

Emily Miller, ND

Patient Information: LINDGREN, ERIC

Account: 12977
ID/MR#: 64af58577e3d41160ef4662e
Patient Lab ID:

Collected: 12/20/2024 11:13 AM
Received: 12/20/2024 03:03 PM
Reported: 12/30/2024 04:45 PM

Order #: 6802860 / NL108035947
DOB: 01/11/1983 Age: 41Y-11M-9D
Sex: M Fasting: No
Patient Phone: 617-487-2805

TEST	RESULTS	REFERENCE RANGES	UNITS	PL
------	---------	------------------	-------	----

HEMATOLOGY

CBC w/ Differential, w/ Platelet

WBC	4.1	4.0 - 11.0	k/mm3	TC
RBC	4.64	4.30 - 6.00	m/mm3	TC
Hemoglobin	13.8	13.5 - 17.0	g/dL	TC
Hematocrit	41.7	40.0 - 53.0	%	TC
MCV	89.9	78.0 - 100.0	fL	TC
MCH	29.7	27.0 - 34.0	pg	TC
MCHC	33.1	31.0 - 37.0	g/dL	TC
Platelet Count	103 L	130 - 450	k/mm3	TC
RDW(sd)	39.8	38.0 - 49.0	fL	TC
RDW(cv)	12.1	11.0 - 15.0	%	TC
MPV	13.9 H	9.0 - 12.0	fL	TC
Segmented Neutrophils	52.8*		%	TC
Lymphocytes	34.5		%	TC
Monocytes	8.1		%	TC
Eosinophils	3.9		%	TC
Basophils	0.5		%	TC
Absolute Neutrophil	2.2	1.5 - 7.8	k/uL	TC
Absolute Lymphocyte	1.4	0.9 - 3.9	k/uL	TC
Absolute Monocyte	0.3	0.2 - 1.0	k/uL	TC
Absolute Eosinophil	0.2	0.0 - 0.6	k/uL	TC
Absolute Basophil	0.0	0.0 - 0.2	k/uL	TC
Immature Granulocytes	0.2		%	TC
Absolute Immature Granulocytes	0.0	0.0 - 0.1	k/uL	TC
NRBC RE, Nucleated Red Blood Cell	0.0	0.0 - 1.0	%	TC

Percent
*Segmented Neutrophils: Automated Diff

CHEMISTRY

Uric Acid	6.1	3.7 - 7.7	mg/dL	TC
Phosphorus (Inorganic)	3.4	2.4 - 4.8	mg/dL	TC
GGT	25	5 - 91	IU/L	TC
Lactate Dehydrogenase	188	112 - 245	IU/L	TC
Magnesium	2.4	1.5 - 2.5	mg/dL	TC
Amylase	55	31 - 107	IU/L	TC

Note: New reference range effective 10/04/2021.

Emily Miller, ND

Patient Information: LINDGREN, ERIC

Account: 12977 Collected: 12/20/2024 11:13 AM Order #: 6802860 / NL108035947
ID/MR#: Received: 12/20/2024 03:03 PM DOB: 01/11/1983 Age: 41Y-11M-9D
Patient Lab ID: Reported: 12/30/2024 04:45 PM Sex: M Fasting: No
64af58577e3d41160ef4662e Patient Phone: 617-487-2805

Thyroxine (T4)	7.5	4.9 - 11.1	ug/dL	TC
T3 Total	95	80 - 200	ng/dL	TC
CRP, High Sensitivity	2.1 H	≤0.9	mg/L	TC

Average cardiovascular risk according to AHA/CDC guidelines.
CRP, High Sensitivity Reference Range reflects the lowest cardiovascular risk for ages >17 years:
mg/L Risk according to AHA/CDC guidelines
≤0.9 Low cardiovascular risk
1.0-3.0 Average cardiovascular risk
3.1-10.0 High cardiovascular risk
≥10.1 Persistent elevations may represent non-cardiovascular inflammation
Significant decreases in C-reactive protein may be observed in patients treated with carboxypenicillins.

Homocysteine	10.1	≤12.0	umol/L	TC
Elevated homocysteine levels are a risk factor for vascular disease. The relative risk increases as the homocysteine concentration increases. It is recommended to maintain homocysteine levels below 10 umol/L in patients with vascular disease.				

TSH, High Sensitivity	3.28	0.27 - 4.20	mU/L	TC
T3 Free Non-Dialysis	3.0	2.0 - 4.8	pg/mL	TC
Ferritin	217	25 - 506	ng/mL	TC
Vitamin B12	653	232 - 1245	pg/mL	TC
Folate	8.3	≥4.0	ng/mL	TC
Serum for folate determinations should be collected as a fasting test.				

