

DOB: [REDACTED]

Patient Report

Patient ID:
Specimen ID: 275-174-1441-0Age: 56
Sex: MaleAccount Number: [REDACTED]
Ordering Physician: [REDACTED]

Date Collected: 10/02/2023

Date Received: 10/02/2023

Date Reported: 10/08/2023

Fasting: Yes

Ordered Items: **CBC With Differential/Platelet; Comp. Metabolic Panel (14); Lipid Panel w/ Chol/HDL Ratio; FSH and LH; Testosterone, Free and Total; Thyroxine (T4) Free, Direct; TSH; Estradiol; IGF-1; Triiodothyronine (T3), Free; Sex Horm Binding Glob, Serum; Drawing Fee; Cardiovascular Report**

Date Collected: 10/02/2023

CBC With Differential/Platelet

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|--------------------------------------|-------------------------|--------------------------|----------|--------------------|
| WBC ⁰¹ | 6.9 | 6.6 06/13/2023 | x10E3/uL | 3.4-10.8 |
| RBC ⁰¹ | 4.95 | 5.15 06/13/2023 | x10E6/uL | 4.14-5.80 |
| Hemoglobin ⁰¹ | 16.1 | 16.0 06/13/2023 | g/dL | 13.0-17.7 |
| Hematocrit ⁰¹ | 46.5 | 46.9 06/13/2023 | % | 37.5-51.0 |
| MCV ⁰¹ | 94 | 91 06/13/2023 | fL | 79-97 |
| MCH ⁰¹ | 32.5 | 31.1 06/13/2023 | pg | 26.6-33.0 |
| MCHC ⁰¹ | 34.6 | 34.1 06/13/2023 | g/dL | 31.5-35.7 |
| RDW ⁰¹ | 13.1 | 12.8 06/13/2023 | % | 11.6-15.4 |
| Platelets ⁰¹ | 259 | 284 06/13/2023 | x10E3/uL | 150-450 |
| Neutrophils ⁰¹ | 52 | 52 06/13/2023 | % | Not Estab. |
| Lymphs ⁰¹ | 36 | 34 06/13/2023 | % | Not Estab. |
| Monocytes ⁰¹ | 9 | 10 06/13/2023 | % | Not Estab. |
| Eos ⁰¹ | 3 | 3 06/13/2023 | % | Not Estab. |
| Basos ⁰¹ | 0 | 1 06/13/2023 | % | Not Estab. |
| Neutrophils (Absolute) ⁰¹ | 3.5 | 3.5 06/13/2023 | x10E3/uL | 1.4-7.0 |
| Lymphs (Absolute) ⁰¹ | 2.5 | 2.2 06/13/2023 | x10E3/uL | 0.7-3.1 |
| Monocytes(Absolute) ⁰¹ | 0.6 | 0.6 06/13/2023 | x10E3/uL | 0.1-0.9 |
| Eos (Absolute) ⁰¹ | 0.2 | 0.2 06/13/2023 | x10E3/uL | 0.0-0.4 |
| Baso (Absolute) ⁰¹ | 0.0 | 0.0 06/13/2023 | x10E3/uL | 0.0-0.2 |
| Immature Granulocytes ⁰¹ | 0 | 0 06/13/2023 | % | Not Estab. |
| Immature Grans (Abs) ⁰¹ | 0.0 | 0.0 06/13/2023 | x10E3/uL | 0.0-0.1 |

Comp. Metabolic Panel (14)

