

0; 0; 0; 0; 0; 0; 0; 0; 0; 0; 0; 0; FASTING: YES

▲ TESTOSTERONE, FREE (DIALYSIS), TOTAL (MS) AND SEX HORMONE BINDING GLOBULIN

Analyte	Value	
TESTOSTERONE, TOTAL, MS For additional information, please refer to http://education.questdiagnostics.com/faq/TotalTestosteroneL CMSMS (This link is being provided for informational/educational purposes only.)	1034	Reference Range: 250-1100 ng/dL
▲ TESTOSTERONE, FREE	191.6 H	Reference Range: 35.0-155.0 pg/mL See Note 1
SEX HORMONE BINDING GLOBULIN	52	Reference Range: 22-77 nmol/L

▲ COMPREHENSIVE METABOLIC PANEL

Analyte	Value	
GLUCOSE Fasting reference interval	91	Reference Range: 65-99 mg/dL
▲ UREA NITROGEN (BUN)	34 H	Reference Range: 7-25 mg/dL
CREATININE	0.92	Reference Range: 0.70-1.35 mg/dL
EGFR	92	Reference Range: > OR = 60 mL/min/1.73m ²
▲ BUN/CREATININE RATIO	37 H	Reference Range: 6-22 (calc)
SODIUM	139	Reference Range: 135-146 mmol/L
POTASSIUM	4.3	Reference Range: 3.5-5.3 mmol/L
CHLORIDE	104	Reference Range: 98-110 mmol/L
CARBON DIOXIDE	28	Reference Range: 20-32 mmol/L
CALCIUM	9.2	Reference Range: 8.6-10.3 mg/dL
PROTEIN, TOTAL	6.7	Reference Range: 6.1-8.1 g/dL
ALBUMIN	4.4	Reference Range: 3.6-5.1 g/dL
GLOBULIN	2.3	Reference Range: 1.9-3.7 g/dL (calc)
ALBUMIN/GLOBULIN RATIO	1.9	Reference Range: 1.0-2.5 (calc)
BILIRUBIN, TOTAL	0.5	Reference Range: 0.2-1.2 mg/dL
ALKALINE PHOSPHATASE	56	Reference Range: 35-144 U/L
AST	26	Reference Range: 10-35 U/L
ALT	21	Reference Range: 9-46 U/L

▲ DIHYDROTESTOSTERONE

Analyte	Value
▲ DIHYDROTESTOSTERONE, LC/MS/MS	144 H Reference Range: 12-65 ng/dL See Note 1

▲ CBC (INCLUDES DIFF/PLT)

Analyte	Value
WHITE BLOOD CELL COUNT	4.8 Reference Range: 3.8-10.8 Thousand/uL
RED BLOOD CELL COUNT	4.32 Reference Range: 4.20-5.80 Million/uL
HEMOGLOBIN	14.1 Reference Range: 13.2-17.1 g/dL
HEMATOCRIT	42.4 Reference Range: 38.5-50.0 %
MCV	98.1 Reference Range: 80.0-100.0 fL
MCH	32.6 Reference Range: 27.0-33.0 pg
MCHC	33.3 Reference Range: 32.0-36.0 g/dL
For adults, a slight decrease in the calculated MCHC value (in the range of 30 to 32 g/dL) is most likely not clinically significant; however, it should be interpreted with caution in correlation with other red cell parameters and the patient's clinical condition.	
RDW	13.6 Reference Range: 11.0-15.0 %
PLATELET COUNT	200 Reference Range: 140-400 Thousand/uL
MPV	11.9 Reference Range: 7.5-12.5 fL
ABSOLUTE NEUTROPHILS	1934 Reference Range: 1500-7800 cells/uL
ABSOLUTE LYMPHOCYTES	1536 Reference Range: 850-3900 cells/uL
ABSOLUTE MONOCYTES	581 Reference Range: 200-950 cells/uL
▲ ABSOLUTE EOSINOPHILS	701 H Reference Range: 15-500 cells/uL
ABSOLUTE BASOPHILS	48 Reference Range: 0-200 cells/uL
NEUTROPHILS	40.3 %
LYMPHOCYTES	32.0 %
MONOCYTES	12.1 %
EOSINOPHILS	14.6 %
BASOPHILS	1.0 %

▲ T3, FREE

Analyte	Value
▲ T3, FREE	6.7 H Reference Range: 2.3-4.2 pg/mL

▲ ESTRADIOL

Analyte	Value
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▲ ESTRADIOL

46 H Reference Range: < OR = 39 pg/mL

Reference range established on post-pubertal patient population. No pre-pubertal reference range established using this assay. For any patients for whom low Estradiol levels are anticipated (e.g. males, pre-pubertal children and hypogonadal/post-menopausal females), the Quest Diagnostics Nichols Institute Estradiol, Ultrasensitive, LCMSMS assay is recommended (order code 30289).