Insulin, Fasting	11	2 - 25	uIU/mL	
Thyroid Peroxidase Antibodies	<9.0	≤34.0	IU/mL	
Thyroglobulin Antibodies	<0.9	≤3.9	IU/mL	
Thyroglobulin antibodies are performed on the Beckman Coulter DxI using a paramagnetic particle chemiluminescent immunoassay method.				

Iodine, Serum and Plasma	84	40 - 92	mcg/L	
This test was developed and its performance characteristics determined by Sonora Quest Laboratories. It has not been cleared or approved by the FDA. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.				

Selenium, Plasma/Serum	101	63-160	mcg/L	SL
(Note) 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. MDF med fusion				

Emily Miller, ND

Patient Information: LINDGREN, ERIC

Account: 12977
ID/MR#: 64af58577e3d41160ef4662e
Patient Lab ID: 64af58577e3d41160ef4662e

Collected: 12/20/2024 11:13 AM
Received: 12/20/2024 03:03 PM
Reported: 12/30/2024 04:45 PM

Order #: 6802860 / NL108035947
DOB: 01/11/1983 Age: 41Y-11M-9D
Sex: M Fasting: No
Patient Phone: 617-487-2805

2501 South State Highway 121,Suite 1100
Lewisville TX 75067
972-966-7300
Ithiel James L. Frame, MD, PhD

T3 Reverse, LC/MS/MS118-25ng/dLNL

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

Iron and TIBC

Iron	68*	40 - 190	ug/dL	TC
TIBC	286	250 - 400	ug/dL	TC
% Saturation	24	15 - 45	%	TC

*Iron: The normal range is based on fasting specimens drawn before 10:00 AM. Iron levels have a diurnal fluctuation of up to 30%, peaking in the morning hours.

Comprehensive Metabolic Panel

Glucose	93*	70 - 99	mg/dL	TC
Urea Nitrogen (BUN)	24 H	7 - 21	mg/dL	TC
Creatinine	0.86	0.68 - 1.37	mg/dL	TC
eGFRcr CKD-EPI	111*	≥60	mL/min/1.73m2	TC
BUN/Creatinine Ratio	27.9	10.0 - 28.0		TC
Sodium	142	135 - 145	mmol/L	TC
Potassium	4.4	3.6 - 5.3	mmol/L	TC
Chloride	107	98 - 108	mmol/L	TC
Carbon Dioxide (CO2)	26	20 - 31	mmol/L	TC
Anion Gap	8	4 - 18		TC
Protein, Total	6.6	6.3 - 8.0	g/dL	TC
Albumin	4.2	3.8 - 5.1	g/dL	TC
Globulin	2.4	1.7 - 3.3	g/dL	TC
Albumin/Globulin Ratio	1.7	1.3 - 2.7		TC
Calcium	9.0	8.7 - 10.4	mg/dL	TC
Alkaline Phosphatase	104	40 - 140	IU/L	TC
Alanine Aminotransferase	43	5 - 60	IU/L	TC
Aspartate Aminotransferase	25	12 - 47	IU/L	TC
Bilirubin, Total	0.3	≤1.2	mg/dL	TC

*Glucose: Glucose reference range reflects fasting state.
*eGFRcr CKD-EPI: eGFRcr calculated using the CKD-EPI 2021 equation

Lipid Panel

Cholesterol	153	≤199	mg/dL	TC
-------------	-----	------	-------	----

Emily Miller, ND

Patient Information: LINDGREN, ERIC

Account: 12977 Collected: 12/20/2024 11:13 AM Order #: 6802860 / NL108035947
ID/MR#: Received: 12/20/2024 03:03 PM DOB: 01/11/1983 Age: 41Y-11M-9D
Patient Lab ID: Reported: 12/30/2024 04:45 PM Sex: M Fasting: No
64af58577e3d41160ef4662e Patient Phone: 617-487-2805

Triglycerides	55	≤149	mg/dL	TC
Cholesterol/HDL Ratio	3.6	≤4.9		TC
HDL Cholesterol	42	≥40	mg/dL	TC
Non-HDL Cholesterol	111	≤129	mg/dL	TC
LDL Cholesterol, Calculated	99*	≤99	mg/dL	TC
VLDL Cholesterol	12	≤29	mg/dL	TC
*LDL Cholesterol, Calculated:	LDL-C is calculated by using the Martin-Hopkins equation. (JAMA. 2013;310(19):2061-2068) 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.			

