

DOB: 11/08/1972      Age: 39      Specimen: E77817557      Collected: 04/20/2012 07:52      C  
 Sex: M      Fasting: Y      Requisition: 117580001055      Received: 04/20/2012 19:42  
 Report Status: FINAL / SEE REPORT      Reported: 04/24/2012 22:12

FASTING

**▲ LIPID PANEL**

Analyte	Value	Reference Range
<b>▲ CHOLESTEROL</b>	<b>210 H</b>	Reference Range: <200 mg/dL
TRIGLYCERIDE	101	Reference Range: <150 mg/dL
HDL CHOLESTEROL	40	Reference Range: >39 mg/dL
<b>▲ NON-HDL</b>	<b>170 H</b>	Reference Range: <160 mg/dL
<b>▲ LDL CHOLESTEROL, CALC.</b>	<b>150 H</b>	Reference Range: <130 mg/dL
For moderately high risk and high risk cardiac patients reference levels of <100 mg/dl and <70 mg/dl, respectively, should be considered. Circulation 2004; 110:227-239.		
VLDL CHOLESTEROL	17	Reference Range: 0-29 mg/dL
<b>▲ CHOL/HDL RATIO</b>	<b>5.3 H</b>	Reference Range: <5.0

**▲ C-PEPTIDE**

Analyte	Value	Reference Range
<b>▲ C-PEPTIDE</b>	<b>5.2 H</b>	Reference Range: 1.1-4.4 ng/mL
Reference range reflects fasting state.		

**▲ MALE HORMONE PROFILE #1**

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Analyte	Value	Reference Range
<b>▲ WBC</b>	<b>16.4 H</b>	Reference Range: 4.0-11.0 k/mm3
RBC	4.68	Reference Range: 4.30-6.00 m/mm3
HEMOGLOBIN	14.2	Reference Range: 13.0-18.0 g/dL
HEMATOCRIT	43.4	Reference Range: 40.0-53.0 %
MCV	93	Reference Range: 78-100 fL
MCH	30.3	Reference Range: 27.0-34.0 pg
MCHC	32.7	Reference Range: 31.0-37.0 g/dL
RDW(cv)	13.7	Reference Range: 12.1-18.2 %
RDW(sd)	46.2	Reference Range: 36.0-55.0 fL
PLATELET COUNT	413	Reference Range: 130-450 k/mm3
MPV	11.9	Reference Range: 7.5-14.0 fL
SEGMENTED NEUTROPHILS	78	Reference Range: 40-85 %
LYMPHOCYTES	15	Reference Range: 10-45 %
MONOCYTES	7	Reference Range: 3-15 %
EOSINOPHILS	0	Reference Range: 0-7 %
BASOPHILS	0	Reference Range: 0-2 %

<b>▲ ABSOLUTE NEUTROPHIL</b>	<b>12.7 H</b>	Reference Range: 1.6-9.3 k/uL
ABSOLUTE LYMPHOCYTE	<b>2.5</b>	Reference Range: 0.6-5.5 k/uL
ABSOLUTE MONOCYTE	<b>1.1</b>	Reference Range: 0.1-1.6 k/uL
ABSOLUTE EOSINOPHIL	<b>0.0</b>	Reference Range: 0.0-0.7 k/uL
ABSOLUTE BASOPHIL	<b>0.0</b>	Reference Range: 0.0-0.2 k/uL
DIFFERENTIAL TYPE	<b>Automated</b>	

**▲ MALE HORMONE PROFILE #1**

Analyte	Value	
<b>▲ GLUCOSE</b>	<b>106 H</b>	Reference Range: 65-99 mg/dL
Glucose reference range reflects fasting state.		
UREA NITROGEN (BUN)	<b>23</b>	Reference Range: 8-25 mg/dL
CREATININE	<b>1.13</b>	Reference Range: 0.60-1.50 mg/dL
GFR ESTIMATED	<b>81</b>	Reference Range: >60 mL/min/1.73m2
In African Americans, the calculated eGFR should be multiplied by 1.16.		
BUN/CREAT RATIO	<b>20.4</b>	Reference Range: 10.0-28.0
SODIUM	<b>143</b>	Reference Range: 135-145 mmol/L
POTASSIUM	<b>4.4</b>	Reference Range: 3.5-5.2 mmol/L
CHLORIDE	<b>108</b>	Reference Range: 96-110 mmol/L
CARBON DIOXIDE (CO2)	<b>20</b>	Reference Range: 19-31 mmol/L
ANION GAP	<b>15</b>	Reference Range: 4-18
PROTEIN, TOTAL	<b>7.6</b>	Reference Range: 6.0-8.0 g/dL
ALBUMIN	<b>4.6</b>	Reference Range: 3.3-4.9 g/dL
GLOBULIN	<b>3.0</b>	Reference Range: 2.0-3.7 g/dL
ALB/GLOB RATIO	<b>1.5</b>	Reference Range: 1.0-2.0
CALCIUM	<b>9.6</b>	Reference Range: 8.7-10.5 mg/dL
ALKALINE PHOSPHATASE	<b>85</b>	Reference Range: 40-129 IU/L
ALT	<b>36</b>	Reference Range: 2-60 IU/L
AST	<b>19</b>	Reference Range: 10-50 IU/L
BILIRUBIN, TOTAL	<b>0.4</b>	Reference Range: 0.2-1.3 mg/dL

**▲ MALE HORMONE PROFILE #1**

Analyte	Value	
<b>▲ CRP, HIGH SENSITIVITY</b>	<b>4.6 H</b>	Reference Range: <1.0 mg/L
High cardiovascular risk according to AHA/CDC guidelines. Reference range reflects the lowest cardiovascular risk for ages >17 years:		
mg/L	Risk according to AHA/CDC guidelines	
<1.0	Low cardiovascular risk	
1.0-3.0	Average cardiovascular risk	
3.1-10.0	High cardiovascular risk	
>10.0	Persistent elevations may represent non-cardiovascular inflammation	