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|-------------------------------------|-------------------------|--------------------------|-------------|--------------------|
| Glucose ⁰¹ | 97 | 105 06/13/2023 | mg/dL | 70-99 |
| BUN ⁰¹ | 10 | 9 06/13/2023 | mg/dL | 6-24 |
| Creatinine ⁰¹ | 1.02 | 1.07 06/13/2023 | mg/dL | 0.76-1.27 |
| eGFR | 86 | 81 06/13/2023 | mL/min/1.73 | >59 |
| BUN/Creatinine Ratio | 10 | 8 06/13/2023 | | 9-20 |
| ▲ Sodium ⁰¹ | 147 High | 139 06/13/2023 | mmol/L | 134-144 |
| Potassium ⁰¹ | 4.9 | 4.1 06/13/2023 | mmol/L | 3.5-5.2 |
| ▲ Chloride ⁰¹ | 107 High | 102 06/13/2023 | mmol/L | 96-106 |
| Carbon Dioxide, Total ⁰¹ | 23 | 21 06/13/2023 | mmol/L | 20-29 |
| Calcium ⁰¹ | 9.4 | 9.5 06/13/2023 | mg/dL | 8.7-10.2 |
| Protein, Total ⁰¹ | 7.3 | 6.8 06/13/2023 | g/dL | 6.0-8.5 |
| Albumin ⁰¹ | 4.8 | 4.6 06/13/2023 | g/dL | 3.8-4.9 |

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Patient ID:
Specimen ID: 275-174-1441-0

DOB: [REDACTED]
Age: 56
Sex: Male

Patient Report

Account Number: [REDACTED]
Ordering Physician: [REDACTED]



Date Collected: 10/02/2023

Comp. Metabolic Panel (14) (Cont.)

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|------------------------------------|-------------------------|--------------------------|-------|--------------------|
| Globulin, Total | 2.5 | 2.2 06/13/2023 | g/dL | 1.5-4.5 |
| A/G Ratio | 1.9 | 2.1 06/13/2023 | | 1.2-2.2 |
| Bilirubin, Total ⁰¹ | 0.5 | 0.6 06/13/2023 | mg/dL | 0.0-1.2 |
| Alkaline Phosphatase ⁰¹ | 89 | 105 06/13/2023 | IU/L | 44-121 |
| ▲ AST (SGOT) ⁰¹ | 41 High | 27 06/13/2023 | IU/L | 0-40 |
| ALT (SGPT) ⁰¹ | 23 | 26 06/13/2023 | IU/L | 0-44 |

Lipid Panel w/ Chol/HDL Ratio

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|----------------------------------|-------------------------|--------------------------|-------|--------------------|
| Cholesterol, Total ⁰¹ | 197 | 182 06/13/2023 | mg/dL | 100-199 |
| Triglycerides ⁰¹ | 77 | 95 06/13/2023 | mg/dL | 0-149 |
| HDL Cholesterol ⁰¹ | 41 | 37 06/13/2023 | mg/dL | >39 |
| VLDL Cholesterol Cal | 14 | 18 06/13/2023 | mg/dL | 5-40 |
| ▲ LDL Chol Calc (NIH) | 142 High | 127 06/13/2023 | mg/dL | 0-99 |
| T. Chol/HDL Ratio | 4.8 | 4.9 06/13/2023 | ratio | 0.0-5.0 |
| Please Note: ⁰¹ | | | | |

| T. Chol/HDL Ratio | | |
|-------------------|------|-------|
| | Men | Women |
| 1/2 Avg. Risk | 3.4 | 3.3 |
| Avg. Risk | 5.0 | 4.4 |
| 2X Avg. Risk | 9.6 | 7.1 |
| 3X Avg. Risk | 23.4 | 11.0 |

FSH and LH

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|--------------------|-------------------------|--------------------------|--------|--------------------|
| ▲ LH ⁰¹ | 17.4 High | 6.4 06/13/2023 | mIU/mL | 1.7-8.6 |
| FSH ⁰¹ | 9.5 | 4.5 02/08/2019 | mIU/mL | 1.5-12.4 |

Testosterone, Free and Total

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|---|-------------------------|--------------------------|-------|--------------------|
| ▲ Testosterone ⁰¹ | 1095 High | 654 06/13/2023 | ng/dL | 264-916 |
| 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) ⁰¹ | 12.9 | 13.1 06/13/2023 | pg/mL | 7.2-24.0 |

Thyroxine (T4) Free, Direct

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|-------------------------------|-------------------------|--------------------------|-------|--------------------|
| T4,Free(Direct) ⁰¹ | 1.20 | 1.29 02/08/2019 | ng/dL | 0.82-1.77 |

TSH

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|-------------------|-------------------------|--------------------------|--------|--------------------|
| TSH ⁰¹ | 3.580 | 3.570 06/13/2023 | uIU/mL | 0.450-4.500 |