Hemoglobin A1c With eAG*

Hemoglobin A1c	5.9 H *	≤5.6	%	TC
Estimated Average Glucose (eAG)	123	Not Established		TC
*Hemoglobin A1c:	The American Diabetes Association (ADA) guidelines for interpreting Hemoglobin A1c are as follows: Non-Diabetic patient: ≤5.6% Increased risk for future Diabetes: 5.7-6.4% ADA diagnostic criteria for Diabetes: ≥6.5% For most patients, a reasonable goal for therapy is <7%. For patients with limited life expectancy or where the harms of treatment are greater than the benefits, a goal of <8% may be more appropriate. In pregnant patients, a more stringent goal of <6% may be appropriate or <7% if there is a risk of hypoglycemia. Diabetes Care. 2023; 46(Suppl 1):S254-S266.			
*Hemoglobin A1c With eAG:	If the presence of a hemoglobin variant is suspected, do not use % HbA1c results for diagnosis of diabetes mellitus. In uncontrolled diabetics, high levels of Hemoglobin F (Hb F) may be present. Presence of Hb F greater than 7% of total may result in lower than expected % HbA1c. Any cause that shortens erythrocyte survival or decreases mean erythrocyte age may reduce expected % HbA1c values even in the presence of elevated average blood glucose. Causes may include hemolytic disease, homozygous sickle cell trait, pregnancy, and recent significant/chronic blood loss. In addition, recent blood transfusions can alter expected % HbA1c values.			

Vitamin D, 25-Hydroxy D2/D3, LC/MS/MS

Vitamin D, 25-OH, D2	<4*	Not established	ng/mL
Vitamin D, 25-OH, D3	35*	Not established	ng/mL
Vitamin D, 25-OH, Total	35*	≥20	ng/mL
*All Tests	This test was developed and its performance characteristics determined by Sonora Quest Laboratories. It has not been cleared or approved by the FDA. The laboratory is regulated under CLIA as qualified to perform high-complexity testing. This test is used for clinical purposes. It should not be regarded as investigational or for research.		

Emily Miller, ND

Patient Information: LINDGREN, ERIC

Account: 12977 Collected: 12/20/2024 11:13 AM Order #: 6802860 / NL108035947
ID/MR#: Received: 12/20/2024 03:03 PM DOB: 01/11/1983 Age: 41Y-11M-9D
Patient Lab ID: Reported: 12/30/2024 04:45 PM Sex: M Fasting: No
64af58577e3d41160ef4662e Patient Phone: 617-487-2805

*Vitamin D, 25-OH, Total: Vitamin D, 25-OH, Total:
 <10 ng/mL Severe Deficiency
 10 - 19 ng/mL Mild/Moderate Deficiency
 20 - 50 ng/mL Optimum
 51 - 150 ng/mL Increased Risk of Hypercalciuria
 >150 ng/mL Possible Toxicity

Reference intervals apply to males and females, all ages.
Clinical decision values based on 2011 report by the Institute of Medicine (US).

Tests Ordered: Comprehensive Metabolic Panel; Iron and TIBC; Lipid Panel; Amylase; CBC w/ Differential, w/ Platelet; CRP, High Sensitivity; Folate; GGT; Hemoglobin A1c With eAG; Lactate Dehydrogenase; Thyroxine (T4); TSH, High Sensitivity; Uric Acid; Vitamin B12; Vitamin D, 25-Hydroxy D2/D3, LC/MS/MS; Ferritin; Homocysteine; Insulin, Fasting; Iodine, Serum and Plasma; Magnesium; Thyroid Peroxidase Antibodies; Phosphorus (Inorganic); Selenium, Plasma/Serum; T3 Free Non-Dialysis; T3 Reverse, LC/MS/MS; T3 Total; Thyroglobulin Antibodies

Values Outside of Reference Range			
TEST	RESULTS	REFERENCE RANGES	UNITS
Platelet Count	103 L	130 - 450	k/mm3
MPV	13.9 H	9.0 - 12.0	fL
CRP, High Sensitivity	2.1 H	≤0.9	mg/L
Urea Nitrogen (BUN)	24 H	7 - 21	mg/dL
Hemoglobin A1c	5.9 H	≤5.6	%

Values listed above may not include all results considered abnormal for this patient (e.g., text-only results, such as those for some pathology/cytology specimens, and results for analytes without established reference ranges will not appear). Always review the entire patient report and correlate all results with the patient's clinical condition.

Unless otherwise noted, testing performed by: Sonora Quest Laboratories, 424 S 56th St, Phoenix, AZ 85034 800.766.6721
Testing noted as TC performed by: Sonora Quest Laboratories of Tucson, 630 N Alvernon Way, Tucson, AZ 85711 800.266.8101
Testing noted as SL performed by: Quest Diagnostics Nichols Institute (Valencia), 27027 Tourney Road, Valencia, CA 91355 800.421.4449
Testing noted as NL performed by: Quest Diagnostics Nichols Institute (SJC), 33608 Ortega Hwy, San Juan Capistrano, CA 92690 800.642.4657

End of Report