

LAB RESULTS

Last Name	Lab ID	Specimen Number	Time Collected	Date Entered	Time Reported
			6/16/2014 6:39 AM		
First Name	Middle Initial	Phone	Control Number	Account Number	Account Phone Number
Date of Birth	Age	Sex	Fasting	Physician Name	Physician ID
	45	M			
Address					

Tests Ordered

CMP14+LP+4AC+CBC/D/Plt; Testosterone,Free and Total; TSH; Hemoglobin A1c; Thyroxine (T4) Free, Direct, S; DHEA-Sulfate; Cortisol; Estradiol; Reverse

Tests	Result	Flag	Units	Reference Interval	Lab
<u>CMP14+LP+4AC+CBC/D/Plt</u>					
Glucose, Serum	88		mg/dL	70 -99	;X
Uric Acid, Serum	5.6		mg/dL	3.5 -7.2	;X
BUN	18		mg/dL	7 -25	;X
Creatinine, Serum	0.98		mg/dL	0.70 -1.50	;X
eGFR If NonAfricn Am	93		mL/min/1.73	>59	;X
eGFR If Africn Am	107		mL/min/1.73	>59	;X
BUN/Creatinine Ratio	18		ratio	8 -27	;X
Sodium, Serum	137		mEq/L	136 -147	;X
Potassium, Serum	4.1		mEq/L	3.5 -5.3	;X
Chloride, Serum	98		mEq/L	98 -109	;X
Carbon Dioxide, Total	28		mEq/L	20 -29	;X
Calcium, Serum	9.5		mg/dL	8.6 -10.0	;X
Phosphorus, Serum	3.1		mg/dL	2.7 -4.5	;X
Protein, Total, Serum	6.6		g/dL	6.4 -8.3	;X
Albumin, Serum	4.4		g/dL	3.5 -5.2	;X
Globulin, Total	2.2		g/dL	1.5 -4.5	;X
A/G Ratio	2.0			1.1 -2.5	;X
Bilirubin, Total	0.6		mg/dL	0.3 -1.2	;X
Alkaline Phosphatase, S	52	Low	U/L	53 -148	;X
LDH	164		U/L	110 -250	;X

Tests	Result	Flag	Units	Reference Interval	Lab
CMP14+LP+4AC+CBC/D/Plt					
AST (SGOT)	22		U/L	5 -34	:X
ALT (SGPT)	29		U/L	0 -55	:X
Iron, Serum	104		ug/dL	31 -144	:X
Cholesterol, Total	311	High	mg/dL	100 -199	:X
Triglycerides	150		mg/dL	0 -150	:X
HDL Cholesterol	38	Low	mg/dL	> 40	:X
VLDL Cholesterol Cal	30		mg/dL	5 -40	:X
LDL Cholesterol Calc	243	High	mg/dL	< 100	:X
The calculation of LDL-cholesterol and VLDL-Cholesterol are only reliable when the Triglyceride level is less than 400 mg/dL. Likewise, other calculations like LDL/HDL ratio will not be reliable. Therefore, when the triglyceride level is above 400 mg/dL, a reliable LDL concentration will require direct measurement rather than calculation.					
Comment:					:X
T. Chol/HDL Ratio	8.2	High	ratio	0.0 -5.0	:X
WBC	5.7		x10-3	4.4 -11.0	:X
RBC	4.78		x10-6	4.10 -5.60	:X
Hemoglobin	15.6		g/dL	14.0 -18.0	:X
Hematocrit	46.9		%	42.0 -52.0	:X
MCV	98.1	High	fL	80.0 -98.0	:X
MCH	32.6		pg	27.0 -34.0	:X
MCHC	33.3		g/dL	33.0 -37.0	:X
RDW	13.2		%	11.5 -14.5	:X
Platelets	188		x10-3	130 -400	:X
Please note reference interval change					
Neutrophils	51.2		%	42.2 -75.2	:X
Lymphs	38.7		%	20.5 -51.1	:X
Monocytes	7.3		%	1.7 -10.0	:X
Eos	2.1		%	0.0 -10.0	:X
Basos	0.7		%	0.0 -2.0	:X
Neutrophils (Absolute)	2.9		x10-3	1.4 -6.5	:X
Lymphs (Absolute)	2.2		x10-3	1.0 -4.8	:X
Monocytes(Absolute)	0.4		x10-3	0.0 -0.8	:X
Eos (Absolute)	0.1		x10-3	0.0 -0.7	:X
Baso (Absolute)	0.0		x10-3	0.0 -0.2	:X
Hematology Comments:	Comment				:X
	MPV	11.5	H fL	7.4 -10.4	
Testosterone,Free and Total					
Testosterone, Serum	608		ng/dL	348-1197	MB
Comment:	Comment				MB
Adult male reference interval is based on a population of lean males up to 40 years old.					
Free Testosterone(Direct)	11.4		pg/mL	6.8-21.5	BN