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[REDACTED]

Patient ID:
Specimen ID: 275-174-1441-0

DOB: [REDACTED] 6

Age: 56
Sex: Male

Patient Report

Account Number: [REDACTED]
Ordering Physician: [REDACTED]



Date Collected: 10/02/2023

Estradiol

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|---------------------------|--------------------------------------|--------------------------|-------|--------------------|
| ▲ Estradiol ⁰¹ | 67.7 High Roche ECLIA methodology | | pg/mL | 7.6-42.6 |

IGF-1

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|--|-------------------------|--------------------------|-------|--------------------|
| Insulin-Like Growth Factor I ⁰¹ | 148 | 253 06/13/2023 | ng/mL | 68-247 |

Triiodothyronine (T3), Free

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|---|-------------------------|--------------------------|-------|--------------------|
| Triiodothyronine (T3), Free ⁰¹ | 2.7 | 3.1 02/08/2019 | pg/mL | 2.0-4.4 |

Sex Horm Binding Glob, Serum

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|--|-------------------------|--------------------------|--------|--------------------|
| Sex Horm Binding Glob, Serum ⁰¹ | 72.7 | 45.8 06/13/2023 | nmol/L | 19.3-76.4 |

Cardiovascular Report

| Test | Current Result and Flag | Previous Result and Date | Units | Reference Interval |
|------------------------------|---|--------------------------|-------|--------------------|
| Interpretation ⁰² | Note Supplemental report is available. | Note 06/13/2023 | | |
| PDF ⁰² | . | 06/13/2023 | | |

Disclaimer

The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend

▲ Out of Reference Range ■ Critical or Alert

Performing Labs

01: BN - Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD
02: LITNC - Labcorp Clinical / Digital, 10 Moore Drive, Durham, NC 27709-0009 Dir: Jennifer Ennis, MD
For Inquiries, the physician may contact Branch: 800-877-5227 Lab: 800-762-4344

Patient Details

[REDACTED]

Phone: [REDACTED]
Date of Birth: [REDACTED]
Age: 56
Sex: Male
Patient ID:
Alternate Patient ID:

Physician Details

[REDACTED]

Phone: [REDACTED]
Account Number: [REDACTED]
Physician ID:
NPI: 1093940041

Specimen Details

Specimen ID: 275-174-1441-0
Control ID: L2306478194
Alternate Control Number: L2306478194
Date Collected: 10/02/2023 0803 Local
Date Received: 10/02/2023 0000 ET
Date Entered: 10/02/2023 1149 ET
Date Reported: 10/08/2023 0206 ET



[REDACTED]

Patient ID:
Specimen ID: 275-174-1441-0

DOB: [REDACTED]

Age: 56
Sex: Male

Patient Report

Account Number: [REDACTED]
Ordering Physician: [REDACTED]

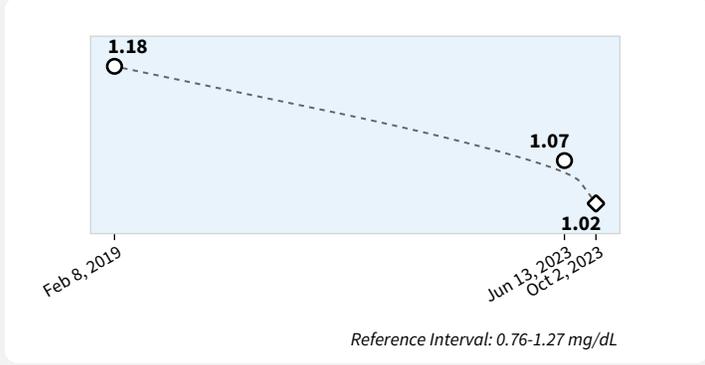


Historical Results & Insights

Labcorp offers historical lab results data with easy-to-interpret visualizations to provide a more complete picture of a patient's lab history and improve patient care.

