

Patient	BUCKLE, MARK EDWARD	Home Phone	Work Phone
Health #	0014045355	Sex	M
Age	26 years		
DOB	1992-Jun-05		

Accession Id: 000002018164002074
 MRN: 1721015
 Ordered By: Reported By:CDHA
 Collection Date:2018-Jun-13 9:02 AM Reviewed: 2018-Jun-13 by DWood
 Attending: David Calvin Wood
 Updated On: 2018-Jun-13 2:37 PM

Flags	Results	Ref Range
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Patient Fasting? (Final)

Patient Fasting? Yes

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	Flags	Results	Ref Range
Automated Diff (Final)			
Neut	L	39.8	45.0 - 70.0 %
Lymph	H	50.2	15.0 - 41.0 %
Mono		6.1	2.0 - 10.0 %
Eos		1.5	0.0 - 7.0 %
Baso	H	1.8	0.0 - 1.5 %
Immature Grans		0.6	0.0 - 5.0 %
Neut	L	1.30	2.00 - 7.50 x10(9)/L
Lymph		1.64	1.50 - 4.00 x10(9)/L
Mono		0.20	0.10 - 0.90 x10(9)/L
Eos		0.05	0.00 - 0.50 x10(9)/L
Baso		0.06	0.00 - 0.10 x10(9)/L
Immature Grans		0.02	0.00 - 0.09 x10(9)/L

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CBC (Final)			
WBC	L	3.27	4.50 - 11.00 x10(9)/L
RBC	L	4.47	4.50 - 6.50 x10(12)/L
Hgb		141	140 - 180 g/L
Hct		0.431	0.420 - 0.540
MCV		96.4	80.0 - 97.0 fL
MCH		31.5	28.0 - 32.0 pg
MCHC		327	315 - 350 g/L

RDW	12.9	11.5 - 14.5	%
PLT	204	150 - 350	x10(9)/L
MPV	11.5	9.0 - 12.5	fL
NRBC/100 WBC's	0.0	0.0 - 0.0	%

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Corrected Total Calcium (Final)

Corrected Total Calcium 2.35 mmol/L

This Corrected Total Calcium value can be compared to the normal range for patients with a normal Albumin of 40 g/L.

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Albumin (Final)

Albumin 44 35 - 50 g/L

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Flags

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LDL Calculated (Final)

LDL Calculated 3.72 mmol/L

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Non HDL Cholesterol (Final)

Non HDL Cholesterol 4.04 mmol/L
Optimal: <2.60 mmol/L

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Calcium (Final)

Calcium	2.43	2.20 - 2.60	mmol/L
Reference range based on samples from ambulatory patients.			
Recumbent: 0.10 mmol/L lower.			

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Cholesterol/HDL Ratio (Final)

Cholesterol/HDL Ratio	3	ratio
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ALT (Final)

ALT	20	0 - 54	U/L
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Creatinine (Final)

Creatinine	91	64 - 104	umol/L
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HDL-Cholesterol (Final)

HDL-Cholesterol	1.70	mmol/L
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Flags Results Ref Range

Cholesterol (Final)

Cholesterol

5.74

mmol/L

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Flags Results Ref Range

Alkaline Phosphatase (Final)

Alkaline Phosphatase

48

38 - 150

U/L

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Flags Results Ref Range

Creatine Kinase (Final)

Creatine Kinase

225

30 - 300

U/L

Exercise can significantly increase plasma Creatine Kinase (CK) activity. CK activity in black population is approximately 2 times that of the white/asian population. Statin treatment can cause elevation of CK activity.

Reference ranges are for adults. Reference ranges have not been established for children.

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Flags Results Ref Range

C-Reactive Protein (Final)

C-Reactive Protein

0.32

0.00 - 7.99

mg/L

>8 mg/L is consistent with acute phase response to inflammation.

