

Date Collected: 11/01/2023

Date Received: 11/01/2023

Date Reported: 11/05/2023

Fasting: Yes

Ordered Items: CMP14+LP+CBC/D/Plt+T4+TSH+P...; Iron and TIBC; Prolactin; Ferritin; Drawing Fee

Date Collected: 11/01/2023

CMP14+LP+CBC/D/Plt+T4+TSH+P...

Test	Current Result and Flag		Previous Result and Date	Units	Reference Interval
▲ Glucose ⁰¹	131	High		mg/dL	70-99
Hemoglobin A1c ⁰¹	5.4			%	4.8-5.6
Please Note: ⁰¹	Prediabetes: 5.7 - 6.4 Diabetes: >6.4 Glycemic control for adults with diabetes: <7.0				
BUN ⁰¹	16			mg/dL	6-24
Creatinine ⁰¹	0.79			mg/dL	0.76-1.27
eGFR	114			mL/min/1.73	>59
BUN/Creatinine Ratio	20				9-20
Sodium ⁰¹	144			mmol/L	134-144
Potassium ⁰¹	4.3			mmol/L	3.5-5.2
Chloride ⁰¹	102			mmol/L	96-106
Carbon Dioxide, Total ⁰¹	26			mmol/L	20-29
Calcium ⁰¹	9.7			mg/dL	8.7-10.2
Protein, Total ⁰¹	6.7			g/dL	6.0-8.5
Albumin ⁰¹	4.6			g/dL	4.1-5.1
Globulin, Total	2.1			g/dL	1.5-4.5
A/G Ratio	2.2				1.2-2.2
Bilirubin, Total ⁰¹	0.4			mg/dL	0.0-1.2
Alkaline Phosphatase ⁰¹	99			IU/L	44-121
AST (SGOT) ⁰¹	30			IU/L	0-40
ALT (SGPT) ⁰¹	33			IU/L	0-44
▲ Vitamin B12 ⁰¹	1852	High		pg/mL	232-1245
Vitamin D, 25-Hydroxy ⁰¹	35.6			ng/mL	30.0-100.0
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.					
Cholesterol, Total ⁰¹	168			mg/dL	100-199
Triglycerides ⁰¹	147			mg/dL	0-149
HDL Cholesterol ⁰¹	48			mg/dL	>39
VLDL Cholesterol Cal	26			mg/dL	5-40

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CMP14+LP+CBC/D/Plt+T4+TSH+P... (Cont.)

LDL Chol Calc (NIH)	94		mg/dL	0-99
LDL/HDL Ratio	2.0		ratio	0.0-3.6
Please Note: ⁰¹				
			LDL/HDL Ratio	
			Men	Women
		1/2 Avg.Risk	1.0	1.5
		Avg.Risk	3.6	3.2
		2X Avg.Risk	6.2	5.0
		3X Avg.Risk	8.0	6.1
▲ TSH ⁰¹	4.790	High	uIU/mL	0.450-4.500
Thyroxine (T4) ⁰¹	7.1		ug/dL	4.5-12.0
Triiodothyronine (T3) ⁰¹	150		ng/dL	71-180
Triiodothyronine (T3), Free ⁰¹	4.1		pg/mL	2.0-4.4
T4,Free(Direct) ⁰¹	1.12		ng/dL	0.82-1.77
Prostate Specific Ag ⁰¹	0.3		ng/mL	0.0-4.0
	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.			
Cortisol ⁰¹	11.8		ug/dL	6.2-19.4
		Please Note: The reference interval and flagging for this test is for an AM collection. If this is a PM collection please use: Cortisol PM: 2.3-11.9		
Insulin-Like Growth Factor I ⁰²	101		ng/mL	84-270
▼ Testosterone ⁰¹	67	Low	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) ⁰²	2.4	Low	pg/mL	6.8-21.5
LH ⁰¹	2.7		mIU/mL	1.7-8.6
FSH ⁰¹	4.1		mIU/mL	1.5-12.4
DHEA-Sulfate ⁰¹	198.0		ug/dL	102.6-416.3
Sex Horm Binding Glob, Serum ⁰¹	21.8		nmol/L	16.5-55.9
▼ Estradiol ⁰¹	<5.0	Low	pg/mL	7.6-42.6
	Roche ECLIA methodology			
▲ Insulin ⁰¹	89.2	High	uIU/mL	2.6-24.9
⁰¹				
CBC, Platelet Ct, and Diff ⁰¹				
WBC ⁰¹	6.5		x10E3/uL	3.4-10.8
RBC ⁰¹	4.82		x10E6/uL	4.14-5.80
Hemoglobin ⁰¹	15.0		g/dL	13.0-17.7
Hematocrit ⁰¹	43.4		%	37.5-51.0

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CMP14+LP+CBC/D/Plt+T4+TSH+P... (Cont.)

MCV ⁰¹	90	fL	79-97
MCH ⁰¹	31.1	pg	26.6-33.0
MCHC ⁰¹	34.6	g/dL	31.5-35.7
RDW ⁰¹	11.9	%	11.6-15.4
Platelets ⁰¹	277	x10E3/uL	150-450
Neutrophils ⁰¹	39	%	Not Estab.
Lymphs ⁰¹	45	%	Not Estab.
Monocytes ⁰¹	13	%	Not Estab.
Eos ⁰¹	2	%	Not Estab.
Basos ⁰¹	1	%	Not Estab.
Neutrophils (Absolute) ⁰¹	2.6	x10E3/uL	1.4-7.0
Lymphs (Absolute) ⁰¹	2.9	x10E3/uL	0.7-3.1
Monocytes(Absolute) ⁰¹	0.8	x10E3/uL	0.1-0.9
Eos (Absolute) ⁰¹	0.1	x10E3/uL	0.0-0.4
Baso (Absolute) ⁰¹	0.0	x10E3/uL	0.0-0.2
Immature Granulocytes ⁰¹	0	%	Not Estab.
Immature Grans (Abs) ⁰¹	0.0	x10E3/uL	0.0-0.1

Iron and TIBC

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Iron Bind.Cap.(TIBC)	296		ug/dL	250-450
UIBC ⁰¹	171		ug/dL	111-343
Iron ⁰¹	125		ug/dL	38-169
Iron Saturation	42		%	15-55

Prolactin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Prolactin ⁰¹	12.2		ng/mL	4.0-15.2

Ferritin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Ferritin ⁰¹	210		ng/mL	30-400

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: CB - Labcorp Dublin, 6370 Wilcox Road, Dublin, OH 43016-1269 Dir: Vincent Ricchiuti, PhD
02: BN - Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD
For Inquiries, the physician may contact Branch: 800-877-5227 Lab: 800-282-7300

Patient Details Keffer, Kelley L 504 GALE RD, PEARISBURG, VA, 24134 Phone: 540-922-7020 Date of Birth: 10/30/1982 Age: 41 Sex: Male Patient ID: Alternate Patient ID:	Physician Details K KACPRZAK CORE MEDICAL 101 PLAZA REAL S STE A, Boca Raton, FL, 33432 Phone: 561-571-3321 Account Number: 09035220 Physician ID: NPI: 1952364523	Specimen Details Specimen ID: 305-305-2053-0 Control ID: L2307388902 Alternate Control Number: L2307388902 Date Collected: 11/01/2023 0846 Local Date Received: 11/01/2023 0000 ET Date Entered: 11/01/2023 1120 ET Date Reported: 11/05/2023 0637 ET
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