEEPIKA KUMAR MD	Result Type BLOOD		
Performing Organization TPMG REGIONAL LABORATORY, MWS	Address 914 Marina Way South	City/State/ZIP Code Richmond, CA 94804	Phone Number

HAPTOGLOBIN - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	

Authorizing Provider

Authorizing Provider DEEPIKA KUMAR MD	Result Type BLOOD
Performing Organization TPMG REGIONAL LABORATORY, BERKELEY	Address 1725 Eastshore Highway

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	55	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	33	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	7	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	0	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	1	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	4	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
Neutrophils auto count	2.1	1.8 - 7.9 K/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/14/2022 9:57 AM PST	02/14/2022 1:36 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (02/14/2022 9:57 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	3.7	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.53	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	10.6	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	32.3	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	92	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	18.2	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	107	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			02/14/2022 9:57 AM PST	02/14/2022 1:36 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

CREATININE AND CALCULATED GLOMERULAR FILTRATION RATE (CREATININE W GFR, CALCULATED) - Final result

(12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Creatinine	0.95	<=1.34 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Glomerular filtration rate, nonAfrican American	>60	>=60 mL/min			TPMG REGIONAL LABORATORY, MWS	
GLOMERULAR FILTRATION RATE - AFRICAN AMERICAN	>60	>=60 mL/min			TPMG REGIONAL LABORATORY, MWS	
Comment, glomerular filtration rate	SEE NOTE				TPMG REGIONAL LABORATORY, MWS	
Comment: Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m ² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.						
Per K/DOQI Clinical Practice Guidelines on Chronic Kidney Disease: GFR 30 - 59 = Stage 3 CKD GFR 15 - 29 = Stage 4 CKD GFR < 15 = Stage 5 CKD						

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

RED BLOOD CELL MORPHOLOGY (RBC MORPHOLOGY) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RBC's, morphology	NORMAL				TPMG REGIONAL LABORATORY, MWS	
Platelets,bld,ql, man ct	CONFIRMD				TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 3:02 PM PST

Authorizing Provider DEEPIKA KUMAR MD	Result Type BLOOD		
Performing Organization TPMG REGIONAL LABORATORY, MWS	Address 914 Marina Way South	City/State/ZIP Code Richmond, CA 94804	Phone Number

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	6.73	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.221	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 3:02 PM PST

Authorizing Provider DEEPIKA KUMAR MD	Result Type BLOOD
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Performing Organization TPMG REGIONAL LABORATORY, MWS	Address 914 Marina Way South	City/State/ZIP Code Richmond, CA 94804	Phone Number
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DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST

Authorizing Provider DEEPIKA KUMAR MD	Result Type LABORATORY
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Performing Organization TPMG REGIONAL LABORATORY, MWS	Address 914 Marina Way South	City/State/ZIP Code Richmond, CA 94804	Phone Number
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TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.0	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

HAPTOGLOBIN - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY			
Specimen (Source)	Anatomical Location / Laterality							
			Collection Method / Volume	Collection Time	Received Time			
				12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST			
Authorizing Provider	Result Type							
DEEPIKA KUMAR MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code	Phone Number					
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710						

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	70	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	21	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	6	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	0	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	0	0 - 1 %			TPMG REGIONAL LABORATORY, MWS	
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	3	0 - 1 %			TPMG REGIONAL LABORATORY,	

Neutrophils auto count	2.8	1.8 - 7.9 K/uL	MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time

12/27/2021 12:07 PM PST 12/27/2021 3:02 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	4.1	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	3.28	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	10.1	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	31.5	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	96	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	18.3	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	78	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 3:02 PM PST

Authorizing Provider	Result Type

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

SODIUM - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	142	135 - 145 mEq/L			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

GLUCOSE - Final result (12/27/2021 12:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
GLUCOSE, RANDOM	96	60 - 159 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Borderline range of 160 - 199 mg/dL suggests follow-up. Results greater than or equal to 200 mg/dL is suggestive of diabetes in the setting of classical symptoms.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/27/2021 12:07 PM PST	12/27/2021 4:58 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

URINALYSIS (URINALYSIS, AUTOMATED) - Final result (12/08/2021 1:36 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, UA	NEGATIVE	NEGATIVE			KFH SAN FRANCISCO LABORATORY	
Bilirubin, UA	NEGATIVE	NEGATIVE			KFH SAN	

mg/dL

FRANCISCO
LABORATORY

Ketones, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
Specific gravity, UA	1.011	1.001 - 1.035	KFH SAN FRANCISCO LABORATORY
Hemoglobin,ur,ql	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
pH, UA	7.0	4.5 - 8.0	KFH SAN FRANCISCO LABORATORY
Protein, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
Urobilinogen, UA	4.0	0.0 - 2.0 mg/dL	KFH SAN FRANCISCO LABORATORY
Nitrite, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
LEUKOCYTE ESTERASE, UA	NEGATIVE	NEGATIVE Leu/ul	KFH SAN FRANCISCO LABORATORY
Appearance, urine	CLEAR	CLEAR	KFH SAN FRANCISCO LABORATORY
Color, urine	YELLOW	YELLOW	KFH SAN FRANCISCO LABORATORY
Specimen source	CLEAN		KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 1:36 PM PST	12/08/2021 5:24 PM PST

Authorizing Provider	Result Type
RODERICK MACKENZIE THOMPSON MD	LABORATORY
Performing Organization	Address
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.

ANTI HUMAN GLOBULIN (COOMBS TEST) (DIRECT COOMBS (MEDICAL CENTER)) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Direct antiglobulin test, poly specific	Positive				KFH SAN FRANCISCO LABORATORY	
Direct antiglobulin test, IgG	Negative				KFH SAN FRANCISCO LABORATORY	
DIRECT ANTIGLOBULIN	Positive				KFH SAN	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 12:31 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

RED BLOOD CELL MORPHOLOGY (RBC MORPHOLOGY) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets,bld,ql, man ct	CONFIRMD				TPMG REGIONAL LABORATORY, MWS	
Polychromasia	1+				TPMG REGIONAL LABORATORY, MWS	
Anisocytosis	1+				TPMG REGIONAL LABORATORY, MWS	
Microcytes	1+				TPMG REGIONAL LABORATORY, MWS	
Hypochromia	1+				TPMG REGIONAL LABORATORY, MWS	
Macrocytes	1+				TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 4:52 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

BLOOD CULTURE (BLOOD CULTURE 2) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature

Blood culture result	Final Report No growth at 5 days.	TPMG REGIONAL LABORATORY, BERKELEY
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Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
	BLOOD / Unknown		12/08/2021 11:29 AM PST	12/08/2021 5:18 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	MICROBIOLOGY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	6.86	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.205	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 4:29 PM PST

Authorizing Provider Result Type

DEEPIKA KUMAR MD BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

LACTATE DEHYDROGENASE (LDH) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	582	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 3:42 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 3:42 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	LABORATORY
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South
	City/State/ZIP Code
	Richmond, CA 94804
	Phone Number

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.1	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			12/08/2021 11:29 AM PST	12/08/2021 3:42 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	BLOOD
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South
	City/State/ZIP Code
	Richmond, CA 94804
	Phone Number

BLOOD CULTURE - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Blood culture result	Final Report				TPMG	

No growth at
5 days.

REGIONAL
LABORATORY,
BERKELEY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
	BLOOD / Unknown		12/08/2021 11:29 AM PST	12/08/2021 5:18 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	MICROBIOLOGY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

HAPTOGLOBIN - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)	Anatomical Location / Laterality					
	Collection Method / Volume					
	Collection Time					
	12/08/2021 11:29 AM PST					
Authorizing Provider	Result Type					
DEEPIKA KUMAR MD	BLOOD					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710				

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	28	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	51	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	
Monos %, auto	14	5 - 13 %			TPMG REGIONAL LABORATORY, MWS	
Eosinophils %, automated count	1	0 - 7 %			TPMG REGIONAL LABORATORY, MWS	
Basophils %, automated count	2	0 - 1 %			TPMG REGIONAL LABORATORY,	

IMMATURE GRANULOCYTES %, AUTOMATED COUNT	4	0 - 1 %	MWS TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	0.5	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time
			12/08/2021 11:29 AM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Edited Result - FINAL (12/08/2021 11:29 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	1.9	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	2.84	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	8.8	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	26.9	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	95	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	18.8	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	
Platelets count	60	140 - 400 K/uL			TPMG REGIONAL LABORATORY, MWS	
RBC's, nucleated	0	<=0 /100WC			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

RED BLOOD CELL MORPHOLOGY (RBC MORPHOLOGY) - Final result (11/28/2021 11:50 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets,bld,ql, man ct	CONFIRMD				TPMG REGIONAL LABORATORY, MWS	
Polychromasia	1+				TPMG REGIONAL LABORATORY, MWS	
Anisocytosis	1+				TPMG REGIONAL LABORATORY, MWS	
Microcytes	1+				TPMG REGIONAL LABORATORY, MWS	
Macrocytes	1+				TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/28/2021 11:50 AM PST	11/28/2021 10:17 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

WHITE BLOOD CELL DIFFERENTIAL (WBC AUTO DIFF) - Final result (11/28/2021 11:50 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %, automated count	27	42 - 76 %			TPMG REGIONAL LABORATORY, MWS	
Lymphocytes %, automated count	54	15 - 47 %			TPMG REGIONAL LABORATORY, MWS	

Monos %, auto	13	5 - 13 %	TPMG REGIONAL LABORATORY, MWS
Eosinophils %, automated count	1	0 - 7 %	TPMG REGIONAL LABORATORY, MWS
Basophils %, automated count	1	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
IMMATURE GRANULOCYTES %, AUTOMATED COUNT	4	0 - 1 %	TPMG REGIONAL LABORATORY, MWS
Neutrophils auto count	0.7	1.8 - 7.9 K/uL	TPMG REGIONAL LABORATORY, MWS
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time
			11/28/2021 11:50 AM PST 11/28/2021 10:17 PM PST

Authorizing Provider	Result Type
RODERICK MACKENZIE THOMPSON MD	LABORATORY
Performing Organization	Address
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South

CBC (COMPLETE BLOOD COUNT) (CBC NO DIFFERENTIAL) - Edited Result - FINAL (11/28/2021 11:50 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	2.6	3.7 - 11.1 K/uL			TPMG REGIONAL LABORATORY, MWS	
Red blood cells count	2.78	4.10 - 5.70 M/uL			TPMG REGIONAL LABORATORY, MWS	
Hgb	8.7	13.0 - 17.0 g/dL			TPMG REGIONAL LABORATORY, MWS	
Hematocrit	26.5	39.0 - 51.0 %			TPMG REGIONAL LABORATORY, MWS	
MCV	95	80 - 100 fL			TPMG REGIONAL LABORATORY, MWS	
RDW, RBC	17.4	12.0 - 16.5 %			TPMG REGIONAL LABORATORY, MWS	

Platelets count	62	140 - 400 K/uL	TPMG REGIONAL LABORATORY, MWS
RBC's, nucleated	0	<=0 /100WC	TPMG REGIONAL LABORATORY, MWS

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/28/2021 11:50 AM PST	11/28/2021 10:17 PM PST
Authorizing Provider		Result Type		
RODERICK MACKENZIE THOMPSON MD		BLOOD		
Performing Organization		Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS		914 Marina Way South	Richmond, CA 94804	

KP MOLECULAR GENETICS REPORT, CANCER (KP MOLECULAR GENETICS REPORT, CANCER.) - Final result (11/22/2021 11:59 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
KP Molecular Genetics Report, Cancer	MOLECULAR GENETIC REPORT				TPMG REGIONAL GENETICS LABORATORY	
	Laboratory#: D2118591B					
	Req Provider: JENNY Wei, M.D.					
	Req Facility: San Francisco					
	Date obtained: 11/21/21 Date of					
	Report: 11/29/21					
	Date of Request: 11/22/21					
	Specimen: Blood					
	Indication Assessment of the JAK2 p.V617F mutation associated with myeloproliferative disorders					
	REPORT					
	Test DNA analysis for the p.V617F mutation within the JAK2 gene.					
	Result					

ARMS PCR analysis did not detect the JAK2 p.V617F mutation in this patient sample.

INTERPRETATION
Negative for the p.V617F mutation within the JAK2 gene.

Method
Genomic DNA was analyzed by a multiplex PCR amplification refractory mutation system (ARMS) and capillary electrophoresis to detect the p.V617F mutation within the JAK2 gene.

NOTE: This test was developed and its performance characteristics were determined by TPMG Regional Molecular Genetics Laboratory as required by the CLIA'88 regulations. It has not been cleared or approved for specific uses by the U.S. Food and Drug Administration.

Disclaimer
This analysis will not detect the p.V617F mutation in samples with less than 0.5% of the cells containing this mutation. Other mutations or polymorphisms within the JAK2 gene are also not detectable by this analysis.