Creatinine

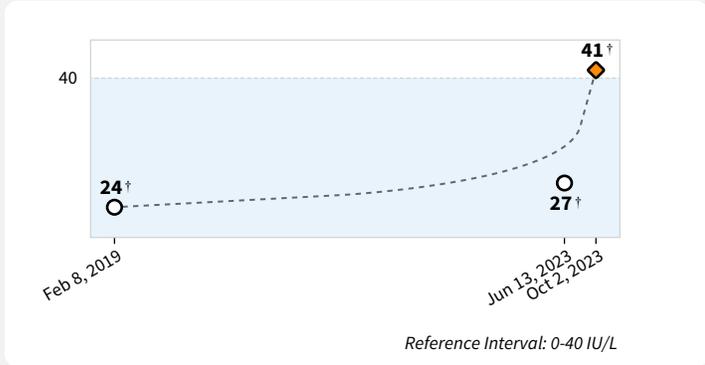
◇ Current Result: 1.02 mg/dL



AST (SGOT)

◇ Current Result: 41 IU/L

HIGH



† Fasting

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Sex: Male

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Ordering Physician: [REDACTED]



Cardiovascular Tests

| Date | Total Chol. | TG | HDL-C | VLDL | LDL-C |
|---------------|-------------|-----------|-----------|-----------|------------|
| 10/02/2023† | 197 | 77 | 41 | 14 | 142 |
| 06/13/2023† | 182 | 95 | 37 | 18 | 127 |
| 02/08/2019† | 175 | 152 | 33 | 30 | 112 |
| Ref. Interval | 100-199 | 0-149 | >39 | 5-40 | 0-99 |
| Units | mg/dL | mg/dL | mg/dL | mg/dL | mg/dL |

† Fasting

Accessions: 27517414410

DISCLAIMER: These assessments and treatment suggestions are provided as a convenience in support of the physician-patient relationship and are not intended to replace the physician's clinical judgment. They are derived from national guidelines in addition to other evidence and expert opinion. The clinician should consider this information within the context of clinical opinion and the individual patient.

SEE GUIDANCE FOR CARDIOVASCULAR REPORT: Grundy SM et al. 2018 Multisociety guideline on the management of blood cholesterol: a report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol 2019; 73: e285-350; Contois et al. Clin Chem 2009; 55(3):407-419; Brunzell et al. Diabetes Care 2008; 31(4):811-82.

Note: Please refer to your LabCorp Report for all results as well as any test-specific and specimen-specific comments.

Laboratory Director's Notes

Laboratory test values flagged with an asterisk (*) within this report refer to the following commentary from our physicians and quality assurance staff.

| COLLECTION DATE | ITEM | RELATED NOTES |
|-----------------|----------------------|---|
| 10/02/2023 | Total Chol:HDL Ratio | T. Chol/HDL Ratio Men Women 1/2 Avg.Risk 3.4 3.3 Avg.Risk 5.0 4.4 2X Avg.Risk 9.6 7.1 3X Avg.Risk 23.4 11.0 |

[REDACTED] MD - Laboratory Director

Current Laboratory Results

Blood Draw Date: 10/02/2023 Date Received: 10/02/2023 Date Completed: 10/03/2023 Fasting: YES

Comp. Metabolic Panel (14)

| ANALYTE | REF. INTERVAL | LOW | HIGH | RESULT |
|------------------------------|---------------|-----|------|--------|
| Glucose mg/dL | 70-99 | | | 97 |
| BUN mg/dL | 6-24 | | | 10 |
| Creatinine mg/dL | 0.76-1.27 | | | 1.02 |
| Sodium mmol/L | 134-144 | | | 147 H |
| Potassium mmol/L | 3.5-5.2 | | | 4.9 |
| Chloride mmol/L | 96-106 | | | 107 H |
| Carbon Dioxide mmol/L | 20-29 | | | 23 |
| Calcium mg/dL | 8.7-10.2 | | | 9.4 |
| Protein, Total, Serum g/dL | 6.0-8.5 | | | 7.3 |
| Albumin g/dL | 3.8-4.9 | | | 4.8 |
| Globulin, Total g/dL | 1.5-4.5 | | | 2.5 |
| A/G Ratio | 1.2-2.2 | | | 1.9 |
| Bilirubin, Total mg/dL | 0.0-1.2 | | | 0.5 |
| Alkaline Phosphatase, S IU/L | 44-121 | | | 89 |
| AST IU/L | 0-40 | | | 41 H |
| ALT IU/L | 0-44 | | | 23 |
| BUN: Creatinine Ratio | 9-20 | | | 10 |
| Anion Gap mmol/L | 10 - 18 | | | 17 |
| estimated GFR mL/min/1.73mE2 | > 59 | | | 86 |

Albumin testing performed on the Roche Modular using the ALB PLUS assay.

