

DOB: [REDACTED] Age: 34  
 Sex: M Fasting: Y  
 Phone: [REDACTED]

Collected: 04/29/2024 13:10  
 Received: 04/29/2024 13:11  
 Reported: 04/29/2024 23:58

FASTING: YES

**COMPREHENSIVE METABOLIC PANEL**

Analyte	Value	
<b>GLUCOSE</b> Fasting reference interval	<b>89</b>	Reference Range: 65-99 mg/dL
<b>UREA NITROGEN (BUN)</b>	<b>14</b>	Reference Range: 7-25 mg/dL
<b>CREATININE</b>	<b>1.07</b>	Reference Range: 0.60-1.26 mg/dL
<b>EGFR</b>	<b>93</b>	Reference Range: > OR = 60 mL/min/1.73m2
<b>BUN/CREATININE RATIO</b> Not Reported: BUN and Creatinine are within reference range.	<b>SEE NOTE:</b>	Reference Range: 6-22 (calc)
<b>SODIUM</b>	<b>141</b>	Reference Range: 135-146 mmol/L
<b>POTASSIUM</b>	<b>4.1</b>	Reference Range: 3.5-5.3 mmol/L
<b>CHLORIDE</b>	<b>105</b>	Reference Range: 98-110 mmol/L
<b>CARBON DIOXIDE</b>	<b>29</b>	Reference Range: 20-32 mmol/L
<b>CALCIUM</b>	<b>9.4</b>	Reference Range: 8.6-10.3 mg/dL
<b>PROTEIN, TOTAL</b>	<b>6.9</b>	Reference Range: 6.1-8.1 g/dL
<b>ALBUMIN</b>	<b>4.5</b>	Reference Range: 3.6-5.1 g/dL
<b>GLOBULIN</b>	<b>2.4</b>	Reference Range: 1.9-3.7 g/dL (calc)
<b>ALBUMIN/GLOBULIN RATIO</b>	<b>1.9</b>	Reference Range: 1.0-2.5 (calc)
<b>BILIRUBIN, TOTAL</b>	<b>0.8</b>	Reference Range: 0.2-1.2 mg/dL
<b>ALKALINE PHOSPHATASE</b>	<b>76</b>	Reference Range: 36-130 U/L
<b>AST</b>	<b>18</b>	Reference Range: 10-40 U/L
<b>ALT</b>	<b>19</b>	Reference Range: 9-46 U/L

**VITAMIN D,25-OH,TOTAL,IA**

Analyte	Value	
<b>VITAMIN D,25-OH,TOTAL,IA</b> Vitamin D Status                      25-OH Vitamin D:	<b>31</b>	Reference Range: 30-100 ng/mL
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).

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**VITAMIN D,25-OH,TOTAL,IA**

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.)

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**HEMOGLOBIN A1c**

Analyte	Value
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<b>HEMOGLOBIN A1c</b>	<b>5.1</b> Reference Range: <5.7 % of total Hgb
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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).

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**HEMOGLOBIN A1c**

This test was performed on the Roche cobas c503 platform. Effective 11/13/23, a change in test platforms from the Abbott Architect to the Roche cobas c503 may have shifted HbA1c results compared to historical results. Based on laboratory validation testing conducted at Quest, the Roche platform relative to the Abbott platform had an average increase in HbA1c value of < or = 0.3%. This difference is within accepted variability established by the National Glycohemoglobin Standardization Program. Note that not all individuals will have had a shift in their results and direct comparisons between historical and current results for testing conducted on different platforms is not recommended.

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**LIPID PANEL, STANDARD**

Analyte	Value
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<b>CHOLESTEROL, TOTAL</b>	<b>122</b> Reference Range: <200 mg/dL
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<b>HDL CHOLESTEROL</b>	<b>40</b> Reference Range: > OR = 40 mg/dL
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<b>TRIGLYCERIDES</b>	<b>48</b> Reference Range: <150 mg/dL
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<b>LDL-CHOLESTEROL</b>	<b>68</b> mg/dL (calc)
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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>)

<b>CHOL/HDLC RATIO</b>	<b>3.1</b> Reference Range: <5.0 (calc)
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**NON HDL CHOLESTEROL****82** 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.

**CBC (INCLUDES DIFF/PLT)**

Analyte	Value	
WHITE BLOOD CELL COUNT	<b>5.0</b>	Reference Range: 3.8-10.8 Thousand/uL
RED BLOOD CELL COUNT	<b>5.21</b>	Reference Range: 4.20-5.80 Million/uL
HEMOGLOBIN	<b>16.1</b>	Reference Range: 13.2-17.1 g/dL
HEMATOCRIT	<b>46.9</b>	Reference Range: 38.5-50.0 %
MCV	<b>90.0</b>	Reference Range: 80.0-100.0 fL
MCH	<b>30.9</b>	Reference Range: 27.0-33.0 pg
MCHC	<b>34.3</b>	Reference Range: 32.0-36.0 g/dL
RDW	<b>12.9</b>	Reference Range: 11.0-15.0 %
PLATELET COUNT	<b>234</b>	Reference Range: 140-400 Thousand/uL
MPV	<b>9.5</b>	Reference Range: 7.5-12.5 fL
ABSOLUTE NEUTROPHILS	<b>2430</b>	Reference Range: 1500-7800 cells/uL
ABSOLUTE LYMPHOCYTES	<b>1990</b>	Reference Range: 850-3900 cells/uL
ABSOLUTE MONOCYTES	<b>420</b>	Reference Range: 200-950 cells/uL
ABSOLUTE EOSINOPHILS	<b>130</b>	Reference Range: 15-500 cells/uL
ABSOLUTE BASOPHILS	<b>30</b>	Reference Range: 0-200 cells/uL
NEUTROPHILS	<b>48.6</b>	%
LYMPHOCYTES	<b>39.8</b>	%
MONOCYTES	<b>8.4</b>	%
EOSINOPHILS	<b>2.6</b>	%
BASOPHILS	<b>0.6</b>	%

**TSH W/REFLEX TO FT4**

Analyte	Value	
TSH W/REFLEX TO FT4	<b>0.95</b>	Reference Range: 0.40-4.50 mIU/L

**Performing Sites**

UL Quest Diagnostics-Sacramento - Northgate, 3714 Northgate Blvd, Sacramento, CA 95834-1617 Laboratory Director: M. Rose Akin, M.D., FCAP

**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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