Lulu Mao, Ph.D.,
ABMGG
[Electronic
Signature 1]

Elaine Louie,
Ph.D., ABMGG
[Electronic
Signature 2]

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/22/2021 11:59 PM PST	
Authorizing Provider	Result Type			
JENNY WEI MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL GENETICS LABORATORY	5755 Cottle Rd, Bldg #26	San Jose, CA 95123		

CYTOGENETIC ANALYSIS REPORT, CANCER (CYTOGENETIC ANALYSIS REPORT, CANCER.) - Final result (11/22/2021 11:59 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Pathologist Performed At	Signature
Chromosome analysis, cancer, cytogenetics	CANCER CHROMOSOME ANALYSIS Laboratory #: 021-12466 Tissue Type: BONE MARROW Date Obtained: 11/22/21 Date of Report: 12/01/21 Date Received: 11/23/21 Req Prov: Deepika Kumar Req Fac: San Francisco Indication: CLL (CHRONIC LYMPHOCYTIC LEUKEMIA) Status: Rule out Indication: OTHER Status: Affected Other Reasons: Lymphoma (specify type), MDS, MPD				TPMG REGIONAL GENETICS LABORATORY	

RESULT

Method: GTG FISH
Number of cells/colonies:
22 Band Level:
350

Karyotype: 46,XY[16].nuc

ish(ALKx2)[100], (BCL6x2)
[100],
(MYCx2)[99/100],
(BCR,ABL1,ASS1)x2[184/200],
(ATMx2)[99/100],
(CCND1,IGH)x2[99/100],
(D12Z3x2)[100], (D13S319x2)
[100], (IGH,BCL2)x2
[98/100], (TP53x2)[99/100],
(BCL2x2)[100]
FISH: Negative for trisomy
12 and no deletion of
11q, 13q, or 17p detected;
negative for
Philadelphia chromosome
translocation; negative
for rearrangement of ALK,
BCL6, MYC, or BCL2;
negative for t(14;18) or
t(11;14) translocation

INTERPRETATION

Sixteen cells showed a
normal male karyotype by
conventional cytogenetic
analysis. Six cells had
non-clonal
chromosome losses.

Interphase fluorescence in
situ hybridization (FISH)
using a
DNA probe panel (Abbott
Molecular) showed the
following
results:

ALK rearrangement (2p23)
negative
BCL6 rearrangement (3q27)
negative
MYC rearrangement (8q24)
negative
BCR/ABL1 gene fusion
negative
Deletion of 11q22.3 (ATM)
negative
t(11;14)(q13;q32) or
CCND1/IGH fusion
negative
Trisomy 12
negative
Deletion of 13q14.3
negative
t(14;18)(q32;q21) or
IGH/BCL2 fusion

negative
Deletion of 17p13.1 (TP53)

negative
BCL2 rearrangement (18q21)

negative

NOTE: Number of cells
counted: 22; number of
cells analyzed:
22; number of karyograms
prepared: 2

NOTE: The FISH test was
developed and its
performance
characteristics determined
by the TPMG Regional
Genetics
Laboratory as required by
the CLIA'88 regulations.
It has
not been cleared or
approved for specific uses
by the U.S.
Food and Drug
Administration.

[Electronic Signature 1]

xu Li, Ph.D., ABMGG

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/22/2021 11:59 PM PST	
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL GENETICS LABORATORY	5755 Cottle Rd, Bldg #26	San Jose, CA 95123		

BONE MARROW ASPIRATE, IMMUNOPHENOTYPING - Final result (11/22/2021 2:40 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Comment 02	SEE REPT				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

See CoPath Report.

"This Immunophenotyping Panel was developed and its performance characteristics were determined and deemed acceptable by Kaiser Permanente Regional Laboratory. These tests have not been cleared or approved by the U.S. Food and Drug Administration."

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/22/2021 2:40 PM PST	11/23/2021 5:54 AM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	NON BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

SURGICAL PATHOLOGY - Final result (11/22/2021 8:15 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
PATHOLOGY REPORT	<p>Provider: JACQUELINE MARY POGGI M.D.</p> <p>Collected: 11/22/2021</p> <p>Case #: SFOS21-22965</p>				KFH SAN FRANCISCO LABORATORY	

Bone Marrow Report

FINAL PATHOLOGIC
 DIAGNOSIS
 BONE MARROW ASPIRATE
 AND CORE BIOPSY:
 - PACKED MARROW
 WITH ERYTHROID
 PREDOMINANCE (SEE
 COMMENT)
 - LYMPHOCYTOSIS
 (12-15%) WITH MIXED
 SMALL T- AND
 B-LYMPHOCYTES

JUNMING FANG
 M.D.

** Report
 Electronically
 Signed by JF **
 Comment
 Bone marrow aspirate
 contains no
 spicules; touch
 imprints reveal
 scattered
 hematopoietic cells
 with a ME ratio of
 2-1. Blasts are
 not increased in
 numbers. Dysplastic
 features are not
 evident. Few

lymphocytes are seen in background. Iron stain is noncontributory due to lack of spicules. Core biopsy shows packed marrow with erythroid predominance. The cellularity is over 90%. Primitive cells are not increased in numbers as evidence by CD34 immunostain. Reticulin stain is positive on a scale of 2-3+/4. There is atypical lymphocytosis with small nodular and interstitial pattern, composed of mixed small B- and T-lymphocytes, estimated 12-15% marrow cells. Scattered plasma cells are highlighted by CD138, estimated 10%; which are polyclonal. The finding of packed marrow with reticulin fibrosis raises the possibility of myelodysplasia in a patient with chronic cytopenia. Suggest correlation with cytogenetic / molecular studies. In addition, a superimposed lymphoproliferative or immune mediated disorder is also considered. Suggest clinical correlation and flow cytometry of peripheral blood if indicated.

IMMUNOHISTOCHEMISTRY
CD34 - negative,
positive internal

control
MPO - positive,
small subset
Glycophorin C -
positive
CD20 - positive
CD3 - positive
CD5 - positive
CD10 - negative,
positive internal
control
CD138 -
positive, 10%
Kappa - positive
Lambda -
positive

Reticulin -
positive, 2-3+/4

Clinical History
Priority:->ROUTINE
Estimated number of
specimens: (Label
printing use only)-
>10

CBC dated on 11-23:
WBC 2.3; RBC 2.82;
Hb 8.2; Hct 24.5;
MCV 87;
RDW 17.0; Plt 55

Gross Description
A. The specimen
consists of 8
unstained aspirate
slides are labeled
with the patient's
name and medical
record number ending
in 947.
Four slides have
been selected for
Wright Geimsa
special stain and
one slide has been
selected for iron
special stain.

B. The specimen is
received in Bouin's
fluid labeled with
the
patient's name and
medical record
number ending in
947. The
specimen consists of
a bone marrow core

biopsy (1.2 cm in length by 0.2 cm in diameter). The specimen is entirely submitted in B1 following decalcification. Also received are four touch prep slides which have been sent for Wright Geimsa special stain.

C. The specimen is received in a purple top EDTA blood collection tube labeled with the patient's name and medical record number ending in 947. The specimen consists of blood clot (5 x 4.8 x 0.6 cm in aggregate). The specimen is entirely submitted in C1.

(MEM)

mem/11/22/2021
Specimen(s) Received
A:BONE MARROW
ASPIRATE SMEARS
B:BONE MARROW BIOPSY
- SITE NOT
SPECIFIED
C:BONE MARROW CLOT
- SITE NOT PROVIDED

Patient Name:
KELLY, JOHN M
Med. Rec #:
06150947
DOB/Age: 2/6/1976
(Age: 45) Sex: M
Facility: San Francisco Med Ctr
Location: INPATIENT
NURSING

San Francisco
Pathology
350 Saint Joseph's
Ave
San Francisco, CA
94115

Elizabeth M.
Hosfield, M.D.,
Laboratory Director

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
BONE MARROW ASPIRATE SMEAR (BONE MARROW ASPIRATE)			11/22/2021 8:15 AM PST	11/22/2021 4:20 PM PST
Authorizing Provider	Result Type			
DEEPIKA KUMAR MD	PATHOLOGY/CYTOMOGY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

FLOW CYTOMETRY INTERPRETATION - Final result (11/22/2021 8:15 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
PATHOLOGY REPORT	Provider: DEEPIKA KUMAR M.D. Collected: 11/22/2021 Case #: FLO21-11205				TPMG REGIONAL LABORATORY, BERKELEY	

Flow Cytometry Report

FLOW CYTOMETRY
DIAGNOSIS
BONE MARROW
ASPIRATE, FLOW
CYTOMETRY: CANNOT
ENTIRELY EXCLUDE
A
CLONAL B-CELL
POPULATION DUE TO
INCREASED BINDING
OF SURFACE AND
CYTOPLASMIC LIGHT
CHAINS (SEE
COMMENT).

PHILLIP
EDWARD STARSHAK
M.D.

** Report
Electronically
Signed by PES **
Comment
The majority of

the cells are lymphocytes comprising ~43% of the total. T-cells do not show an abnormal immunophenotype but as was noted in the peripheral blood specimen the B-cell population shows increased binding of both surface and cytoplasmic kappa and lambda light chains (more of the latter) limiting the ability to exclude a clonal B-cell population. In addition, the monocyte population is slightly increased comprising ~14% of the total and shows decreased CD13 expression a non-specific finding. In addition, a subset of this monocyte population shows decreased CD11b, CD36, and CD14 expression, which is a sign of immaturity, but this population is only ~1.5% of the total and the significance of this finding is uncertain. Correlation with the concurrent bone marrow biopsy is recommended.

Two bone marrow
aspirate smears
are reviewed.

Flow Cytometry
Findings
Study
limitations: Non-
specific light
chain binding.

Antibodies
tested:
CD45, CD3, CD2,
CD4, CD5, CD7,
CD8, CD19, CD20,
CD10, CD34,
CD117,
CD13, CD33, CD15,
CD38, CD36, CD64,
CD56, CD123,
CD14, CD61,
CD235,
CD16, CD71,
CD11b, CD11c,
HLA-DR, CD103,
CD23, FMC-7,
CD25, kappa,
and lambda.
Cytoplasmic kappa
and lambda.

Population
Lymphocytes
43%
Monocytes
14%
Granulocytes
38%
Blasts
<1%

In the
lymphocyte gate B
cells, CD4+ T
cells, CD8+ T
cells, CD4/CD8
double negative T
cells, and NK
cells account for
approximately
30%, 22%, 25%, 6%
and 17% of
lymphocytes,
respectively. T
cells do not show
any significant
population with
pan T cell
antigen
aberrancies. The
B-cell population

shows
increased binding
of both surface
and cytoplasmic
kappa and lambda
light chains
limiting the
ability to detect
a clonal B-cell
population.

The
myeloblast
population is
less than 1% and
shows
relatively normal
antigen
expression.

The
monocyte
population shows
normal antigen
expression
other than
decreased CD13
expression and a
subset show
slightly
decreased CD11b,
CD36 and CD14
expression a sign
of immaturity but
is only 1.5% of
the total. The
myeloid
population shows
normal
antigen
expression and
maturation
patterns.

Interpretation
See above.

Clinical History
PERTINENT
CLINICAL
INFORMATION: new
pancytopenia and
splenomegaly,
f/o/w negative for
leukemia
Priority:-
>ROUTINE
Estimated number
of specimens:
(Label printing
use only)->10

Specimen(s)
Received
A:BONE MARROW
ASPIRATE, FLOW -
SITE NOT
SPECIFIED

This
Immunophenotyping
Panel was
developed and its
performance
characteristics
were determined
and deemed
acceptable by
Kaiser
Permanente
Regional
Laboratory.

These tests have
not been cleared
or approved by
the U.S. Food and
Drug
Administration.