FINAL REPORT

LIFE EXTENSION / NATIONAL DIAGNOSTICS, INC

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Tests	Result	Flag	Units	Reference Interval	Lab
<u>TSH</u>					
TSH	1.930		uIU/mL	0.450 -4.500	:X
Comment:					:X
<u>Hemoglobin A1c</u>					
Hemoglobin A1c	5.3		%	4.8 -5.6	:X
<p>Increased risk for diabetes 5.7 - 6.4%</p> <p>Diabetes > 6.4%</p> <p>Glycemic control for adult diabetics < 7.0%</p> <p>The Percent Hemoglobin A1c fraction (%HbA1c) is measured by direct immunoassay of the HbA1c fraction which is then converted to the %HbA1c of total hemoglobin in the sample. The Diabetes Control and Complications Trial found that patient average blood glucose can be roughly estimated from the %HbA1c using the following formula:</p> <p>Average Plasma Glucose = (35.6 x %HbA1c) - 77.3</p> <p>Increased risk for diabetes: 5.7 - 6.4</p> <p>Diabetes: >6.4</p> <p>Glycemic control for adults with diabetes: <7.0</p>					
<u>Thyroxine (T4) Free, Direct, S</u>					
T4,Free(Direct)	1.32		ng/dL	0.82 -1.77	:X
<u>DHEA-Sulfate</u>					
DHEA-Sulfate	500.6	High	ug/dL	71.6-375.4	MB
<u>Cortisol</u>					
Cortisol	17.4		ug/dL	2.3 -19.4	:X
<p>Dexamethasone Clinical Information:</p> <p>Abnormal changes in cortisol levels may be due to hypothalamic, pituitary, or adrenal malfunction. If undiagnosed and untreated, these disorders can lead to severe metabolic imbalance, which may be life-threatening. In the diurnal rhythm of normal individuals, peak levels are seen in the morning (6:00 a.m.) with lowest levels in the late evening (10:00 p.m.). These individuals will also show suppression in response to dexamethasone administration. The dexamethasone suppression tests are the basis for the evaluation and differential diagnosis of patients with Cushing's syndrome. Note: different doses of dexamethasone than that given below may cause results to vary somewhat from that shown. In general however, tumors do not suppress with dexamethasone. Reference Interval: For Cortisol, Serum AM (e.g., 0800 hours) : 4.2-38.4 ug/dL PM (e.g., 2000 hours): 1.7-16.6 ug/dL</p>					
<u>Estradiol</u>					
Estradiol	27		pg/mL	8 -43	:X
<p>Estradiol Reference Ranges</p> <p>Adult Female</p> <p>Follicular 12 - 166 pg/mL</p> <p>Ovulation 86 - 498 pg/mL</p> <p>Luteal 44 - 211 pg/mL</p> <p>post-menopausal <5 - 55 pg/mL</p>					

