Patient Information	Specimen Information	Client Information
EPSTEIN, JEFFREY **DOB: 01/20/1953 AGE: 65** Gender: M Phone: [redacted] Patient ID: 19530120MJE Health ID: 8573003290851249	Specimen: MR780669K Requisition: 0006001 Collected: 08/03/2018 Received: 08/07/2018 / 08:58 EDT Reported: 08/07/2018 / 08:59 EDT	Client #: 78300020 56W5265 MOSKOWITZ, BRUCE W BRUCE MOSKOWITZ, MD Attn: NATIONWIDE ACCOUNT 1411 N FLAGLER DR STE 7100 WEST PALM BEACH, FL 33401-3418

Test Name	In Range	Out Of Range	Reference Range	Lab
LIPID PANEL, STANDARD				
CHOLESTEROL, TOTAL		**244 H**	<200 mg/dL	MI
HDL CHOLESTEROL		**29 L**	>40 mg/dL	MI
TRIGLYCERIDES		**855 H**	<150 mg/dL	MI
LDL-CHOLESTEROL			mg/dL (calc)	MI

LDL cholesterol not calculated. Triglyceride levels greater than 400 mg/dL invalidate calculated LDL results.

Reference range: <100

Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with > or = 2 CHD risk factors.

LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C.
Martin SS et al. JAMA. 2013;310(19): 2061-2068
(http://education.QuestDiagnostics.com/faq/FAQ164)

CHOL/HDLC RATIO		**8.4 H**	<5.0 (calc)	MI
NON HDL CHOLESTEROL		**215 H**	<130 mg/dL (calc)	MI

For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic option.

HS CRP	1.2		mg/L	TP

The above test was performed; however, the specimen was lipemic.

Average relative cardiovascular risk according to AHA/CDC guidelines.

For ages >17 Years:

hs-CRP mg/L	Risk According to AHA/CDC Guidelines
<1.0	Lower relative cardiovascular risk.
1.0-3.0	Average relative cardiovascular risk.
3.1-10.0	Higher relative cardiovascular risk. Consider retesting in 1 to 2 weeks to exclude a benign transient elevation in the baseline CRP value secondary to infection or inflammation.
>10.0	Persistent elevation, upon retesting, may be associated with infection and inflammation.

HOMOCYSTEINE		**16.1 H**	<11.4 umol/L	MI

Homocysteine is increased by functional deficiency of folate or vitamin B12. Testing for methylmalonic acid

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Test Name	In Range	Out Of Range	Reference Range	Lab
differentiates between these deficiencies. Other causes of increased homocysteine include renal failure, folate antagonists such as methotrexate and phenytoin, and exposure to nitrous oxide.				
COMPREHENSIVE METABOLIC PANEL				MI
GLUCOSE		**106 H**	65-99 mg/dL Fasting reference interval	
For someone without known diabetes, a glucose value between 100 and 125 mg/dL is consistent with prediabetes and should be confirmed with a follow-up test.				
UREA NITROGEN (BUN)	22		7-25 mg/dL	
CREATININE	1.11		0.70-1.25 mg/dL	
For patients >49 years of age, the reference limit for Creatinine is approximately 13% higher for people identified as African-American.				
eGFR NON-AFR. AMERICAN	69		> OR = 60 mL/min/1.73m2	
eGFR AFRICAN AMERICAN	80		> OR = 60 mL/min/1.73m2	
BUN/CREATININE RATIO	NOT APPLICABLE		6-22 (calc)	
SODIUM	142		135-146 mmol/L	
POTASSIUM	4.4		3.5-5.3 mmol/L	
CHLORIDE	103		98-110 mmol/L	
CARBON DIOXIDE	21		20-31 mmol/L	
CALCIUM		**10.5 H**	8.6-10.3 mg/dL	
PROTEIN, TOTAL	7.4		6.1-8.1 g/dL	
ALBUMIN	4.6		3.6-5.1 g/dL	
GLOBULIN	2.8		1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	1.6		1.0-2.5 (calc)	
BILIRUBIN, TOTAL	0.7		0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	61		40-115 U/L	
AST	23		10-35 U/L	
ALT	38		9-46 U/L	
HEMOGLOBIN A1c		**5.7 H**	<5.7 % of total Hgb	MI
For someone without known diabetes, a hemoglobin A1c value between 5.7% and 6.4% is consistent with prediabetes and should be confirmed with a follow-up test. For someone with known diabetes, a value <7% indicates that their diabetes is well controlled. A1c targets should be individualized based on duration of diabetes, age, comorbid conditions, and other considerations. This assay result is consistent with an increased risk of diabetes. Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes for children.				
URIC ACID	7.2		4.0-8.0 mg/dL	MI

