

copy...

Test	Flag	Result	Reference Range - Units	Lab Lic. #
<u>Hematology</u>				
WBC		4.4	4.0 - 11.0	x E9/L
RBC		5.65	4.50 - 6.00	x E12/L
Hemoglobin		161	135 - 175	g/L
Hematocrit		0.47	0.400 - 0.500	L/L
MCV		83	80 - 100	fL
MCH		28.5	27.5 - 33.0	pg
MCHC		345	305 - 360	g/L
Platelets		204	150 - 400	x E9/L
RDW		13.5	11.5 - 14.5	%
<u>Differential</u>				
Neutrophils		2.4	2.0 - 7.5	x E9/L
Lymphocytes		1.6	1.0 - 3.5	x E9/L
Monocytes		0.3	0.2 - 1.0	x E9/L
Eosinophils		0.1	0.0 - 0.5	x E9/L
Basophils		0.0	0.0 - 0.2	x E9/L
<u>Biochemical Investigation of Anemias</u>				
Vitamin B12		494	138-652	pmol/L
		Please note implementation of age-specific pediatric reference intervals (Bailey D. et al, Clinical Chemistry 2013;59:1393, and www.sickkids.ca/Caliperproject/intervals)		
Ferritin		113	22-275	ug/L
<u>General Chemistry</u>				
Creatinine		99	67-117	umol/L
Glomerular Filtration Rate (eGFR)		84		
		An eGFR from 60-89 ml/min/1.73 m2 is consistent with mildly decreased kidney function. However, in the absence of other evidence of kidney disease, eGFR values in this range do not fulfill the KDIGO criteria for chronic kidney disease. Interpret results in concert with ACR measurement.		
		For patients of African descent, the reported eGFR must be multiplied by 1.15.		
		Effective May 4 2015, eGFR is calculated using the CKD-EPI 2009 equation.		
		KDIGO 2012 guidelines highlight the importance of		

Test	Flag	Result	Reference Range - Units	Lab Lic. #
------	------	--------	-------------------------	------------

General Chemistry

eGFR and urine albumin creatinine ratio (ACR) in screening, diagnosis and management of CKD. Results for eGFR should be interpreted in concert with ACR.

Lipids

Hours After Meal	4	Hours
Triglyceride	1.41	mmol/L
Cholesterol	5.00	mmol/L
HDL Cholesterol	1.06	mmol/L
Non HDL Cholesterol	3.94	mmol/L
	Non HDL-Cholesterol is not affected by the fasting status of the patient.	
LDL Cholesterol	3.30	mmol/L
	LDL-C calculation is decreased if fasting < or = 10 hours. Consider the Non HDL-C value as an alternate lipid target if monitoring treatment in intermediate or high risk patients.	
Cholesterol/HDL Cholesterol	4.7	
Lipid Target Values	Lipid Target Values should be based on patient 10 year CVD risk assessment.	
	! High or Intermediate CVD risk	
	-----!-----	
	Primary ! LDL-C < or = 2.0 mmol/L OR	
	Tx target ! > or = 50% decrease in LDL-C	
	!	
	Alternate ! Non HDL-C < or = 2.6 mmol/L OR	
	Tx target ! ApoB < or = 0.8 g/L	
	-----!-----	
	! Low CVD risk	
	-----!-----	
	Primary ! > or = 50% decrease in LDL-C	
	Tx target !	

Thyroid Function

Thyroid Stimulating Hormone [TSH]	LO	0.19	0.32-4.00	mIU/L
Thyroxine Free [Free T4]		10	9-19	pmol/L

Reproductive and Gonadal

Estradiol		124	<162	pmol/L
-----------	--	-----	------	--------

NOTE: Fulvestrant has been shown to interfere with estradiol testing by this direct

Test	Flag	Result	Reference Range - Units	Lab Lic. #
<u>Reproductive and Gonadal</u>				
		immunoassay. Results for patients taking this medication may be falsely elevated to a clinically-significant degree.		
		Some steroidal aromatase inhibitors are structurally related to estradiol and may interfere with some direct immunoassays.		
Testosterone		17.4	8.4 - 28.8	nmol/L
		Total Testosterone levels may not reflect the biologically-active testosterone when SHBG levels are abnormal.		
Testosterone Free		465	196-636	pmol/L
		Interpret free testosterone results with caution in presence of significant hypoalbuminemia.		
<u>Bone Markers</u>				
25-Hydroxyvitamin D	LO	74	75 - 250	nmol/L
		Season, race and dietary intake affect 25-Hydroxy Vitamin D levels. Highest levels are found in the summer months and lowest levels during the winter.		
		25 - 74 nmol/L: Vitamin D Insufficient		