Patient Name:
KELLY, JOHN M
Med. Rec #:
06150947
DOB/Age:
2/6/1976 (Age:
45) Sex: M
Facility: San
Francisco Med Ctr
Location:
INPATIENT
NURSING

Regional Lab -
Flow Cytometry
1725 Eastshore
Highway
Berkeley, CA
94710
Julie D. Kingery,
M.D. Laboratory
Director

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
BONE MARROW, FLOW CYTOMETRY (BONE MARROW, FLOW)			11/22/2021 8:15 AM PST	11/22/2021 4:59 PM PST

Authorizing Provider	Result Type
DEEPIKA KUMAR MD	PATHOLOGY/CYTOLGY

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL	1725 Eastshore Highway	Berkeley, CA 94710	

CBC (COMPLETE BLOOD COUNT) WITH DIFFERENTIAL (CBC W AUTOMATED DIFFERENTIAL) - Final result (11/22/2021 6:54 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Red blood cells count	2.82	4.10 - 5.70 M/uL			KFH SAN FRANCISCO LABORATORY	
Hgb	8.2	13.0 - 17.0 g/dL			KFH SAN FRANCISCO LABORATORY	
Hematocrit	24.5	39.0 - 51.0 %			KFH SAN FRANCISCO LABORATORY	
MCV	87	80 - 100 fL			KFH SAN FRANCISCO LABORATORY	
RDW, RBC	17.0	12.0 - 16.5 %			KFH SAN FRANCISCO LABORATORY	
WBC COUNT	2.3	3.7 - 11.1 K/uL			KFH SAN FRANCISCO LABORATORY	
Red blood cells count	2.82	4.10 - 5.70 M/uL			KFH SAN FRANCISCO LABORATORY	
Hgb	8.2	13.0 - 17.0 g/dL			KFH SAN FRANCISCO LABORATORY	
Hematocrit	24.5	39.0 - 51.0 %			KFH SAN FRANCISCO LABORATORY	
MCV	87	80 - 100 fL			KFH SAN FRANCISCO LABORATORY	
RDW, RBC	17.0	12.0 - 16.5 %			KFH SAN FRANCISCO LABORATORY	
Platelets count	55	140 - 400 K/uL			KFH SAN FRANCISCO LABORATORY	
RBC's, nucleated	0	<=0 /100WC			KFH SAN FRANCISCO LABORATORY	
Differential panel	MAN DIFF				KFH SAN FRANCISCO LABORATORY	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			11/22/2021 6:54 AM PST	11/22/2021 7:13 AM PST		

Narrative

KFH SAN FRANCISCO LABORATORY - 11/22/2021 8:45 AM PST
Please draw in pedi tube

Authorizing Provider	Result Type
AMANDA DONALD MD	LABORATORY

Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

CHEMISTRY PANEL (CHEM 7 (NA, K, CL, CO2, BUN, GLUC, CR)) - Final result (11/22/2021 6:54 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	137	135 - 145 mEq/L			KFH SAN FRANCISCO LABORATORY	
Potassium	4.0	3.5 - 5.3 mEq/L			KFH SAN FRANCISCO LABORATORY	
Chloride	103	100 - 111 mEq/L			KFH SAN FRANCISCO LABORATORY	
CO2	28	24 - 33 mEq/L			KFH SAN FRANCISCO LABORATORY	
Anion gap, ser/plas	6	5 - 16 mEq/L			KFH SAN FRANCISCO LABORATORY	
BUN	14	7 - 27 mg/dL			KFH SAN FRANCISCO LABORATORY	
GLUCOSE, RANDOM	98	60 - 159 mg/dL			KFH SAN FRANCISCO LABORATORY	

Comment:

Borderline range of 160 - 199 mg/dL suggests follow-up. Results greater than or equal to 200 mg/dL is suggestive of diabetes in the setting of classical symptoms.

Creatinine	1.19	<=1.34 mg/dL	KFH SAN FRANCISCO LABORATORY
Comment, glomerular filtration rate	SEE NOTE		KFH SAN FRANCISCO LABORATORY

Comment:

Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.

Per K/DOQI Clinical Practice Guidelines on Chronic Kidney Disease:

GFR 30 - 59 = Stage 3 CKD

GFR 15 - 29 = Stage 4 CKD

GFR < 15 = Stage 5 CKD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/22/2021 6:54 AM PST	11/22/2021 7:13 AM PST

Narrative

KFH SAN FRANCISCO LABORATORY - 11/22/2021 7:53 AM PST
Please draw in pedi tube

Authorizing Provider	Result Type		
AMANDA DONALD MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

WHITE BLOOD CELL DIFFERENTIAL (WBC DIFF MANUAL, REFLEX) - Final result (11/22/2021 6:54 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %. Manual count	28	42 - 76 %			KFH SAN FRANCISCO LABORATORY	
Lymphocytes % manual count	58	15 - 47 %			KFH SAN FRANCISCO LABORATORY	
Band's %, manual count	1	0 - 5 %			KFH SAN FRANCISCO LABORATORY	
Monos %, man cnt	10	1 - 11 %			KFH SAN FRANCISCO LABORATORY	
Eosinophils % manual count	1	0 - 7 %			KFH SAN FRANCISCO LABORATORY	
Basophils %. manual count	2	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Platelets,bld,ql, man ct	DECREASE				KFH SAN FRANCISCO LABORATORY	
Hypochromia	1+				KFH SAN FRANCISCO LABORATORY	
Polychromasia	1+				KFH SAN FRANCISCO LABORATORY	
Ovalocytes,bld,ql, light microscopy	1+				KFH SAN FRANCISCO LABORATORY	
Anisocytosis	1+				KFH SAN FRANCISCO LABORATORY	
Poikilocytosis	1+				KFH SAN FRANCISCO LABORATORY	
WBC other/100 WBC, blood	1	<=0 %			KFH SAN FRANCISCO LABORATORY	

Comment: other cell = large mononuclear cell with nucleoli

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/22/2021 6:54 AM PST	11/22/2021 7:13 AM PST

Authorizing Provider	Result Type		
AMANDA DONALD MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number

CBC (COMPLETE BLOOD COUNT) WITH DIFFERENTIAL (CBC W AUTOMATED DIFFERENTIAL) - Edited Result - FINAL
(11/21/2021 6:40 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	2.5	3.7 - 11.1 K/uL			KFH SAN FRANCISCO LABORATORY	
Red blood cells count	2.81	4.10 - 5.70 M/uL			KFH SAN FRANCISCO LABORATORY	
Hgb	8.1	13.0 - 17.0 g/dL			KFH SAN FRANCISCO LABORATORY	
Hematocrit	24.5	39.0 - 51.0 %			KFH SAN FRANCISCO LABORATORY	
MCV	87	80 - 100 fL			KFH SAN FRANCISCO LABORATORY	
RDW, RBC	16.9	12.0 - 16.5 %			KFH SAN FRANCISCO LABORATORY	
Platelets count	58	140 - 400 K/uL			KFH SAN FRANCISCO LABORATORY	
RBC's, nucleated	0	<=0 /100WC			KFH SAN FRANCISCO LABORATORY	
Differential panel	MAN DIFF				KFH SAN FRANCISCO LABORATORY	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time	
				11/21/2021 6:40 AM PST	11/21/2021 6:59 AM PST	

Narrative

KFH SAN FRANCISCO LABORATORY - 11/21/2021 8:04 AM PST

Please draw in pedi tube

Authorizing Provider	Result Type		
AMANDA DONALD MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

CHEMISTRY PANEL (CHEM 7 (NA, K, CL, CO2, BUN, GLUC, CR)) - Final result (11/21/2021 6:40 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	139	135 - 145 mEq/L			KFH SAN FRANCISCO LABORATORY	
Potassium	4.0	3.5 - 5.3 mEq/L			KFH SAN FRANCISCO LABORATORY	

Chloride	105	100 - 111 mEq/L	KFH SAN FRANCISCO LABORATORY
CO2	27	24 - 33 mEq/L	KFH SAN FRANCISCO LABORATORY
Anion gap, ser/plas	7	5 - 16 mEq/L	KFH SAN FRANCISCO LABORATORY
BUN	13	7 - 27 mg/dL	KFH SAN FRANCISCO LABORATORY
GLUCOSE, RANDOM	96	60 - 159 mg/dL	KFH SAN FRANCISCO LABORATORY

Comment:

Borderline range of 160 - 199 mg/dL suggests follow-up. Results greater than or equal to 200 mg/dL is suggestive of diabetes in the setting of classical symptoms.

Creatinine	1.12	<=1.34 mg/dL	KFH SAN FRANCISCO LABORATORY
Comment, glomerular filtration rate	SEE NOTE		KFH SAN FRANCISCO LABORATORY

Comment:

Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.

Per K/DOQI Clinical Practice Guidelines on Chronic Kidney Disease:

GFR 30 - 59 = Stage 3 CKD

GFR 15 - 29 = Stage 4 CKD

GFR < 15 = Stage 5 CKD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/21/2021 6:40 AM PST	11/21/2021 6:59 AM PST

Narrative

KFH SAN FRANCISCO LABORATORY - 11/21/2021 7:42 AM PST
Please draw in pedi tube

Authorizing Provider	Result Type		
AMANDA DONALD MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

WHITE BLOOD CELL DIFFERENTIAL (WBC DIFF MANUAL, REFLEX) - Final result (11/21/2021 6:40 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %. Manual count	19	42 - 76 %			KFH SAN FRANCISCO LABORATORY	

Lymphocytes % manual count	57	15 - 47 %	KFH SAN FRANCISCO LABORATORY
Band's %, manual count	2	0 - 5 %	KFH SAN FRANCISCO LABORATORY
Monos %, man cnt	11	1 - 11 %	KFH SAN FRANCISCO LABORATORY
Eosinophils % manual count	5	0 - 7 %	KFH SAN FRANCISCO LABORATORY
Basophils %. manual count	3	0 - 1 %	KFH SAN FRANCISCO LABORATORY
Myelocytes %, manual count	2	0 - 0 %	KFH SAN FRANCISCO LABORATORY
Platelets,bld,ql, man ct	DECREASE		KFH SAN FRANCISCO LABORATORY
Hypochromia	1+		KFH SAN FRANCISCO LABORATORY
Polychromasia	1+		KFH SAN FRANCISCO LABORATORY
Ovalocytes,bld,ql, light microscopy	1+		KFH SAN FRANCISCO LABORATORY
Anisocytosis	1+		KFH SAN FRANCISCO LABORATORY
Poikilocytosis	1+		KFH SAN FRANCISCO LABORATORY
Rouleaux,bld,ql, light microscopy	1+		KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/21/2021 6:40 AM PST	11/21/2021 6:59 AM PST
Authorizing Provider	Result Type			
AMANDA DONALD MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

KP MOLECULAR GENETICS REPORT, CANCER (KP MOLECULAR GENETICS REPORT, CANCER.) - Final result (11/20/2021 11:59 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
KP Molecular Genetics Report, Cancer	MOLECULAR GENETIC REPORT				TPMG REGIONAL GENETICS LABORATORY	
Laboratory#:						

D2118533BR
Req Provider:
Douglas
McLachlan,
M.D.
Req Facility:
San Francisco
Date Obtained:
11/19/21 Date
of Report:
11/29/21 Date
of Request:
11/20/21
Specimen: Blood
(RNA)

Indication
Diagnostic
testing for
CML.

REPORT

Test
BCR/ABL GENE
TRANSLOCATION,
PCR,
QUANTITATIVE

Result
The analysis
did not detect
any of the
tested BCR-ABL
fusion
transcripts.

Reference Range
LOD (p210) =
0.002 IS%
LOD (p190) =
0.0025%

INTERPRETATION
BCR-ABL1 fusion
transcript was
not detected.

Method
This assay
quantifies BCR-
ABL1
transcripts for
diagnosis
and monitoring
therapeutic
responses. BCR-
ABL1
translocations
are observed in
nearly all
cases of

chronic
myelogenous
leukemia (CML)
and in a subset
of acute
lymphoblastic
leukemia (ALL).
Test results
for the p210
transcripts are
reported using
the
International
Scale
(%IS) to enable
the inter-
laboratory
comparison of
the
patient's
testing and the
assessment of
molecular
response
(MR).

Test results
for the p190
transcript are
reported as %
ratio of BCR-
ABL1 to ABL1
transcripts.

Total RNA is
isolated and
reverse
transcribed to
cDNA.
BCR-ABL1
transcripts are
analyzed by
multiplex real-
time
PCR
amplification
method. The
primers are
designed to
detect the
major (p210)
breakpoints
(e13a2/e14a2)
and minor
(p190)
breakpoint
(e1a2). Each
analysis
includes
quantification
of BCR-ABL1
fusion to ABL1

ratio using a standard curve generated from control calibrators.

The ratio is further converted to value on the International Scale (IS) or % ratio ($p190/e1a2$) using a validated reference.

Disclaimer
The limit of detection (LOD) for BCR-ABL1 major transcripts ($e13a2/e14a2$) is 0.002%IS. The limit of quantification (LOQ) for BCR-ABL1 major transcripts is 0.002%IS. Test result of IS $<0.002\%$ will be reported as negative while IS $>50.00\%$ is indicative of a positive result but no specific %IS reported as it is out of the linear range (%IS = 0.002% - 50.00%).

The limit of detection (LOD) for BCR-ABL1 minor transcripts ($e1a2$) is 0.0025%. The limit of quantification (LOQ) for BCR-ABL1 minor transcripts is 0.0036% and linear range of

quantification
is %ratio =
0.0036% - 25%.

This test only
detects BCR-
ABL1 (p210 and
p190)
transcripts.

Test results
must be
interpreted in
the context of
clinical
and
pathological
studies.

The assay
utilized
Asuragen
Quantidex qPCR
BCR-ABL1 kits.
The assay
performance and
characteristics
were determined
by the TPMG
Regional
Genetics
Laboratory as
required by the
CLIA'88
regulations.