Cardiovascular Risk assessment:

Low risk: <1 mg/L

Average risk: 1-3 mg/L

High risk: >3 mg/L

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Flags

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Ref Range

Lipid Comment: (Final)

Lipids Comment

See Note

For interpretation of levels or ranges, please see:

<http://dyslipidemia.onlinecjc.ca/Content/PDFs/2012Guidelines.pdf>

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Ref Range

Triglyceride (Final)

Triglycerides

0.72

mmol/L

Fasting sample reference ranges:

Normal: <1.70 mmol/L

Borderline High: 1.70 to 2.25 mmol/L

High: 2.26 to 5.64 mmol/L

Very High: >5.65 mmol/L

Note: Triglyceride result greater than 15.00 mmol/L can lead to abdominal pain and may be life-threatening due to chylomicron-induced pancreatitis.

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Magnesium (Final)

Magnesium

0.79

0.66 - 1.07 mmol/L

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Ref Range

Electrolytes (Na,K) (Final)

Sodium

140

136 - 145

mmol/L

Reference values have not been established for patients that are less than 1 year of age.

Pseudohyponatremia may be caused by specimens with high protein or lipid

concentrations.

Potassium

4.0

3.4 - 5.0

mmol/L

Reference values have not been established for patients that are less than 1 year of age.

Note: Potassium (K+) reference ranges have been adjusted to accomodate for the possibility of slight leakage of K+ from red blood cells prior to sample separation.

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eGFR (Final)

eGFR	>90	>= 60	mL/min/1.73mE2
Stage of Kidney Disease	eGFR	Description	
1	>=90	Normal or High	
2	60-89	Mildly Decreased	
3a	45-59	Mildly to Moderately Decreased	
3b	30-44	Moderately to Severely Decreased	
4	15-29	Severely Decreased	
5	<15	Kidney Failure	

*Multiply the adult (>= 18 years) eGFR results by 1.159 if patient of African descent.

CAUTION: eGFR should not be used when plasma creatinine is changing rapidly, in pregnancy, for drug dosing, and should be interpreted with caution in extremes of body habitus.

eGFR <60 mL/min/1.73mE2 and/or Albumin to Creatinine Ratio (ACR) >= 3 mg/mmol for >3 months are diagnostic criterion for Chronic Kidney Disease (CKD).

For more information on CKD identification, management and referral:

<http://www.nsdp.gov.ns.ca/ckd-prevention-and-early-detection>

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Uric Acid (Final)

Uric Acid 299 210 - 450 umol/L

High normal urate level does not rule out gout, especially if sample taken during an acute attack. If on treatment for chronic gout, recommended levels are <360 umol/L.

Note that falsely lower results may be seen in patients on Rasburicase.

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Glucose AC (Final)

Glucose AC	L	3.3	3.6 - 6.0	mmol/L
AC = Ante Cibum (Specimen was drawn before eating.)				

For interpretation, please see the Canadian Journal of Diabetes 2013;

<http://www.diabetes.ca>

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Thyroid Stimulating Hormone (Final)

Thyroid Stimulating Hormone	2.16	0.35 - 4.30	mIU/L
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Testosterone (Final)

Testosterone	12.32	8.00 - 32.00	nmol/L
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Note: Male reference range applies to post-puberty and is based on a morning sample, since levels tend to decline through the day.

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Ferritin (Final)

Ferritin	138.3	22.0 - 300.0	ug/L
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Note: Ferritin is an acute phase reactant, hence mild/moderate elevations may be seen in inflammatory conditions.

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Folate (Final)

Folate

25.7

7.0 - 47.0

nmol/L

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Vitamin B12 (Final)

Vitamin B12

609

138 - 652

pmol/L

Consider B12 replacement for symptomatic patients with B12 levels between 138 and 220 pmol/L and hematological or neurological abnormalities.

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Hemoglobin A1c (Final)

Hgb A1c

5.6

4.6 - 5.9

%

For diagnostic purposes (excluding type 1 diabetes mellitus & gestational diabetes):

6.0- 6.4% = prediabetes

? 6.5% = diabetes

For full diagnostic workup of diabetes mellitus and A1c targets to achieve glycemic control in patients with known diabetes- please refer to the most recent version of the Diabetes Canada Clinical Practice Guidelines.