Lipid Panel with Chol/HDL Ratio

| ANALYTE | REF. INTERVAL | LOW | HIGH | RESULT |
|----------------------------------|---------------|-----|------|--------|
| Total Cholesterol mg/dL | 100-199 | | | 197 |
| Triglyceride mg/dL | 0-149 | | | 77 |
| HDL-C mg/dL | >39 | | | 41 |
| VLDL mg/dL | 5-40 | | | 14 |
| LDL(calc) mg/dL | 0-99 | | | 142 H |
| non-HDL cholesterol mg/dL | 0 - 129 | | | 156 H |
| Total Chol:HDL Ratio ratio units | 0.0-5 | | | * 4.8 |

Legend for Abnormal Flags:

- L - Below Low Normal LL - Alert Low < - Panic Low A - Abnormal (applies to non-numeric results)
- H - Above High Normal HH - Alert High > - Panic High AA - Critical Abnormal (applies to non-numeric results)

Cardiovascular Report

Patient Assessment

Current available clinical information suggests the patient's risk is at least LOW. One major CHD risk factor is present (age over 45). If the patient has CHD or a CHD risk equivalent, the risk category is high. If patient does not have CHD or a CHD risk equivalent, consider use of the Pooled Cohort Equations to estimate 10-year CVD risk, as individuals with greater than 7.5% risk may warrant more intensive therapy. The calculator can be found at: <http://tools.cardiosource.org/ASCVD-Risk-Estimator/>

Insulin resistance, obesity, excessive alcohol use, smoking, nephrotic syndrome, liver disease, and certain medications can cause secondary dyslipidemia. Consider evaluation if clinically indicated.

Therapeutic lifestyle changes are always valuable to achieve optimal blood lipid status (diet, exercise, weight management).

Lipid Management

Select one patient risk category based upon medical history and clinical judgment. Additional risk factors such as personal or family history of premature CHD, smoking, and hypertension modify a patient's goals of therapy. In CVD prevention, the intensity of therapy should be adjusted to the level of patient risk. MODERATE intensity statin therapy generally results in an average LDL-C reduction of 30% to less than 50% from the untreated baseline. Examples include (daily doses): atorvastatin 10-20 mg, rosuvastatin 5-10 mg, simvastatin 20-40 mg, pravastatin 40-80 mg, lovastatin 40 mg. HIGH intensity statin therapy generally results in an average LDL-C reduction of 50% or more from the untreated baseline. Examples include (daily doses): atorvastatin 40-80 mg and rosuvastatin 20 mg.

▽ = PATIENT'S RESULT

| | Patient Risk Category (select one) | | |
|------------------------------|---|---|---|
| ANALYTE / RESULT | LOW | INTERMEDIATE | HIGH |
| LDL-C 142 mg/dL | | | |
| non-HDL 156 mg/dL | | | |
| Lipid Assessment | LDL-C is acceptable, was 127 and now is 142 mg/dL. Non-HDL Cholesterol is acceptable, was 145 and now is 156 mg/dL. | LDL-C is borderline high, was 127 and now is 142 mg/dL. Non-HDL Cholesterol is acceptable, was 145 and now is 156 mg/dL. | LDL-C is high, was 127 and now is 142 mg/dL. Non-HDL Cholesterol is borderline high, was 145 and now is 156 mg/dL. |
| Treatment Suggestions | Considerations for use of statin therapy include family history of premature atherosclerotic disease, elevated coronary artery calcium score, ankle-brachial index < 0.9, elevated CRP, or elevated 10-year or lifetime CVD risk. | Consider beginning or increasing statin. Factors that may influence statin use include family history of premature atherosclerotic disease, elevated coronary artery calcium score, ankle-brachial index < 0.9, elevated CRP, or elevated 10-year or lifetime CVD risk. If statin cannot be tolerated or increased, alternatives include use of an intestinal agent (ezetimibe or bile acid sequestrant) or niacin. | Begin statin. If statin already in use, consider increasing dose to achieve at least a 50% LDL reduction from baseline. Moderate or high intensity statin is preferred. If statin cannot be tolerated or increased, alternatives include use of an intestinal agent (ezetimibe or bile acid sequestrant) or niacin. |