This test has
not been
cleared or
approved for
specific uses
by the U.S.
Food and Drug
Administration
although such
approval is not
required.

References:
1. Hughes TP et
al., NEJM
349:1423-32
(2003)
2. Cross NCP et
al., Leukemia
29:999-1003
(2015)

Elaine Louie,
Ph.D., ABMGG
[Electronic
Signature 1]

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 11:59 PM PST	
Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL GENETICS LABORATORY	5755 Cottle Rd, Bldg #26	San Jose, CA 95123		

D-DIMER (D-DIMER, QUANTITATIVE) - Final result (11/20/2021 2:30 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
D-DIMER	0.71	<=0.49 ug/mL FEU			KFH SAN FRANCISCO LABORATORY	

Comment:

Pulmonary Embolism (PE):

TPMG Chiefs of Emergency Medicine have endorsed the recommendations from the American College of Physicians and the American College of Cardiology: when D-dimer testing is applied in the evaluation of pulmonary embolism in patients without a high pre-test probability and in whom acute PE cannot be excluded using the PE Rule-Out Criteria (PERC), then age-adjusted D-dimer thresholds (age x 0.01 ug/mL FEU) should be used in patients over 50 years old instead of the 0.50 ug/mL FEU threshold to determine the medical necessity of imaging.

Deep Vein Thrombosis (DVT):

D-dimer <0.50 ug/mL FEU in a patient with low pre-test probability makes a diagnosis of DVT very unlikely. However, a D-dimer >=0.50 ug/mL FEU is nonspecific and may require additional diagnostic testing.

Disseminated Intravascular Coagulation (DIC):

Use reference interval of <0.50 ug/mL FEU.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 2:30 PM PST	11/20/2021 2:37 PM PST

Authorizing Provider	Result Type
AMANDA DONALD MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

FIBRINOGEN ACTIVITY - Final result (11/20/2021 2:30 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Fibrinogen	191	209 - 504 mg/dL			KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 2:30 PM PST	11/20/2021 2:37 PM PST
Authorizing Provider	Result Type			
AMANDA DONALD MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

CT CHEST ABD AND PELVIS. (11/20/2021 1:32 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RADIOLOGY EXAM DESCRIPTION	CT CHEST ABDOMEN PELVIS WITH CONTRAST				NCAL PWS INTERFACE	
Anatomical Region	Laterality	Modality				
		Computed Tomography				
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time	
				11/20/2021 2:06 PM PST		

Impressions

NCAL PWS INTERFACE - 11/20/2021 2:09 PM PST
Severe splenomegaly.

Narrative

NCAL PWS INTERFACE - 11/20/2021 2:09 PM PST
CT CHEST ABDOMEN PELVIS WITH CONTRAST

** HISTORY **:

45 years old, evaluate splenomegaly, abscesses

** TECHNIQUE **:

CT images of the chest, abdomen and pelvis acquired with 100 mL Omnipaque 300 intravenous contrast.

CTDI: 4.85 mGy

DLP: 387.0 mGy-cm

COMPARISON: Radiographs 11/19/2021, 1/23/2014, 2/8/2013

** FINDINGS **:

CHEST

HEART AND GREAT VESSELS: Heart size normal.

LYMPH NODES: No suspicious lymph nodes.

OTHER MEDIASTINUM: No significant abnormality.

LUNGS: Normal.

PLEURAL SPACE: Normal.

SOFT TISSUES: No significant abnormality.

BONES: No suspicious lytic or blastic lesions. Mild-to-moderate T9 compression fracture.

ABDOMEN/PELVIS

LIVER: Normal.

GALLBLADDER/BILE DUCTS: No calcified gallstones. No significant biliary dilation.

SPLEEN: Severe splenomegaly.

PANCREAS: Normal.

ADRENALS: Normal.

KIDNEYS: Normal.
GI TRACT: No significant abnormality.
MESENTERY/LYMPH NODES: No suspicious lymph nodes.
PERITONEUM: No significant free fluid. No free air.
AORTA/VESSELS: Normal abdominal aortic diameter (<3cm). Aortic atherosclerosis.
BLADDER: No significant abnormality.
PELVIC STRUCTURES: No significant abnormality.
SOFT TISSUES: No significant abnormality.
BONES: No suspicious lytic or blastic lesions.

Procedure Note

JUN WU MD - 11/20/2021

Formatting of this note might be different from the original.

CT CHEST ABDOMEN PELVIS WITH CONTRAST

**** HISTORY **:**

45 years old, evaluate splenomegaly, abscesses

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COMPARISON: Radiographs 11/19/2021, 1/23/2014, 2/8/2013

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PLEURAL SPACE: Normal.

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ABDOMEN/PELVIS

LIVER: Normal.

GALLBLADDER/BILE DUCTS: No calcified gallstones. No significant biliary dilation.

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PANCREAS: Normal.

ADRENALS: Normal.

KIDNEYS: Normal.

GI TRACT: No significant abnormality.

MESENTERY/LYMPH NODES: No suspicious lymph nodes.

PERITONEUM: No significant free fluid. No free air.

AORTA/VESSELS: Normal abdominal aortic diameter (<3cm). Aortic atherosclerosis.

BLADDER: No significant abnormality.

PELVIC STRUCTURES: No significant abnormality.

SOFT TISSUES: No significant abnormality.

BONES: No suspicious lytic or blastic lesions.

**** IMPRESSION **:**

Severe splenomegaly.

Performing Organization	Address	City/State/ZIP Code	Phone Number
NCAL PWS INTERFACE			

ALANINE AMINOTRANSFERASE (ALT) (ALT) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
ALT	30	0 - 47 U/L			KFH SAN FRANCISCO LABORATORY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time
					11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider Result Type

MIMI JIA YAO MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

KFH SAN FRANCISCO LABORATORY 2425 Geary Blvd. San Francisco, CA 94115

ASPARTATE AMINOTRANSFERASE (AST) (AST) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
AST	45	10 - 40 U/L			KFH SAN FRANCISCO LABORATORY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time
					11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider Result Type

MIMI JIA YAO MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

KFH SAN FRANCISCO LABORATORY 2425 Geary Blvd. San Francisco, CA 94115

PHOSPHATE - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Phosphorus	5.2	2.7 - 4.5 mg/dL			KFH SAN FRANCISCO LABORATORY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time
					11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider Result Type

MIMI JIA YAO MD BLOOD

Performing Organization Address City/State/ZIP Code Phone Number

KFH SAN FRANCISCO LABORATORY 2425 Geary Blvd. San Francisco, CA 94115

ALKALINE PHOSPHATASE - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
ALKALINE PHOSPHATASE	56	37 - 117 U/L			KFH SAN FRANCISCO LABORATORY	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST	
Authorizing Provider	Result Type					
MIMI JIA YAO MD	BLOOD					
Performing Organization	Address		City/State/ZIP Code	Phone Number		
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.		San Francisco, CA 94115			

LACTATE DEHYDROGENASE (LDH) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	477	<=270 U/L			KFH SAN FRANCISCO LABORATORY	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST	
Authorizing Provider	Result Type					
MIMI JIA YAO MD	BLOOD					
Performing Organization	Address		City/State/ZIP Code	Phone Number		
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.		San Francisco, CA 94115			

CALCIUM, SERUM - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Calcium	8.7	8.8 - 10.5 mg/dL			KFH SAN FRANCISCO LABORATORY	

Comment:

Gadolinium-containing or any ionic contrast media administered within the last 24 hrs may result in falsely low calcium levels.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider	Result Type		
MIMI JIA YAO MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.4	0.0 - 0.3 mg/dL			KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider	Result Type		
MIMI JIA YAO MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	2.8	0.2 - 1.2 mg/dL			KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST

Authorizing Provider	Result Type		
MIMI JIA YAO MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

CBC (COMPLETE BLOOD COUNT) WITH DIFFERENTIAL (CBC W AUTOMATED DIFFERENTIAL) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	2.8	3.7 - 11.1 K/uL			KFH SAN FRANCISCO LABORATORY	
Red blood cells count	2.74	4.10 - 5.70 M/uL			KFH SAN FRANCISCO LABORATORY	

Hgb	8.0	13.0 - 17.0 g/dL	KFH SAN FRANCISCO LABORATORY
Hematocrit	24.4	39.0 - 51.0 %	KFH SAN FRANCISCO LABORATORY
MCV	89	80 - 100 fL	KFH SAN FRANCISCO LABORATORY
Comment: Delta flag reviewed and verified.			
RDW, RBC	17.0	12.0 - 16.5 %	KFH SAN FRANCISCO LABORATORY
Platelets count	59	140 - 400 K/uL	KFH SAN FRANCISCO LABORATORY
RBC's, nucleated	1	<=0 /100WC	KFH SAN FRANCISCO LABORATORY
Differential panel	MAN DIFF		KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:45 AM PST

Authorizing Provider	Result Type
MIMI JIA YAO MD	LABORATORY
Performing Organization	Address
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.

CHEMISTRY PANEL (CHEM 7 (NA, K, CL, CO2, BUN, GLUC, CR)) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	137	135 - 145 mEq/L			KFH SAN FRANCISCO LABORATORY	
Potassium	4.3	3.5 - 5.3 mEq/L			KFH SAN FRANCISCO LABORATORY	
Chloride	104	100 - 111 mEq/L			KFH SAN FRANCISCO LABORATORY	
CO2	27	24 - 33 mEq/L			KFH SAN FRANCISCO LABORATORY	
Anion gap, ser/plas	6	5 - 16 mEq/L			KFH SAN FRANCISCO LABORATORY	
BUN	14	7 - 27 mg/dL			KFH SAN FRANCISCO LABORATORY	
GLUCOSE, RANDOM	91	60 - 159 mg/dL			KFH SAN FRANCISCO LABORATORY	

Comment:

Borderline range of 160 - 199 mg/dL suggests follow-up. Results greater than

or equal to 200 mg/dL is suggestive of diabetes in the setting of classical symptoms.

Creatinine	1.12	<=1.34 mg/dL	KFH SAN FRANCISCO LABORATORY
Comment, glomerular filtration rate	SEE NOTE		KFH SAN FRANCISCO LABORATORY

Comment:

Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.

Per K/DOQI Clinical Practice Guidelines on Chronic Kidney Disease:

GFR 30 - 59 = Stage 3 CKD

GFR 15 - 29 = Stage 4 CKD

GFR < 15 = Stage 5 CKD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:43 AM PST
Authorizing Provider	Result Type			
MIMI JIA YAO MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

WHITE BLOOD CELL DIFFERENTIAL (WBC DIFF MANUAL, REFLEX) - Final result (11/20/2021 6:28 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %. Manual count	28	42 - 76 %			KFH SAN FRANCISCO LABORATORY	
Lymphocytes % manual count	59	15 - 47 %			KFH SAN FRANCISCO LABORATORY	
Monos %, man cnt	9	1 - 11 %			KFH SAN FRANCISCO LABORATORY	
Eosinophils % manual count	2	0 - 7 %			KFH SAN FRANCISCO LABORATORY	
Basophils %. manual count	1	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Metamyelocytes %	2	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Platelets,bld,ql, man ct	DECREASE				KFH SAN FRANCISCO LABORATORY	
Microcytes	1+				KFH SAN FRANCISCO LABORATORY	

Polychromasia	1+	KFH SAN FRANCISCO LABORATORY
Ovalocytes,bld,ql, light microscopy	1+	KFH SAN FRANCISCO LABORATORY
Anisocytosis	1+	KFH SAN FRANCISCO LABORATORY
Poikilocytosis	1+	KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 6:28 AM PST	11/20/2021 6:45 AM PST
Authorizing Provider	Result Type			
MIMI JIA YAO MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

URINALYSIS (URINALYSIS, MICROSCOPY) - Final result (11/20/2021 2:55 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
MICROSCOPIC EXAM, URINE	COMPLETE				KFH SAN FRANCISCO LABORATORY	
WBC, urine	None Seen	0 - 5 /HPF			KFH SAN FRANCISCO LABORATORY	
RBC, urine	<1	0 - 3 /HPF			KFH SAN FRANCISCO LABORATORY	
Squamous cells count, ur sed, Qn	None Seen	0 - 2 /LPF			KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 2:55 AM PST	11/20/2021 4:31 AM PST
Authorizing Provider	Result Type			
MIMI JIA YAO MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

URINALYSIS (URINALYSIS, AUTOMATED) - Final result (11/20/2021 2:55 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, UA	NEGATIVE	NEGATIVE			KFH SAN FRANCISCO LABORATORY	
Bilirubin, UA	NEGATIVE	NEGATIVE mg/dL			KFH SAN FRANCISCO LABORATORY	

Ketones, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
Specific gravity, UA	1.010	1.001 - 1.035	KFH SAN FRANCISCO LABORATORY
Hemoglobin,ur,ql	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
pH, UA	6.0	4.5 - 8.0	KFH SAN FRANCISCO LABORATORY
Protein, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
Urobilinogen, UA	4.0	0.0 - 2.0 mg/dL	KFH SAN FRANCISCO LABORATORY
Nitrite, UA	NEGATIVE	NEGATIVE mg/dL	KFH SAN FRANCISCO LABORATORY
LEUKOCYTE ESTERASE, UA	NEGATIVE	NEGATIVE Leu/ul	KFH SAN FRANCISCO LABORATORY
Appearance, urine	CLEAR	CLEAR	KFH SAN FRANCISCO LABORATORY
Color, urine	YELLOW	YELLOW	KFH SAN FRANCISCO LABORATORY
Specimen source	CLEAN		KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/20/2021 2:55 AM PST	11/20/2021 4:31 AM PST

Authorizing Provider	Result Type
MIMI JIA YAO MD	LABORATORY
Performing Organization	Address
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.
	City/State/ZIP Code
	San Francisco, CA 94115
	Phone Number

CYTOGENETIC ANALYSIS REPORT, CANCER (CYTOGENETIC ANALYSIS REPORT, CANCER.) - Final result (11/19/2021 11:59 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Chromosome analysis, cancer, cytogenetics	CANCER CHROMOSOME ANALYSIS				TPMG REGIONAL GENETICS LABORATORY	
	Laboratory #: 021-12399					
	Tissue					
	Type: LEUKEMIC BLOOD					

Date Obtained:
11/19/21
Date of Report: 12/01/21
Date Received:
11/20/21
Req Prov:
Douglas
McLachlan
Req Fac:
San Francisco
Indication:
OTHER

Status:
Affected
Other Reasons:
PANCYTOPENIA

RESULT

Method:
Number of cells/colonies:
0
Band Level:

Karyotype:
Analysis not performed
See report 021-12466 for result

INTERPRETATION

Cytogenetic study was not performed on this specimen.