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Test Name	In Range	Out Of Range	Reference Range	Lab
Therapeutic target for gout patients: <6.0 mg/dL				
TSH	3.41		0.40-4.50 mIU/L	MI
T4 (THYROXINE), TOTAL	8.3		4.5-12.0 mcg/dL	MI
FREE T4 INDEX (T7)	2.4		1.4-3.8	
T3 UPTAKE	29		22-35 %	MI
SED RATE BY MODIFIED WESTERGREN	6		< OR = 20 mm/h	MI
CBC (INCLUDES DIFF/PLT)				MI
WHITE BLOOD CELL COUNT	7.5		3.8-10.8 Thousand/uL	
RED BLOOD CELL COUNT	5.65		4.20-5.80 Million/uL	
HEMOGLOBIN	16.4		13.2-17.1 g/dL	
HEMATOCRIT	47.6		38.5-50.0 %	
MCV	84.2		80.0-100.0 fL	
MCH	29.0		27.0-33.0 pg	
MCHC	34.5		32.0-36.0 g/dL	
RDW	13.9		11.0-15.0 %	
PLATELET COUNT	301		140-400 Thousand/uL	
MPV	9.6		7.5-12.5 fL	
ABSOLUTE NEUTROPHILS	3420		1500-7800 cells/uL	
ABSOLUTE LYMPHOCYTES	2880		850-3900 cells/uL	
ABSOLUTE MONOCYTES	705		200-950 cells/uL	
ABSOLUTE EOSINOPHILS	435		15-500 cells/uL	
ABSOLUTE BASOPHILS	60		0-200 cells/uL	
NEUTROPHILS	45.6		%	
LYMPHOCYTES	38.4		%	
MONOCYTES	9.4		%	
EOSINOPHILS	5.8		%	
BASOPHILS	0.8		%	
URINALYSIS, COMPLETE				MI
See Endnote 1				
VITAMIN B12	423		200-1100 pg/mL	MI
C-REACTIVE PROTEIN	1.5		<8.0 mg/L	MI
TESTOSTERONE, TOTAL, MALES (ADULT), IA				MI
TESTOSTERONE, TOTAL, MALES (ADULT), IA		**206 L**	250-827 ng/dL	
In hypogonadal males, Testosterone, Total, LC/MS/MS, is the recommended assay due to the diminished accuracy of immunoassay at levels below 250 ng/dL. This test code (15983) must be collected in a red-top tube with no gel.				
PSA, TOTAL	0.6		< OR = 4.0 ng/mL	MI
The total PSA value from this assay system is standardized against the WHO standard. The test result will be approximately 20% lower when compared to the equimolar-standardized total PSA (Beckman Coulter). Comparison of serial PSA results should be interpreted with this fact in mind. This test was performed using the Siemens chemiluminescent method. Values obtained from different assay methods cannot be used interchangeably. PSA levels, regardless of value, should not be interpreted as absolute				

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Test Name	In Range	Out Of Range	Reference Range	Lab

evidence of the presence or absence of disease.

Endnote 1

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********************************
* Test not performed.          *
* No specimen received.        *
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Endocrinology

Test Name	Result	Reference Range	Lab
VITAMIN D,25-OH,TOTAL,IA	32	30-100 ng/mL	MI

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Vitamin D Status          25-OH Vitamin D:

Deficiency:                     <20 ng/mL
Insufficiency:            20 - 29 ng/mL
Optimal:                  > or = 30 ng/mL
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For 25-OH Vitamin D testing on patients on D2-supplementation and patients for whom quantitation of D2 and D3 fractions is required, the QuestAssureD(TM) 25-OH VIT D, (D2,D3), LC/MS/MS is recommended: order code 92888 (patients >2yrs).

For more information on this test, go to: [redacted] (This link is being provided for informational/ educational purposes only.)

Physician Comments:

PERFORMING SITE:

MI QUEST DIAGNOSTICS-MIAMI, 10200 COMMERCE PARKWAY, MIRAMAR, FL 33025-3938 Laboratory Director: GLEN L. HORTIN MD PHD, CLIA: 10D0277334
TP QUEST DIAGNOSTICS-TAMPA, 4225 E. FOWLER AVE, TAMPA, FL 33617-2026 Laboratory Director: GLEN L HORTIN,MD,PHD, CLIA: 10D0291120