

812-606-6665

Zhen, Kai, M, 07/23/1988

IUHC Medclinic

600 N JORDAN AVENUE , BLOOMINGTON, IN 474053190 812-855-4011

FINAL RESULT

Accession ID: 3108090	Lab Ref ID: 2415051
Order Date: 01/09/2020	Received: 01/09/2020 10:25:00
Collection Date: 01/09/2020 09:48:07	
Requesting Physician:Burkhart, David	Ordering Physician: Burkhart, David

CBC w/ differential and platelet

NAME	VALUE	REFERENCE RANGE
F WBC	4.91	3.80-10.50 (K/uL)
F RBC	7.15 H	4.50-6.00 (M/uL)
F HGB	14.5	13.5-18.0 (g/dL)
F HCT	44.2	41.0-54.0 (%)
F MCV,	61.8 L	80.0-94.0 (fL)
F MCH	20.3 ∟	27.0-32.0 (pg)
F MCHC	32.8	32.0-36.0 (g/dL)
F RDW	18.7 H	11.0-14.5 (%)
F PLT	280	140-440 (K/uL)
F NEU%	55.9	42.2-75.2 (%)
F LYM%	31.6	18.5-45.0 (%)
F MONO%	9.0	2.0-12.0 (%)
F EOS%	3.1	0.0-5.0 (%)
F BASO%	0.4	0.0-3.0 (%)
F NEU	2.8	1.4-6.5 (K/uL)
F LYM,	1.6	1.2-3.4 (K/uL)
F MONO,	0.4	0.1-1.0 (K/uL)
F EOS	0.2	0.0-0.7 (K/uL)
F BASO	0.0	0.0-0.3 (K/uL)
F MAN DIFF IND?	NO	
F RBC MORPH IND?	YES	

3108090 Result:

thalassemia

Burkhart, David M, MD 1/9/2020

11:21:27 AM >

Notes: