

Patient: DARE, GABRIEL R.
DOB: 04/20/1989

Patient ID: 985741964

Control ID: 6402067

Specimen ID: 201-436-5213-0
Date collected: 07/20/2017 0821 Local

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
BUN/Creatinine Ratio	14			9 - 20	
Sodium, Serum	142		mmol/L	134 - 144	01
Potassium, Serum	4.0		mmol/L	3.5 - 5.2	01
Chloride, Serum	100		mmol/L	96 - 106	01
Carbon Dioxide, Total	21		mmol/L	18 - 29	01
Calcium, Serum	10.0		mg/dL	8.7 - 10.2	01
Protein, Total, Serum	7.5		g/dL	6.0 - 8.5	01
Albumin, Serum	5.0		g/dL	3.5 - 5.5	01
Globulin, Total	2.5		g/dL	1.5 - 4.5	
A/G Ratio	2.0			1.2 - 2.2	
Bilirubin, Total	0.6		mg/dL	0.0 - 1.2	01
Alkaline Phosphatase, S	60		IU/L	39 - 117	01
AST (SGOT)	35		IU/L	0 - 40	01
ALT (SGPT)	72	High	IU/L	0 - 44	01

Thyroid Panel With TSH

TSH	1.630		uIU/mL	0.450 - 4.500	01
Thyroxine (T4)	7.4		ug/dL	4.5 - 12.0	01
T3 Uptake	30		%	24 - 39	01
Free Thyroxine Index	2.2			1.2 - 4.9	

PSA Total+% Free

Prostate Specific Ag, Serum	0.3		ng/mL	0.0 - 4.0	01
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Roche ECLIA methodology.

According to the American Urological Association, Serum PSA should decrease and remain at undetectable levels after radical prostatectomy. The AUA defines biochemical recurrence as an initial PSA value 0.2 ng/mL or greater followed by a subsequent confirmatory PSA value 0.2 ng/mL or greater.

Values obtained with different assay methods or kits cannot be used interchangeably. Results cannot be interpreted as absolute evidence of the presence or absence of malignant disease.

PSA, Free	0.15		ng/mL	N/A	01
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Roche ECLIA methodology.

% Free PSA	50.0		%		
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The table below lists the probability of prostate cancer for men with non-suspicious DRE results and total PSA between 4 and 10 ng/mL, by patient age (Catalona et al, JAMA 1998, 279:1542).

% Free PSA	50-64 yr	65-75 yr
0.00-10.00%	56%	55%
10.01-15.00%	24%	35%
15.01-20.00%	17%	23%
20.01-25.00%	10%	20%
>25.00%	5%	9%

Please note: Catalona et al did not make specific recommendations regarding the use of

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
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percent free PSA for any other population of men.

FSH and LH

LH	1.1	Low	mIU/mL	1.7 - 8.6	01
FSH	2.2		mIU/mL	1.5 - 12.4	01

Testosterone, Free and Total

Testosterone, Serum	149	Low	ng/dL	264 - 916	01
Please note reference interval change					
Adult male reference interval is based on a population of healthy nonobese males (BMI <30) between 19 and 39 years old. Travison, et.al. JCEM 2017,102;1161-1173. PMID: 28324103.					
Free Testosterone (Direct)	3.9	Low	pg/mL	9.3 - 26.5	01

IGF-1

Insulin-Like Growth Factor I	255		ng/mL	98 - 282	02
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Vitamin D, 25-Hydroxy

35.9	ng/mL	30.0 - 100.0	01
Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).			
1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.			
2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7):1911-30.			

Sex Horm Binding Glob, Serum	32.2		nmol/L	16.5 - 55.9	01
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Cortisol - AM	8.7		ug/dL	6.2 - 19.4	01
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