Please note: patients being treated with the drug fulvestrant (Faslodex(R)) have demonstrated significant interference in immunoassay methods for estradiol measurement. The cross reactivity could lead to falsely elevated estradiol test results leading to an inappropriate clinical assessment of estrogen status. Quest Diagnostics order code 30289-Estradiol, Ultrasensitive LC/MS/MS demonstrates negligible cross reactivity with fulvestrant.

VITAMIN D,25-OH,TOTAL,IA

Analyte	Value
VITAMIN D,25-OH,TOTAL,IA	93 Reference Range: 30-100 ng/mL
Vitamin D Status	25-OH Vitamin D:
Deficiency:	<20 ng/mL
Insufficiency:	20 - 29 ng/mL
Optimal:	> or = 30 ng/mL

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).

COMMENT

See Note 1

Note 1

For additional information, please refer to <http://education.QuestDiagnostics.com/faq/FAQ199> (This link is being provided for informational/ educational purposes only.)

LIPID PANEL WITH REFLEX TO DIRECT LDL

Analyte	Value
CHOLESTEROL, TOTAL	127 Reference Range: <200 mg/dL
HDL CHOLESTEROL	46 Reference Range: > OR = 40 mg/dL
TRIGLYCERIDES	99 Reference Range: <150 mg/dL
LDL-CHOLESTEROL	63 mg/dL (calc)
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	2.8 Reference Range: <5.0 (calc)

NON HDL CHOLESTEROL

81 Reference Range: <130 mg/dL (calc)

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.

FSH AND LH

Analyte	Value
FSH	4.2 Reference Range: 1.4-12.8 mIU/mL
LH	2.4 Reference Range: 1.6-15.2 mIU/mL

HS CRP

Analyte	Value
HS CRP	1.6 mg/L
Reference Range Optimal <1.0 Jellinger PS et al. Endocr Pract.2017;23(Suppl 2):1-87. 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. Pearson TA, Mensah GA, Alexander RW, et al. Markers of inflammation and cardiovascular disease: application to clinical and public health practice: A statement for healthcare professionals from the Centers for Disease Control and Prevention and the American Heart Association. Circulation 2003; 107(3): 499-511.	

CYSTATIN C WITH eGFR

Analyte	Value
CYSTATIN C	1.20 Reference Range: 0.52-1.20 mg/L
eGFR	60 Reference Range: > OR = 60 mL/min/1.73m2

T4, FREE

Analyte	Value
T4, FREE	1.3 Reference Range: 0.8-1.8 ng/dL

TSH

Analyte	Value
TSH	1.15 Reference Range: 0.40-4.50 mIU/L

HEMOGLOBIN A1c

Analyte	Value
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HEMOGLOBIN A1c

5.6 Reference Range: <5.7 %

For the purpose of screening for the presence of diabetes:

<5.7% Consistent with the absence of diabetes
5.7-6.4% Consistent with increased risk for diabetes (prediabetes)
> or =6.5% Consistent with diabetes

This assay result is consistent with a decreased risk of diabetes.

Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes in children.

According to American Diabetes Association (ADA) guidelines, hemoglobin A1c <7.0% represents optimal control in non-pregnant diabetic patients. Different metrics may apply to specific patient populations. Standards of Medical Care in Diabetes(ADA).

Note 1 This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.



Performing Sites

EN Quest Diagnostics-West Hills, 8401 Fallbrook Ave, West Hills, CA 91304-3226 Laboratory Director: Thomas J McDonald

EZ Quest Diagnostics/Nichols SJC-San Juan Capistrano,, 33608 Ortega Hwy, San Juan Capistrano, CA 92675-2042 Laboratory Director: Irina Maramica MD,PhD,MBA

QAW Quest Diagnostics-Las Vegas - 4230 Burnham, 4230 Burnham Ave, Las Vegas, NV 89119-5408 Laboratory Director: Christine Ruemmler-Gamble

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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