See report 021-12466 for cytogenetic results on the bone marrow sample from 11/22/21.

[Electronic Signature 1]
Xu Li, Ph.D.,
ABMGG

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL GENETICS LABORATORY	5755 Cottle Rd, Bldg #26	San Jose, CA 95123	

US ABD LTD. (11/19/2021 8:49 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RADIOLOGY EXAM DESCRIPTION	ULTRASOUND LIMITED ABDOMEN				NCAL PWS INTERFACE	
Anatomical Region	Laterality				Modality	
					Ultrasound	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time	Received Time	
				11/19/2021 9:03 PM PST		

Impressions

NCAL PWS INTERFACE - 11/19/2021 9:04 PM PST
No ascites. Splenomegaly.

Narrative

NCAL PWS INTERFACE - 11/19/2021 9:04 PM PST
ULTRASOUND LIMITED ABDOMEN

** HISTORY **:

45 years old, RULE OUT ASCITES splenomegaly

** TECHNIQUE **:

Limited ultrasound images of the abdomen were acquired. Power Doppler employed as indicated.

COMPARISON: None available.

** FINDINGS **:

ASCITES: None.

OTHER: Splenomegaly measuring up to 21 cm.

Procedure Note

YEE-LI SUN MD - 11/19/2021

Formatting of this note might be different from the original.

ULTRASOUND LIMITED ABDOMEN

** HISTORY **:

45 years old, RULE OUT ASCITES splenomegaly

** TECHNIQUE **:

Limited ultrasound images of the abdomen were acquired. Power Doppler employed as indicated.

COMPARISON: None available.

** FINDINGS **:

ASCITES: None.

OTHER: Splenomegaly measuring up to 21 cm.

**** IMPRESSION **:**

No ascites. Splenomegaly.

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	ULTRASOUND		
Performing Organization	Address	City/State/ZIP Code	Phone Number
NCAL PWS INTERFACE			

ANA AND NUCLEAR ANTIBODIES PANEL - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Nuclear AB,ser,ql	NEGATIVE	NEGATIVE			TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

The ANA assay is a multiplexed bead-based immunoassay that screens for 11 specific antinuclear antibodies - dsDNA, SSA, SSB, Sm, RNP, SmRNP, Scl-70, Jo-1, Centromere B, Chromatin, and Ribosomal P.

DNA DS AB	<1	<=9 IU/mL		TPMG REGIONAL LABORATORY, BERKELEY
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Comment:

Anti-dsDNA, Quantitative Reference Range:

Normal: less than 5 IU/mL

Indeterminate: 5-9 IU/mL

Positive: equal to or greater than 10 IU/mL

SS-A AB	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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SS-B AB	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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RNP AB	0.6	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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Smith antibody	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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CHROMATIN (NUCLEOSOMAL) AB	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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RIBOSOMAL P ANTIBODY	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
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Centromere AB,ser,qn	<0.2	<=0.9	TPMG
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Sm AB+rnp AB, serum	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
Scl-70 antibody	0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY
Jo-1 AB	<0.2	<=0.9 AbIndx	TPMG REGIONAL LABORATORY, BERKELEY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST
Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

ALCOHOL (ETOH) LEVEL, BLD (ALCOHOL (ETOH) LEVEL, BLOOD) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Ethanol,bld,qn	<10	mg/dL			KFH SAN FRANCISCO LABORATORY	

Comment:

Reference Range: ...Intoxication ...Coma ...Lethal...
>50 mg/dL >300 mg/dL >400 mg/dL

Onset of symptoms of Ethanol toxicity vary widely with the patient's mass and history of abuse. Testing methods are suitable for medical purposes only. Results may not be used for legal purposes.

Ethanol %, blood	<0.01	%	KFH SAN FRANCISCO LABORATORY
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Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 8:57 PM PST

Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	DRUG LEVEL			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

HEPATITIS C ANTIBODY (HEPATITIS C VIRUS ANTIBODY (HCVAB), PLASMA) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hep C AB	NEGATIVE				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last biotin administration. (Falsey low results are possible.)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 1:58 AM PST
Authorizing Provider		Result Type		
DOUGLAS IAN MCLACHLAN MD		MICRO - KPHC ONLY		
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

SERUM FREE KAPPA AND LAMBDA LIGHT IMMUNOGLOBULIN CHAINS (FREE KAPPA AND LAMBDA LIGHT CHAINS W RATIO, SERUM) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Kappa light chain, free	40.36	3.30 - 19.40 mg/L			TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

Undetected antigen excess is a rare event but cannot be excluded. Results should always be interpreted in conjunction with other laboratory tests and clinical evidence; any anomalies should be discussed with the testing laboratory. (E-mail- RegLab PEP IFE-KPNC-BRK)

This assay has not been established for use with the pediatric population.

Lambda light chain, free, ser/plas	50.85	5.71 - 26.30 mg/L		TPMG REGIONAL LABORATORY, BERKELEY	
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Comment:

Undetected antigen excess is a rare event but cannot be excluded. Results should always be interpreted in conjunction with other laboratory tests and clinical evidence; any anomalies should be discussed with the testing laboratory. (E-mail- RegLab PEP IFE-KPNC-BRK)

This assay has not been established for use with the pediatric population.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST

Narrative

TPMG REGIONAL LABORATORY, BERKELEY - 11/20/2021 8:29 PM PST
 In chronic kidney disease (CKD) populations without multiple myeloma (MM), an increase in the serum free light chain ratio (0.37 to 3.10) has been observed. Clin J Am Soc Nephrol 3: 1684-1690, 2008

Authorizing Provider DOUGLAS IAN MCLACHLAN MD	Result Type NON BLOOD		
Performing Organization TPMG REGIONAL LABORATORY, BERKELEY	Address 1725 Eastshore Highway	City/State/ZIP Code Berkeley, CA 94710	Phone Number

HIV SCREEN (HIV SCREEN (HIV AG, HIV 1, 2 AB), QUALITATIVE) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
HIV 1+2 AB+HIV1P24 AG, CLA	NON REAC				TPMG REGIONAL LABORATORY, BERKELEY	

Comment: Reference Range: Non-Reactive

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST

Authorizing Provider DOUGLAS IAN MCLACHLAN MD	Result Type MICRO - KPHC ONLY		
Performing Organization TPMG REGIONAL LABORATORY, BERKELEY	Address 1725 Eastshore Highway	City/State/ZIP Code Berkeley, CA 94710	Phone Number

BLOOD, PERIPHERAL, IMMUNOPHENOTYPING - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Comment 02	SEE REPT				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

See CoPath Report.

"This Immunophenotyping Panel was developed and its performance characteristics were determined and deemed acceptable by Kaiser Permanente Regional Laboratory. These tests have not been cleared or approved by the U.S. Food and Drug Administration."

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 5:30 AM PST

Authorizing Provider DOUGLAS IAN MCLACHLAN MD	Result Type BLOOD
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Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

HIV 1 AND 2 ANTIBODY (RAPID HIV TEST (HIV 1, 2 AB)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
HIV 1+2 AB	NON REAC	NON REAC			KFH SAN FRANCISCO LABORATORY	
RAPID HIV TEST INTERPRETATION	NON REAC				KFH SAN FRANCISCO LABORATORY	

Comment:

Preliminary Negative for HIV antibodies.

Additional sample will be sent to TPMG Regional Lab for HIV1/2 Ag/Ab immunoassay testing.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 8:57 PM PST

Authorizing Provider	Result Type
DOUGLAS IAN MCLACHLAN MD	MICRO - KPHC ONLY

Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

EPSTEIN BARR VIRUS ANTIBODY PANEL (EPSTEIN BARR VIRUS ANTIBODY PANEL (EBNA, VCA IgG, VCA IgM)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
EBV nuc IgG, Ser, QI, EIA	POSITIVE				KFH SAN FRANCISCO LABORATORY	
EBV VCA IgG, eia	POSITIVE				KFH SAN FRANCISCO LABORATORY	
EBV capsid IgM, EIA	NEGATIVE				KFH SAN FRANCISCO LABORATORY	
EBV PANEL INTERPRETATION	SEE NOTE				KFH SAN FRANCISCO LABORATORY	

Comment:

PAST INFECTION

Resolution of the illness may occur before the diagnostic antibody levels appear. In rare cases, people with active EBV infections may not have detectable EBV-specific antibodies. Since over 90% of adults have been infected with EBV, most adults will show antibodies to EBV from infection.

years earlier. High or elevated antibody levels may be present for years and are not diagnostic of recent infection. Approximately 5-10% of patients with EBV never develop antibodies to EBNA.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST
Authorizing Provider	Result Type			
MIMI JIA YAO MD	MICRO - KPHC ONLY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

BLOOD CULTURE (BLOOD CULTURE 2) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Blood culture result	Final Report No growth at 5 days.				TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)	Anatomical Location / Laterality					
	BLOOD / Unknown					
	Collection Time					
	11/19/2021 8:25 PM PST					
Authorizing Provider	Received Time					
DOUGLAS IAN MCLACHLAN MD	11/20/2021 12:37 AM PST					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710				

HEPATITIS B VIRUS CORE TOTAL ANTIBODY (HEPATITIS B VIRUS CORE ANTIBODY (HBCAB), TOTAL) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
HEP B VIRUS CORE AB	NEGATIVE				TPMG REGIONAL LABORATORY, BERKELEY	
Specimen (Source)	Anatomical Location / Laterality					
	Collection Method / Volume					
	Collection Time					
	11/19/2021 8:25 PM PST					
Authorizing Provider	Received Time					
DOUGLAS IAN MCLACHLAN MD	11/20/2021 2:01 AM PST					
Performing Organization	Address	City/State/ZIP Code	Phone Number			
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710				

PHOSPHATE - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Phosphorus	3.8	2.7 - 4.5 mg/dL			KFH SAN FRANCISCO LABORATORY			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time		
				11/19/2021 8:25 PM PST	11/19/2021 8:58 PM PST			
Authorizing Provider	Result Type							
DOUGLAS IAN MCLACHLAN MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code		Phone Number				
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115						

LACTIC ACID - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Lactate, ser/plas	1.1	0.5 - 1.9 mmol/L			KFH SAN FRANCISCO LABORATORY			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time		
				11/19/2021 8:25 PM PST	11/19/2021 8:57 PM PST			
Authorizing Provider	Result Type							
DOUGLAS IAN MCLACHLAN MD	BLOOD							
Performing Organization	Address	City/State/ZIP Code		Phone Number				
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115						

VITAMIN B12 (COBALAMIN) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Vitamin B12	561	>=200 pg/mL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration (falsely elevated results are possible). Performed on Roche Cobas e801; results from different methods should NOT be used interchangeably when serially monitoring patients.

Reference Ranges for Vitamin B12:

Normal: Greater than or equal to 200 pg/mL
 Borderline: 200-300 pg/mL

Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Authorizing Provider	Result Type		11/19/2021 8:25 PM PST	11/20/2021 2:00 AM PST
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

HEPATITIS B VIRUS SURFACE ANTIGEN (HEPATITIS B VIRUS SURFACE ANTIGEN (HBSAG)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hep B surface AG	NEGATIVE				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

used to determine acute, recent, or chronic hepatitis B infection status.

Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last biotin administration. (Falsely low results are possible.)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST

Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	MICRO - KPHC ONLY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

BLOOD CULTURE - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Blood culture result	Final Report No growth at 5 days.				TPMG REGIONAL LABORATORY, BERKELEY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
	BLOOD / Unknown		11/19/2021 8:25 PM PST	11/20/2021 12:37 AM PST

Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	MICROBIOLOGY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
TPMG REGIONAL	1725 Eastshore Highway	Berkeley, CA 94710		

HEPATITIS A VIRUS IMMUNOGLOBULIN M (HEPATITIS A VIRUS IGM (HAV IGM)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
HEP A VIRUS IGM	NEGATIVE				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

The hepatitis A IgM test is used to diagnose Hepatitis A in patients with evidence of acute hepatitis.

Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last biotin administration. (Falsey low results are possible.)

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	MICRO - KPHC ONLY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

HEPATITIS B VIRUS SURFACE ANTIBODY (HEPATITIS B VIRUS SURFACE ANTIBODY (HBSAB)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
HEP B VIRUS SURFACE ANTIBODY	NEGATIVE				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

When the Hepatitis B surface antibody result is POSITIVE, this indicates a Hepatitis B surface antibody level of >=10 mIU/mL.

Samples that are POSITIVE are considered protective for Hepatitis B immunity in accordance with CDC guidelines.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:01 AM PST

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	MICRO - KPHC ONLY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

CBC (COMPLETE BLOOD COUNT) WITH DIFFERENTIAL (CBC W AUTOMATED DIFFERENTIAL) - Edited Result - FINAL
 (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC COUNT	2.7	3.7 - 11.1 K/uL			KFH SAN FRANCISCO LABORATORY	
Red blood cells count	2.85	4.10 - 5.70 M/uL			KFH SAN FRANCISCO LABORATORY	
Hgb	8.3	13.0 - 17.0 g/dL			KFH SAN FRANCISCO LABORATORY	
Hematocrit	24.2	39.0 - 51.0 %			KFH SAN FRANCISCO LABORATORY	
MCV	85	80 - 100 fL			KFH SAN FRANCISCO LABORATORY	
RDW, RBC	16.5	12.0 - 16.5 %			KFH SAN FRANCISCO LABORATORY	
Platelets count	70	140 - 400 K/uL			KFH SAN FRANCISCO LABORATORY	
RBC's, nucleated	0	<=0 /100WC			KFH SAN FRANCISCO LABORATORY	
Differential panel	MAN DIFF				KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / L laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 8:57 PM PST

Authorizing Provider	Result Type
MIMI JIA YAO MD	LABORATORY
Performing Organization	Address
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.
	City/State/ZIP Code
	San Francisco, CA 94115
	Phone Number

VITAMIN B9 (FOLIC ACID) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Folate	6.3	>=4.0 ng/mL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Samples should not be taken from patients receiving therapy with high biotin doses (>5 mg/day) until at least 8 hours following the last biotin administration. (Falsely elevated results are possible.)

Specimen (Source)	Anatomical Location / L laterality	Collection Method / Volume	Collection Time	Received Time

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CHEMISTRY PANEL (CHEM 7 (NA, K, CL, CO2, BUN, GLUC, CR)) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	135	135 - 145 mEq/L			KFH SAN FRANCISCO LABORATORY	
Potassium	3.8	3.5 - 5.3 mEq/L			KFH SAN FRANCISCO LABORATORY	
Chloride	100	100 - 111 mEq/L			KFH SAN FRANCISCO LABORATORY	
CO2	26	24 - 33 mEq/L			KFH SAN FRANCISCO LABORATORY	
Anion gap, ser/plas	9	5 - 16 mEq/L			KFH SAN FRANCISCO LABORATORY	
BUN	16	7 - 27 mg/dL			KFH SAN FRANCISCO LABORATORY	
GLUCOSE, RANDOM	93	60 - 159 mg/dL			KFH SAN FRANCISCO LABORATORY	

Comment:

Borderline range of 160 - 199 mg/dL suggests follow-up. Results greater than or equal to 200 mg/dL is suggestive of diabetes in the setting of classical symptoms.

Creatinine	1.28	<=1.34 mg/dL	KFH SAN FRANCISCO LABORATORY
Glomerular filtration rate, nonAfrican American	>60	>=60 mL/min	KFH SAN FRANCISCO LABORATORY
GLOMERULAR FILTRATION RATE - AFRICAN AMERICAN	>60	>=60 mL/min	KFH SAN FRANCISCO LABORATORY
Comment, glomerular filtration rate	SEE NOTE		KFH SAN FRANCISCO LABORATORY

Comment:

Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.

GFR 15 - 29 = Stage 4 CKD

GFR < 15 = Stage 5 CKD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 8:58 PM PST
Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

CYTOMEGALOVIRUS IMMUNOGLOBULINS G AND M (CYTOMEGALOVIRUS (CMV) IgG, IgM) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Cytomegalovirus IgG,ser,qn	<0.20	U/mL			ARUP LABORATORIES	
Comment:						
INTERPRETIVE INFORMATION: Cytomegalovirus Antibody, IgG						
0.59 U/mL or less..... Not Detected 0.6 - 0.69 U/mL..... Indeterminate-Repeat testing in 10-14 days may be helpful. 0.70 U/mL or greater..... Detected						

In immunocompromised patients, CMV serology (IgG or IgM antibody titers) may not be reliable and may be misleading in the diagnosis of acute or reactivation CMV disease. The preferred method for diagnosis is culture of virus and/or demonstration of viral antigen in peripheral white cells (buffy coat), bronchoalveolar lavage (BAL) cells, or tissue biopsies.

This test should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cell, Tissues and Cellular and Tissue-Based Products (HCT/P).

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Cytomegalovirus IgM	<8.0	<=29.9 AU/mL	ARUP LABORATORIES
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Comment:

INTERPRETIVE INFORMATION: Cytomegalovirus Antibody, IgM

29.9 AU/mL or Less Not Detected
30.0-34.9 AU/mL..... Indeterminate-Repeat testing in 10-14 days may be helpful.
35.0 AU/mL or Greater Detected-IgM antibody to CMV detected which may indicate a current or recent infection. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.

CMV serology is not useful for the evaluation of active or reactivated infection in immunocompromised patients. Molecular diagnostic tests (i.e. PCR) are preferred in these cases.

This test should not be used for blood donor screening, associated re-entry protocols, or for screening Human Cell, Tissues and Cellular and Tissue-Based Products (HCT/P).

Performed By: ARUP Laboratories

500 Chipeta Way

Salt Lake City, UT 84108

Laboratory Director: Tracy I. George, MD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 9:05 PM PST
Authorizing Provider		Result Type		
MIMI JIA YAO MD		MICRO - KPHC ONLY		
Performing Organization		Address	City/State/ZIP Code	Phone Number
ARUP LABORATORIES		500 Chipeta Way	Salt Lake City, UT 84108	

WHITE BLOOD CELL DIFFERENTIAL (WBC DIFF MANUAL, REFLEX) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %. Manual count	32	42 - 76 %			KFH SAN FRANCISCO LABORATORY	
Lymphocytes % manual count	54	15 - 47 %			KFH SAN FRANCISCO LABORATORY	
Band's %, manual count	5	0 - 5 %			KFH SAN FRANCISCO LABORATORY	
Monos %, man cnt	5	1 - 11 %			KFH SAN FRANCISCO LABORATORY	
Eosinophils % manual count	2	0 - 7 %			KFH SAN FRANCISCO LABORATORY	
Basophils %. manual count	1	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Metamyelocytes %	1	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Myelocytes %, manual count	1	0 - 0 %			KFH SAN FRANCISCO LABORATORY	
Platelets,bld,ql, man ct	DECREASE				KFH SAN FRANCISCO LABORATORY	
Macrocytes	1+				KFH SAN FRANCISCO LABORATORY	
Microcytes	1+				KFH SAN FRANCISCO LABORATORY	
Polychromasia	1+				KFH SAN	

Anisocytosis	1+		KFH SAN FRANCISCO LABORATORY
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time
			11/19/2021 8:25 PM PST 11/19/2021 8:57 PM PST
Authorizing Provider	Result Type		
MIMI JIA YAO MD	LABORATORY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

SERUM IMMUNOFIXATION (IMMUNOFIXATION, SERUM) - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
IMMUNOFIXATION INTERPRETATION	NGAM				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

Note: Monoclonal antibody based drugs (e.g. Daratumumab) may appear as monoclonal proteins. Interpret the results with caution if the patient is receiving monoclonal antibody therapy. Any questions, email at 'RegLab PEP IFE'.

IMMUNOFIXATION INTERPRETATION, MANUAL	SEE INTERP		TPMG REGIONAL LABORATORY, BERKELEY

Comment:

No Abnormal Bands Seen for IgG,A,M.

Note: Monoclonal antibody based drugs (e.g. Daratumumab) may appear as monoclonal proteins. Interpret the results with caution if the patient is receiving monoclonal antibody therapy. Any questions, email at 'RegLab PEP IFE'.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/20/2021 2:04 AM PST
Authorizing Provider	Result Type			
DOUGLAS IAN MCLACHLAN MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

PARVOVIRUS B19 ANTIBODY - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
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Parvovirus B19 IgG, EIA 0.81

<=0.90
IVARUP
LABORATORIES

Comment:

INTERPRETIVE INFORMATION: Parvovirus B19 Antibody, IgG

0.90 IV or less	Negative - No significant level of detectable Parvovirus B19 IgG antibody.
0.91 - 1.09 IV	Equivocal - Repeat testing in 7-21 days may be helpful.
1.10 IV or greater	Positive - IgG antibody to Parvovirus B19 detected which may indicate a current or past infection.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Parvovirus B19 IgM, EIA 0.44

<=0.90
IVARUP
LABORATORIES

Comment:

INTERPRETIVE INFORMATION: Parvovirus B19 Antibody, IgM

0.90 IV or less	Negative - No significant level of detectable Parvovirus B19 IgM antibody.
0.91 - 1.09 IV	Equivocal - Repeat testing in 7-21 days may be helpful.
1.10 IV or greater	Positive - IgM antibody to Parvovirus B19 detected which may indicate a current or recent infection. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.

The best evidence for current infection is a significant change on two appropriately timed specimens, where both tests are done in the same laboratory at the same time.

Appearance of an IgM antibody response normally occurs 7 to 14 days after the onset of disease. Testing immediately post-exposure is of no value without a later convalescent specimen. A residual IgM response may be distinguished from early IgM response to infection by testing sera from patients three to four weeks later for changing levels of specific IgM antibodies.

Performed By: ARUP Laboratories

500 Chipeta Way

Salt Lake City, UT 84108

Laboratory Director: Tracy I. George, MD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 9:05 PM PST

Authorizing Provider Result Type

MIMI JIA YAO MD MICRO - KPHC ONLY

Performing Organization	Address	City/State/ZIP Code	Phone Number
ARUP LABORATORIES	500 Chipeta Way	Salt Lake City, UT 84108	

COPPER - Final result (11/19/2021 8:25 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Copper,qn	153.6	70.0 - 140.0 ug/dL			ARUP LABORATORIES	

Comment:

INTERPRETIVE INFORMATION: Copper, Serum or Plasma

Elevated results may be due to skin or collection-related contamination, including the use of a noncertified metal-free collection/transport tube. If contamination concerns exist due to elevated levels of serum/plasma copper, confirmation with a second specimen collected in a certified metal-free tube is recommended.

Serum copper may be elevated with infection, inflammation, stress, and copper supplementation. In females, elevated copper may also be caused by oral contraceptives and pregnancy (concentrations may be elevated up to 3 times normal during the third trimester).

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the US Food and Drug Administration. This test was performed in a CLIA certified laboratory and is intended for clinical purposes.

Performed By: ARUP Laboratories

500 Chipeta Way

Salt Lake City, UT 84108

Laboratory Director: Tracy I. George, MD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/19/2021 8:25 PM PST	11/19/2021 8:57 PM PST

Authorizing Provider	Result Type
DOUGLAS IAN MCLACHLAN MD	BLOOD
Performing Organization	Address
ARUP LABORATORIES	500 Chipeta Way
	City/State/ZIP Code
	Salt Lake City, UT 84108
	Phone Number

XR CHEST, PA AND LATERAL.. (XR CHEST, PA AND LATERAL...) - Final result (11/19/2021 8:07 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RADIOLOGY EXAM DESCRIPTION	3 XRAY CHEST				NCAL PWS INTERFACE	
Anatomical Region	Laterality				Modality	
Chest					Computed Radiography	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			11/19/2021 8:13 PM PST			

Impressions

NCAL PWS INTERFACE - 11/19/2021 8:14 PM PST
No acute disease.