DISCLAIMER: These assessments and treatment suggestions are provided as a convenience and are neither comprehensive nor intended to replace the physician's clinical judgment. They do not include information such as family history, personal history, or physical findings as would be obtained by the clinician during patient evaluation because LabCorp does not have access to the complete patient medical record.

Patient Results Summary

Cholesterol comes in different forms and has varying effects on your heart health. Some cholesterol is “good” and not known to cause disease, this is HDL. The rest of cholesterol causes disease by clogging your arteries, this is non-HDL. LDL cholesterol is the largest component of the non-HDL cholesterol. Lowering your levels of “bad” cholesterol will lower your risk for disease.

- **LDL cholesterol (LDL-C)** is the largest component of the non-HDL cholesterol (“bad” cholesterol).
- **non-HDL** is composed of many different types of cholesterol (not just LDL-C) and high levels cause disease.

The level to which your LDL must be lowered depends on the risk for developing heart disease or having a heart attack. The higher your risk for heart disease, the lower your LDL goal.

| Contributing Risk Factors For Heart Disease | |
|--|---|
| <input type="checkbox"/> Heart and/or vascular disease | <input type="checkbox"/> Cigarette (tobacco) smoking |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Low HDL (men less than 40 mg/dL, women less than 50 mg/dL) |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Family history of early onset heart disease |
| <input type="checkbox"/> Chronic kidney disease | <input type="checkbox"/> Man over 45 years or woman over 55 years |
| <input type="checkbox"/> Obesity | <input type="checkbox"/> Familial Hypercholesterolemia |

Your Heart Disease Risk Category
Selected by your physician based upon your risk factors and clinical judgement.

| Test / Your Results | <input type="checkbox"/> Low | <input type="checkbox"/> Intermediate | <input type="checkbox"/> High |
|-----------------------------|------------------------------|---------------------------------------|-------------------------------|
| LDL-C 142 mg/dL | | | |
| non-HDL 156 mg/dL | | | |

▽ = Your Result: Left (Green) = Optimal, Center = Acceptable, Right (Red) = High Risk

| Your Care Plan (as selected by your physician) | |
|---|---|
| <input type="checkbox"/> Eat less trans fats and saturated fats, red meat, and sugary foods/drinks | <input type="checkbox"/> Control any other medical conditions: such as diabetes, high blood pressure |
| <input type="checkbox"/> Eat more vegetables, fruits, whole grains, low-fat dairy products, poultry, fish, and nuts | <input type="checkbox"/> Visit your doctor as scheduled and obtain all follow-up tests/treatments recommended |
| <input type="checkbox"/> Exercise | <input type="checkbox"/> Take all of your medications your doctor(s) have prescribed |
| <input type="checkbox"/> Lose weight | <input type="checkbox"/> |

Disclaimer: You should discuss this information with your physician. Labcorp does not have a doctor-patient relationship with you, nor does it have access to a complete medical history or physical examination conducted by a physician that would be necessary for a complete diagnosis and comprehensive treatment plan. Neither you nor your physician should rely solely on this guidance. Bolded result descriptions in “Comments” consider either the reference range or target range for the test result. Reference range refers to the Labcorp reference interval. Target range refers to the guideline-suggested goal. REFERENCES: National Kidney Foundation Kidney Disease Outcomes Quality Initiative (KDOQI) at www.kidney.org and Kidney Disease Improve Global Outcomes (KDIGO) at http://kdigo.org. Adapted from: https://www.niddk.nih.gov/-/media/Files/Health-Information/Health-Professionals/Kidney-Disease/Your_Kidney_Test_Results_EN.pdf