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Tests	Result	Flag	Units	Reference Interval	Lab
<u>Estradiol</u>					
Estradiol	27		pg/mL	8 -43	:X
	1st Trimester 215 - >4300 pg/ml				
	***Note: The lower functional sensitivity of this Estradiol assay is <5 pg/mL.				
<u>Reverse T3, Serum</u>					
Reverse T3, Serum	14.6		ng/dL	9.2-24.1	BN
<u>Vitamin D, 25-Hydroxy</u>					
Vitamin D, 25-Hydroxy	89.5		ng/mL	30.0-100.0	MB
	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.				
<u>C-Reactive Protein, Cardiac</u>					
C-Reactive Protein, Cardiac	0.4		mg/L	0.0 -3.0	:X
	High Sensitivity (Cardiac) CRP Interpretive Information:				
	Low Risk <1.0 mg/L				
	Average Risk 1.0-3.0 mg/L				
	High Risk >3.0 mg/L				
<u>Progesterone</u>					
Progesterone	1.2		ng/mL	0.2 -1.4	:X
	Male: 0.2 - 1.4				
	Female:				
	Follicular phase 0.2 - 1.5				
	Luteal phase 1.7 - 27.0				
	Ovulation phase 0.8 - 3.0				
	Pregnant				
	First trimester 8.8 - 48.6				
	Second trimester 12.4 - 75.8				
	Third trimester 58.5 - 222.3				
	Postmenopausal 0.1 - 0.8				
	Progesterone analysis is now being done on the fully automated Abbott AxSYM Immunoassay Analyzer. Clinicians should not see a difference in patient results since AxSYM values agree closely with those from the previous manual radioimmunoassay method NORMALS: ng/ml				
	MALES <0.2 - 3.4				
	FEMALES				
	Follicular phase 0.3- 2.6				
	Luteal phase 3.3 - 38.6				
	Mid-Luteal phase 5.2 - 38.6				
	Post Menopausal <0.2 - 0.8				
	PREGNANT FEMALES				

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Tests	Result	Flag	Units	Reference Interval	Lab
<u>Progesterone</u>					
Progesterone	1.2		ng/mL	0.2 -1.4	;X
	First trimester		12.3 - 81.8		
	Second trimester		11.1 - 81.4		
	Third trimester		39.3 - 387.8		
<u>Insulin</u>					
Insulin	4.6		uIU/mL	2.6-24.9	MB
<u>Ferritin, Serum</u>					
Ferritin, Serum	212		ng/mL	28 -365	;X
<u>Triiodothyronine,Free,Serum</u>					
Triiodothyronine,Free,Serum	2.49		pg/mL	2.00 -4.40	;X

Lab	Facility	Director	Phone
;X	LabCorp K 1924 Alcoa Highway, Knoxville, TN,	D, D	877-914-9705
MB	LabCorp B 1801 First Avenue South, Birmingham, AL,	Elgin, Elgin	205-581-3500
BN	LabCorp B 1447 York Court, Burlington, NC,	F, F	800-762-4344

For inquiries, the physician may contact the above locations.

Thank you for ordering your lab tests through Life Extension/National Diagnostics, Inc. If you would like to discuss your results please call us at 1-800-208-3444. In order to ensure your privacy we ask that you have a copy of your results in front of you when making the call, as you will be asked to provide a specimen number or other identifier from the report. Our advisory team WILL NOT be able to review your lab results with you, unless you are able to provide this information from the report. We also understand that there are times when you will want to review a family members blood test results with our staff. Although Life Extension is happy to comply with these requests, permission (either verbally or in writing) must be given by the person who took the blood tests in order for us to do so. Thank you for your cooperation with these policies as we endeavor to keep your blood test results secure.

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First Name	Middle Initial	Phone	Control Number	Account Number	Account Phone Number
Date of Birth	Age	Sex	Fasting	Physician Name	Physician ID
	45	M			
Address			Account Address		
LIFE EXTENSION / NATIONAL DIAGNOSTICS, INC 5990 NORTH FEDERAL HIGHWAY, FT. LAUDERDALE, FL 33308					
Tests Ordered					

FSH and LH

Tests	Result	Flag	Units	Reference Interval	Lab
<u>FSH and LH</u>					
LH	5.1		mIU/mL	1.7-8.6	MB
FSH	5.9		mIU/mL	1.5-12.4	MB

Lab	Facility	Director	Phone
MB	LabCorp B 1801 First Avenue South, Birmingham, AL, For inquiries, the physician may contact the above locations.	Elgin, Elgin	205-581-3500

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			6/16/2014 6:38 AM		
First Name	Middle Initial	Phone	Control Number	Account Number	Account Phone Number
Date of Birth	Age	Sex	Fasting	Physician Name	Physician ID
	45	M			
Address			Account Address		
			LIFE EXTENSION / NATIONAL DIAGNOSTICS, INC		
			5990 NORTH FEDERAL HIGHWAY, FT. LAUDERDALE, FL 33308		
Tests Ordered					

IGF-1

Tests	Result	Flag	Units	Reference Interval	Lab
IGF-1					
Insulin-Like Growth Factor I	202		ng/mL	75-216	BN

Lab	Facility	Director	Phone
BN	LabCorp B	F, F	800-762-4344
	1447 York Court, Burlington, NC,		
	For inquiries, the physician may contact the above locations.		

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