Narrative

NCAL PWS INTERFACE - 11/19/2021 8:14 PM PST

XRAY CHEST**** HISTORY **:**

45 years old Male, CHEST PAIN

**** TECHNIQUE **:**

2 views of the chest acquired.

COMPARISON: Radiographs 1/23/2014, 2/8/2013

**** FINDINGS **:**

Normal heart size. No focal consolidation or pleural effusion.

Procedure Note

YEE-LI SUN MD - 11/19/2021

Formatting of this note might be different from the original.

XRAY CHEST**** HISTORY **:**

45 years old Male, CHEST PAIN

**** TECHNIQUE **:**

2 views of the chest acquired.

COMPARISON: Radiographs 1/23/2014, 2/8/2013

**** FINDINGS **:**

Normal heart size. No focal consolidation or pleural effusion.

**** IMPRESSION **:**

No acute disease.

Authorizing Provider

Result Type

DOUGLAS IAN

GENERAL RADIOLOGY

MCLACHLAN MD

Performing Organization

Address

City/State/ZIP Code

Phone Number

NCAL PWS INTERFACE

FLOW CYTOMETRY INTERPRETATION - Final result (11/19/2021 7:45 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
PATHOLOGY REPORT	Provider: OLIVIA GAGE GAMBOA M.D. Collected: 11/19/2021 Case #: FLO21-11163				TPMG REGIONAL LABORATORY, BERKELEY	

Flow Cytometry
ReportFLOW CYTOMETRY
DIAGNOSIS
PERIPHERAL BLOOD,
FLOW CYTOMETRY:
1.
MYELOID BLAST
POPULATION,

APPROXIMATELY
0.2% OF
ACQUIRED EVENTS,
see comment.

2.

ANALYSIS OF B
CELL CLONALITY
LIMITED BY
SUBOPTIMAL
LIGHT CHAIN
STAINING, see
comment.

JOHANNA E
RENEKE M.D.

** Report
Electronically
Signed by JER **
Comment
CD34-positive
myeloid blasts
account for
approximately
0.2% of
events which is
slightly
increased for
peripheral blood.
B cells
account for
approximately 27%
of lymphocytes
and 10% of total
events. Surface
light chain
staining is
suboptimal due to
increased
non-specific
binding.
Cytoplasmic light
chain staining
was
performed with
similar findings,
precluding
analysis of the B
cells
for clonality. B
cells are
negative for CD5
and CD10.
Monocytes
show decreased
expression of
CD13, a non-
specific finding.

Flow Cytometry
Findings
Study
limitations:

Antibodies tested: Surface CD3, cytoplasmic CD3, CD2, CD4, CD5, CD7, CD8, CD1a, CD19, CD20, CD10, CD34, CD117, CD13, CD33, CD15, CD38, CD36, CD64, CD56, CD123, CD14, CD61, CD235, CD16, CD71, CD11b, CD11c, HLA-DR, TdT, myeloperoxidase, cytoplasmic CD79a, cytoplasmic CD22, surface CD22, CD45, cytoplasmic kappa, cytoplasmic lambda, kappa, and lambda.

B cells, CD4+ T cells, CD8+ T cells, and NK cells account for approximately 27%, 28%, 27%, and 9% of lymphocytes, respectively.

Clinical History
PERTINENT
CLINICAL
INFORMATION: R/O
Acute leukemia

HISTORY OR OTHER
PERTINENT
CLINICAL
INFORMATION
(include differential diagnosis, laboratory information, previous pathology or flow results and special

request, as applicable):
45 year old man
with new
pancytopenia
concerning for
hematologic
malignancy.

Specimen(s)

Received

A:PERIPHERAL

BLOOD, FLOW -

SITE NOT

SPECIFIED

This

Immunophenotyping

Panel was

developed and its

performance

characteristics

were determined

and deemed

acceptable by

Kaiser

Permanente

Regional

Laboratory.

These tests have

not been cleared

or approved by

the U.S. Food and

Drug

Administration.

Patient Name:

KELLY, JOHN M

Med. Rec #:

06150947

DOB/Age:

2/6/1976 (Age:

45) Sex: M

Facility: San

Francisco Med Ctr

Location:

INPATIENT

NURSING

Regional Lab -

Flow Cytometry

1725 Eastshore

Highway

Berkeley, CA

94710

Julie D. Kingery,

M.D. Laboratory

Director

Specimen (Source)

Anatomical Location /
Laterality

Collection Method /
Volume

Collection Time

Received Time

Authorizing Provider	Result Type		
MIMI JIA YAO MD	PATHOLOGY/CYTOMY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

SARS-COV-2 (COVID-19), MOLECULAR ASSAY, NAA/PCR (SARS-COV-2, NAA (COVID-19), SURVEILLANCE, EXPEDITED, KP LAB) - Final result (11/19/2021 7:22 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
SARS-COV-2 (COVID-19) PANEL, NAA	COVID NOT DETECTED				KFH SAN FRANCISCO LABORATORY	
Comment: Nasopharynx/Oropharynx source.						
Specimen source	NP/OP				KFH SAN FRANCISCO LABORATORY	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume		Collection Time	Received Time	
				11/19/2021 7:22 PM PST	11/19/2021 8:40 PM PST	

Narrative

KFH SAN FRANCISCO LABORATORY - 11/19/2021 10:00 PM PST
 Does the patient have Symptoms? ->No. While test is pending, follow local infection guidance regarding isolation.
 Reason for Ordering ASYMPTOMATIC/surveillance testing:->Admission to multiple occupancy room

Authorizing Provider	Result Type		
DOUGLAS IAN MCLACHLAN MD	MICRO - KPHC ONLY		
Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

SERUM FREE KAPPA AND LAMBDA LIGHT IMMUNOGLOBULIN CHAINS (FREE KAPPA AND LAMBDA LIGHT CHAINS W RATIO, SERUM) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Kappa light chain, free	36.98	3.30 - 19.40 mg/L			TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

Undetected antigen excess is a rare event but cannot be excluded. Results should always be interpreted in conjunction with other laboratory tests and clinical evidence; any anomalies should be discussed with the testing laboratory. (E-mail- RegLab PEP IFE-KPNC-BRK)

This assay has not been established for use with the pediatric population.

ser/plas

26.30
mg/LREGIONAL
LABORATORY,
BERKELEY

Comment:

Undetected antigen excess is a rare event but cannot be excluded. Results should always be interpreted in conjunction with other laboratory tests and clinical evidence; any anomalies should be discussed with the testing laboratory. (E-mail- RegLab PEP IFE-KPNC-BRK)

This assay has not been established for use with the pediatric population.

Kappa/lambda, free ratio	0.77	0.26 - 1.65	TPMG REGIONAL LABORATORY, BERKELEY
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time Received Time

11/17/2021 1:08 PM PST 11/17/2021 8:43 PM PST

Narrative

TPMG REGIONAL LABORATORY, BERKELEY - 11/19/2021 7:05 PM PST
 In chronic kidney disease (CKD) populations without multiple myeloma (MM), an increase in the serum free light chain ratio (0.37 to 3.10) has been observed. Clin J Am Soc Nephrol 3: 1684-1690, 2008

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	NON BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

PROTEIN ELECTROPHORESIS INTERPRETATION, SERUM - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
SPEP INTERPRETATION	SEE INTERP				TPMG REGIONAL LABORATORY, BERKELEY	

Comment:

No Homogeneous Band or Spike Seen.

Note: Monoclonal antibody based drugs (e.g. Daratumumab) may appear as monoclonal proteins. Interpret the results with caution if the patient is receiving monoclonal antibody therapy. Any questions, email at 'RegLab PEP IFE'.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 9:10 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

RETICULOCYTE COUNT (RETICULOCYTE AUTOMATED COUNT_) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Reticulocytes/100 RBC's, automated	6.27	0.70 - 2.40 %			TPMG REGIONAL LABORATORY, MWS	
Reticulocyte count, absolute, auto	0.192	0.025 - 0.115 M/uL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 6:03 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL 914 Marina Way South Richmond, CA 94804

ALBUMIN - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Albumin	3.9	3.7 - 5.7 g/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL 914 Marina Way South Richmond, CA 94804

ALANINE AMINOTRANSFERASE (ALT) (ALT) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
ALT	38	0 - 47 U/L			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

ASPARTATE AMINOTRANSFERASE (AST) (AST) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
AST	59	10 - 40 U/L			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

SERUM PROTEIN ELECTROPHORESIS (PROTEIN ELECTROPHORESIS, SERUM) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Total Protein	6.9	6.0 - 7.7 g/dL			TPMG REGIONAL LABORATORY, MWS	
Albumin	4.0	3.8 - 5.0 g/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Alpha-1-globulin, electrophoresis	0.3	0.2 - 0.4 g/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Alpha-2-globulin, electrophoresis	0.4	0.5 - 1.0 g/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Beta globulin, electrophoresis	0.6	0.6 - 1.2 g/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Gamma globulin, electrophoresis	1.7	0.7 - 1.8 g/dL			TPMG REGIONAL LABORATORY, BERKELEY	
Total Protein	6.9	6.0 - 7.7 g/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 9:10 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	LABORATORY			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710		

ALKALINE PHOSPHATASE - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
ALKALINE PHOSPHATASE	63	37 - 117 U/L			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time		Received Time	
			11/17/2021 1:08 PM PST		11/17/2021 8:58 PM PST	

Authorizing Provider Result Type

RODERICK MACKENZIE
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL
LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

LACTATE DEHYDROGENASE (LDH) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
LDH	533	<=270 U/L			TPMG REGIONAL LABORATORY, MWS	

Comment:

This assay is performed at both Regional Laboratory and Facility Laboratories using DIFFERENT methods and DIFFERENT reference ranges. Values for this assay should be interpreted with caution when serially monitoring patients or viewing trended data displays.

When performed at TPMG Regional laboratory, MWS, the LD-4 and LD-5 fractions (in liver and skeletal muscle) may be decreased due to refrigeration; this may lower the total LD value.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE
THOMPSON MD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

VITAMIN B12 (COBALAMIN) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Vitamin B12	539	>=200 pg/mL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration (falsely elevated results are possible). Performed on Roche Cobas e801; results from different methods should NOT be used interchangeably when serially monitoring patients.

Reference Ranges for Vitamin B12:

Normal: Greater than or equal to 200 pg/mL
 Borderline: 200-300 pg/mL

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 9:00 PM PST

Authorizing Provider	Result Type
RODERICK MACKENZIE THOMPSON MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

CALCIUM, SERUM - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Calcium	8.7	8.8 - 10.5 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Gadolinium-containing or any ionic contrast media administered within the last 24 hrs may result in falsely low calcium levels.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider	Result Type
RODERICK MACKENZIE THOMPSON MD	BLOOD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL	914 Marina Way South	Richmond, CA 94804	

DIRECT BILIRUBIN (BILIRUBIN, DIRECT) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, direct	0.5	0.0 - 0.3 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time
					11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST
Authorizing Provider	Result Type					
RODERICK MACKENZIE THOMPSON MD	LABORATORY					
Performing Organization	Address			City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South			Richmond, CA 94804		

TOTAL BILIRUBIN (BILIRUBIN, TOTAL) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bilirubin, total	3.0	0.2 - 1.2 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time
					11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST
Authorizing Provider	Result Type					
RODERICK MACKENZIE THOMPSON MD	BLOOD					
Performing Organization	Address			City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South			Richmond, CA 94804		

ACTIVATED PARTIAL THROMBOPLASTIN TIME (APTT) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
APTT	33.0	23.8 - 36.1 second(s)			KFH SAN FRANCISCO LABORATORY	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume			Collection Time	Received Time
					11/17/2021 1:08 PM PST	11/17/2021 3:13 PM PST
Authorizing Provider	Result Type					
RODERICK MACKENZIE THOMPSON MD	BLOOD					
Performing Organization	Address			City/State/ZIP Code	Phone Number	

PROTHROMBIN TIME (PT) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
PT	13.3	11.7 - 14.9 second(s)			TPMG REGIONAL LABORATORY, MWS	
PT INR	1.0	Ratio			TPMG REGIONAL LABORATORY, MWS	

Comment:

Recommended Range:

2.0-3.0 for most medical and surgical thromboembolic states.

2.5-3.5 for artificial heart valves and recurrent embolism.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 7:26 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

CBC (COMPLETE BLOOD COUNT) WITH DIFFERENTIAL (CBC W AUTOMATED DIFFERENTIAL) - Edited Result - FINAL (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hgb	8.9	13.0 - 17.0 g/dL			KFH SAN FRANCISCO LABORATORY	
Hematocrit	26.5	39.0 - 51.0 %			KFH SAN FRANCISCO LABORATORY	
MCV	86	80 - 100 fL			KFH SAN FRANCISCO LABORATORY	

Comment:

Delta flag reviewed. Results repeated and confirmed. Please review results for consistency with patient conditions. Redraw if necessary.