**MALE HORMONE PROFILE #1**

Analyte	Value
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**HEMOGLOBIN A1c****5.4** Reference Range: <5.7 %

The American Diabetes Association (ADA) guidelines for interpreting Hemoglobin A1c are as follows:

Non-Diabetic patient: <5.7%  
 Increased risk for future Diabetes: 5.7-6.4%  
 ADA diagnostic criteria for Diabetes: >6.4%

Values for patients with Diabetes:  
 Result <7.0% : Meets ADA's recommended goal for therapy.  
 Result 7.0-8.0%: Exceeds ADA's recommended goal.  
 Result >8.0% : ADA recommends reevaluation of therapy.

**ESTIMATED AVERAGE GLUCOSE (eAG)****108****MALE HORMONE PROFILE #1****Analyte****Value****TSH****2.00** Reference Range: 0.45-4.50 mU/L**MALE HORMONE PROFILE #1****Analyte****Value****PSA, TOTAL****0.4** Reference Range: <4.1 ng/mL

Values obtained with different assay methods or kits cannot be used interchangeably. If this has occurred, re-baseline testing may be necessary. This test was performed using the Roche Elecsys method.

The National Comprehensive Cancer Network Clinical Practice Guideline in Oncology (v.1.2005) suggests that PSA values of greater than 2.5 ng/mL, or a change by 0.75 ng/mL or more per year, require additional follow-up including the consideration of biopsy. The PSA, Total and Free can be helpful in determining risk of prostate cancer.

The age/race specific ranges below identify 95% of patients with disease as abnormal (1)(2)(3) (ie, 95% sensitivity). Increased sensitivity generally leads to a higher false positive rate.

Age (yr)	Whites	Blacks ng of PSA/mL	Asians
40-49	<2.5	<2.0	<2.0
50-59	<3.5	<4.0	<3.0
60-69	<4.5	<4.5	<4.0
70-79	<6.5	<5.5	<5.0

**References:**

1. Oesterling JE, et al. JAMA 1993;270:860-4
2. Morgan TO, et al. New Engl Med 1996;335:304-10
3. Oesterling JE, et al. BR J Urol 1995;75:347-53

**▲ MALE HORMONE PROFILE #1****Analyte****Value****▲ TESTOSTERONE, TOTAL****81 L** Reference Range: 280-800 ng/dL

Test 902198 Testosterone, Total LC/MS/MS is recommended for women, children less than 18 years old, and hypogonadal men. Specimen for test number 902198 must be collected in a plain red top tube (no gel barrier tubes).

**MALE HORMONE PROFILE #1****Analyte****Value****ESTRADIOL****17** Reference Range: 8-43 pg/mL**MALE HORMONE PROFILE #1****Analyte****Value****DHEA SULFATE****221** Reference Range: 120-520 ug/dL**MALE HORMONE PROFILE #1****Analyte****Value****VITAMIN B12****755** Reference Range: 243-894 pg/mL**FOLATE****10.4** Reference Range: >7.2 ng/mL

Serum for folate determinations should be collected from fasting persons.

## MALE HORMONE PROFILE #1

Analyte	Value
<b>PROLACTIN</b> Overnight fasting is preferred. Nonfasting samples may have elevated results.	<b>11.5</b> Reference Range: 2.5-22.5 ng/mL

## ▲ MALE HORMONE PROFILE #1

Analyte	Value
<b>▲ VITAMIN D, 25-HYDROXY, TOTAL</b> This assay measures the total sum of Vitamin D2 and Vitamin D3, 25-Hydroxy. Results that the <20 ng/mL are indicative of a Vitamin D deficiency, While levels between 20 ng/mL and 30 ng/mL suggest insufficiency. Optimal levels are >30 ng/mL. All results must be interpreted in conjunction with the patient's clinical presentation and other information available to the physician. A pediatric reference range has not been established. Vitamin D Status                    25 OH Vitamin D Total Result Deficiency                            <20 ng/mL Insufficiency                        20-30 ng/mL Sufficiency                          30-100 ng/mL Toxicity                               >100 ng/mL	<b>15.9 L</b> Reference Range: 30.1-100.0 ng/mL

## MALE HORMONE PROFILE #1

Analyte	Value
<b>DHEA, LCMSMS</b>	<b>117</b> Reference Range: 61-1636 ng/dL

## T4 FREE NON-DIALYSIS

Analyte	Value
<b>T4 FREE NON-DIALYSIS</b>	<b>1.0</b> Reference Range: 0.8-1.7 ng/dL

## INSULIN, FASTING

Analyte	Value
<b>INSULIN, FASTING</b>	<b>18</b> Reference Range: 2-25 uIU/mL

## T3 REVERSE

Analyte	Value
<b>T3 REVERSE</b>	<b>32</b> Reference Range: 11-32 ng/dL

## T3 FREE NON-DIALYSIS

Analyte	Value
<b>T3 FREE NON-DIALYSIS</b>	<b>2.3</b> Reference Range: 2.0-4.8 pg/mL

### Performing Sites

PAZ Sonora Quest Laboratories, 1255 W Washington St, Tempe, AZ 85281  
QN NICHOLS: Quest Nichols Institute, 33608 Ortega Highway, San Juan Capistrano,, CA 92690

### Key

Priority Out of Range    ▲ Out of Range

These results have been sent to the person who ordered the tests. Your receipt of these results should not be viewed as medical advice and is not meant to replace discussion with your doctor or other healthcare professional.  
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