

PATIENT'S NAME(Last, First Middle Name) DATE/TIME OF COLLECTION: 09/01/2025 09H42M RIVERA PAGDINGALAN Roel 09/01/2025 11H23M DATE/TIME OF EXAM: PIN BIRTHDATE AGE/GENDER ROOM/BED **VISIT NUMBER** 1310163268 12/02/1986 38Y / M PATHO / 1002909015

## **CLINICAL SEROLOGY AND IMMUNOLOGY**

Specimen: SERUM

TEST CONVENTIONAL UNITS | S.I. UNITS

RESULT UNIT REFERENCE RANGE | RESULT UNIT REFERENCE RANGE

Vitamin D Total 29.12 ng/mL 30.00 - 100.00 | 72.80 nmol/L 75.00 - 250.00

DANIE MAY A. RIOFLORIDO, R.M.T. PRC#0103722
MEDICAL TECHNOLOGIST

MANUELITO A. MADRID, M.D., FPSP PRC#87687 PATHOLOGIST

This result is best interpreted by your attending physician in correlation with your clinical data, imaging and other laboratory results.

This report has been electronically validated. No signature is required.

PRINT DATE/TIME: 09/01/2025 12H26M

ORIGINAL RELEASE DATE/TIME:

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