RDW, RBC	16.4	12.0 - 16.5 %	KFH SAN FRANCISCO LABORATORY
Platelets count	60	140 - 400 K/uL	KFH SAN FRANCISCO LABORATORY
RBC's, nucleated	0	<=0 /100WC	KFH SAN FRANCISCO LABORATORY
Differential panel	MAN DIFF		KFH SAN

			FRANCISCO LABORATORY
WBC COUNT	2.4	3.7 - 11.1 K/uL	KFH SAN FRANCISCO LABORATORY
Red blood cells count	3.07	4.10 - 5.70 M/uL	KFH SAN FRANCISCO LABORATORY
Hgb	8.9	13.0 - 17.0 g/dL	KFH SAN FRANCISCO LABORATORY
Hematocrit	26.5	39.0 - 51.0 %	KFH SAN FRANCISCO LABORATORY
MCV	86	80 - 100 fL	KFH SAN FRANCISCO LABORATORY

Comment:

Delta flag reviewed. Results repeated and confirmed. Please review results for consistency with patient conditions. Redraw if necessary.

RDW, RBC	16.4	12.0 - 16.5 %	KFH SAN FRANCISCO LABORATORY
Platelets count	60	140 - 400 K/uL	KFH SAN FRANCISCO LABORATORY
RBC's, nucleated	0	<=0 /100WC	KFH SAN FRANCISCO LABORATORY
Differential panel	MAN DIFF		KFH SAN FRANCISCO LABORATORY

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 6:03 PM PST

Narrative

KFH SAN FRANCISCO LABORATORY - 11/19/2021 8:18 AM PST

Please save for peripheral smear.

Peripheral smear for pathologist evaluation

See Acc# 94-21-321-12391 for the result.

Slide/smear has been reviewed. 11/19/2021 08:18:31 PST ,c900222.

Authorizing Provider	Result Type
RODERICK MACKENZIE THOMPSON MD	LABORATORY

Performing Organization	Address	City/State/ZIP Code	Phone Number
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115	

URIC ACID - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Uric acid	7.6	2.0 - 8.5 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Therapeutic target for Gout: <6.0 mg/dL. Uric acid levels alone cannot be used to confirm or exclude a diagnosis of gout.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

HAPTOGLOBIN - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Haptoglobin	<9	30 - 220 mg/dL			TPMG REGIONAL LABORATORY, BERKELEY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 8:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE
THOMPSON MD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, BERKELEY	1725 Eastshore Highway	Berkeley, CA 94710	

WHITE BLOOD CELL DIFFERENTIAL (WBC DIFF MANUAL, REFLEX) - Final result (11/17/2021 1:08 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Neutrophils %. Manual count	22	42 - 76 %			KFH SAN FRANCISCO LABORATORY	
Lymphocytes % manual count	61	15 - 47 %			KFH SAN FRANCISCO LABORATORY	
Band's %, manual count	1	0 - 5 %			KFH SAN FRANCISCO LABORATORY	
Monos %, man cnt	7	1 - 11 %			KFH SAN FRANCISCO LABORATORY	
Eosinophils % manual count	2	0 - 7 %			KFH SAN FRANCISCO LABORATORY	
Basophils %. manual count	4	0 - 1 %			KFH SAN FRANCISCO LABORATORY	
Lymphocytes, atypical %	1	%			KFH SAN FRANCISCO	

			LABORATORY
Metamyelocytes %	1	0 - 1 %	KFH SAN FRANCISCO LABORATORY
Myelocytes %, manual count	1	0 - 0 %	KFH SAN FRANCISCO LABORATORY
Platelets,bld,ql, man ct	DECREASE		KFH SAN FRANCISCO LABORATORY
Platelets, morphology	LARGE		KFH SAN FRANCISCO LABORATORY
Macrocytes	1+		KFH SAN FRANCISCO LABORATORY
Microcytes	1+		KFH SAN FRANCISCO LABORATORY
Polychromasia	1+		KFH SAN FRANCISCO LABORATORY
Ovalocytes,bld,ql, light microscopy	1+		KFH SAN FRANCISCO LABORATORY
Elliptocytes, light microscopy, qual	1+		KFH SAN FRANCISCO LABORATORY
Comment, hematology	SEE NOTE		KFH SAN FRANCISCO LABORATORY

Comment: manual diff performed on albumin slide.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:08 PM PST	11/17/2021 1:58 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	LABORATORY			
Performing Organization	Address			
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.			
	City/State/ZIP Code			
	San Francisco, CA 94115			
	Phone Number			

ANTI HUMAN GLOBULIN (COOMBS TEST) (DIRECT COOMBS (MEDICAL CENTER)) - Final result (11/17/2021 1:06 PM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Direct antiglobulin test, poly specific	Positive				KFH SAN FRANCISCO LABORATORY	
Direct antiglobulin test, IgG	Negative				KFH SAN FRANCISCO LABORATORY	
DIRECT ANTIGLOBULIN TEST, COMPLEMENT SPECIFIC	Positive				KFH SAN FRANCISCO LABORATORY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/17/2021 1:06 PM PST	11/17/2021 2:02 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
KFH SAN FRANCISCO LABORATORY	2425 Geary Blvd.	San Francisco, CA 94115		

NON-FASTING LIPID PANEL (LIPID PANEL, NON-FASTING (CHOL, DHDL, TRIG, CALC LDL W REFLEX TO DLDL)) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Cholesterol	110	<=239 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Reference Ranges for Cholesterol: (mg/dL)

Age Range	Optimal	Normal	Risk	High Risk
0-18 yrs	<170	170-199		>199
18-150 yrs	<200	200-239		>239

TRIGLYCERIDE, NONFASTING	157	<=879 mg/dL	TPMG REGIONAL LABORATORY, MWS
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Comment:

Nonfasting triglycerides vary depending on timing and composition of last meal. If nonfasting triglyceride levels are >440 mg/dL, consider ordering fasting triglycerides to better assess risk.

HDL	31	>=40 mg/dL	TPMG REGIONAL LABORATORY, MWS
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Comment:

Reference Range for HDL Cholesterol: (mg/dL)

Age Range	Low	Normal	Optimal
Male: 0-18 yrs	<40	40-45	>45
Male: 18-150 yrs	<40	40-59	>59
Female: 0-18 yrs	<40	40-45	>45
Female: 18-150 yrs	<50	50-59	>59

LDL CALCULATED, NONFASTING	48	<=159 mg/dL	TPMG REGIONAL LABORATORY, MWS
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Comment:

Reference Range for LDL Calculated: (mg/dL)

Age Range	Optimal	Low Risk	Normal Risk	High Risk	Very High Risk

0-18 yrs	<110	110-129	>129
18-150 yrs	<100	100-129	130-159

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804		

CREATININE AND CALCULATED GLOMERULAR FILTRATION RATE (CREATININE W GFR, CALCULATED) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Creatinine	1.14	<=1.34 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Glomerular filtration rate, nonAfrican American	>60	>=60 mL/min			TPMG REGIONAL LABORATORY, MWS	
GLOMERULAR FILTRATION RATE - AFRICAN AMERICAN	>60	>=60 mL/min			TPMG REGIONAL LABORATORY, MWS	
Comment, glomerular filtration rate	SEE NOTE				TPMG REGIONAL LABORATORY, MWS	

Comment:

Glomerular Filtration Rate (GFR) estimate is expressed in mL/min/1.73 m² body surface area. A GFR estimate is validated only for patients greater than or equal to 18 years of age. Since this test is not useful if renal function is changing rapidly, a GFR estimate is not reported for inpatients. Many elderly patients have mildly to moderately reduced GFR.

Per K/DOQI Clinical Practice Guidelines on Chronic Kidney Disease:

GFR 30 - 59 = Stage 3 CKD

GFR 15 - 29 = Stage 4 CKD

GFR < 15 = Stage 5 CKD

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST
Authorizing Provider	Result Type			
RODERICK MACKENZIE THOMPSON MD	BLOOD			
Performing Organization	Address	City/State/ZIP Code	Phone Number	

IRON AND TOTAL IRON BINDING CAPACITY - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Iron	109	50 - 212 ug/dL			TPMG REGIONAL LABORATORY, MWS	
Iron binding capacity, unsaturated	145	110 - 370 ug/dL			TPMG REGIONAL LABORATORY, MWS	
Total iron binding capacity	254	228 - 428 ug/dL			TPMG REGIONAL LABORATORY, MWS	
Transferrin % saturation	43	14 - 57 %			TPMG REGIONAL LABORATORY, MWS	

Comment:

This test was developed and its performance characteristics determined by TPMG Regional Laboratory. It has not been cleared or approved by the FDA. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL
LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

BLOOD UREA NITROGEN (BUN) (BUN) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
BUN	14	7 - 27 mg/dL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST		

Authorizing Provider Result Type

RODERICK MACKENZIE
THOMPSON MD

Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

ALANINE AMINOTRANSFERASE (ALT) (ALT) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
ALT	39	0 - 47 U/L			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)		Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time	
				11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST	

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

THYROID STIMULATING HORMONE (TSH) (TSH) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
TSH	4.4	0.4 - 4.2 uIU/mL			TPMG REGIONAL LABORATORY, MWS	

Comment:

Order "TSH, Pregnant" for pregnant patients. TSH reference range is 0.1-3.0 uIU/mL for pregnant patients.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST

Authorizing Provider Result Type

RODERICK MACKENZIE BLOOD
THOMPSON MD

Performing Organization Address City/State/ZIP Code Phone Number

TPMG REGIONAL LABORATORY, MWS 914 Marina Way South Richmond, CA 94804

FREE THYROXINE (T4) (T4, FREE) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Free T4	1.1	0.8 - 1.7 ng/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

FERRITIN - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Ferritin	135	22 - 365 ng/mL			TPMG REGIONAL LABORATORY, MWS	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume		Collection Time	Received Time
					11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

ELECTROLYTES (SODIUM, POTASSIUM, CHLORIDE, CARBON DIOXIDE) (ELECTROLYTE PANEL (NA, K, CL, CO2)) - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	137	135 - 145 mEq/L			TPMG REGIONAL LABORATORY, MWS	
Potassium	4.4	3.5 - 5.3 mEq/L			TPMG REGIONAL LABORATORY, MWS	
Chloride	102	100 - 111 mEq/L			TPMG REGIONAL LABORATORY, MWS	
CO2	27	24 - 33 mEq/L			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:58 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

HEMOGLOBIN A1C - Final result (11/16/2021 11:20 AM PST)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hgb A1c %	4.3	<=5.6 %			TPMG REGIONAL LABORATORY, MWS	
ESTIMATED AVERAGE GLUCOSE	77	85 - 126 mg/dL			TPMG REGIONAL LABORATORY, MWS	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			11/16/2021 11:20 AM PST	11/16/2021 4:35 PM PST

Authorizing Provider	Result Type		
RODERICK MACKENZIE THOMPSON MD	BLOOD		
Performing Organization	Address	City/State/ZIP Code	Phone Number
TPMG REGIONAL LABORATORY, MWS	914 Marina Way South	Richmond, CA 94804	

List stopped at 200 results. Some data may be omitted.



Care Teams

Team Member	Relationship	Specialty	Start Date	End Date
RODERICK MACKENZIE THOMPSON MD 1600 OWENS STREET SAN FRANCISCO, CA 94158- 2261 628-242-6544 (Work) 628-242-6565 (Fax)	PCP - General		5/6/20	
DEEPIKA KUMAR MD 2425 GEARY BOULEVARD SAN FRANCISCO, CA 94115- 3358 415-833-7134 (Work) 415-833-8530 (Fax)	Oncologist		12/14/21	



Patient Contacts

Contact Name	Contact Address	Communication	Relationship to Patient
Jennifer Klecker	Unknown	414-213-1332 (Mobile) 414-213-1332 (Home)	Wife, Agent
Martina Gonsalves	Unknown	000-000-0000 (Home)	Sister, Emergency Contact

Document Information

Primary Care Provider

RODERICK MACKENZIE THOMPSON MD (May 06, 2020 - Present)
628-242-6544-x6544 (Work)
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Internal Medicine

Other Service Providers

DEEPIKA KUMAR MD (Oncologist)
415-833-7134-x7134 (Work)
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Hematology and Oncology
Kaiser Permanente Northern California
Pleasanton, CA 94588

Document Coverage Dates

Feb. 06, 1976 - May 19, 2022

Custodian Organization

Kaiser Permanente Northern California
Pleasanton, CA 94588



If you take your Lucy record on a thumb drive to a different doctor, he or she might be able to use his computer to read the file electronically. Your downloaded, machine-readable Personal Health Summary document is in a format called "CDA." If your doctor has a computer that understands CDA, your information is a folder on your thumb drive called **MachineReadable_XDMFormat**. You might need to enter a password before your doctor can use this file.

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