

Sample results. Actual results may vary.

PATIENT INFORMATION

REPORT STATUS: FINAL

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CLIENT INFORMATION



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SPECIMEN INFORMATION

SPECIMEN:

REQUISITION:

LAB REF NO:

DOB:

AGE:

GENDER:

FASTING:

Clinical Info:

COLLECTED:

RECEIVED:

REPORTED:

Test Name	Result	Flag	Reference Range	Lab
LIPID PANEL				
CHOLESTEROL, TOTAL	162		125-200 mg/dL	EN
HDL CHOLESTEROL	54		> OR = 40 mg/dL	EN
TRIGLYCERIDES	79		<150 mg/dL	EN
LDL-CHOLESTEROL	92		<130 mg/dL (calc)	EN
Desirable range <100 mg/dL for patients with CHD or diabetes and <70 mg/dL for diabetic patients with known heart disease.				
CHOL/HDL C RATIO	3.0		< OR = 5.0 (calc)	EN
NON HDL CHOLESTEROL	108		mg/dL (calc)	EN
Target for non-HDL cholesterol is 30 mg/dL higher than LDL cholesterol target.				
DHEA SULFATE				
DHEA SULFATE	187		25-240 mcg/dL	EN
VITAMIN B12				
VITAMIN B12	415		200-1100 pg/mL	EN
COMPREHENSIVE METABOLIC PANEL				
GLUCOSE	70		65-99 mg/dL	EN
Fasting reference interval				
UREA NITROGEN (BUN)	13		7-25 mg/dL	EN
CREATININE	0.85		0.70-1.33 mg/dL	EN
For patients >49 years of age, the reference limit for Creatinine is approximately 13% higher for people identified as African-American.				
eGFR NON-AFR. AMERICAN	100		> OR = 60 mL/min/1.73m2	EN
eGFR AFRICAN AMERICAN	116		> OR = 60 mL/min/1.73m2	EN
BUN/CREATININE RATIO	NOT APPLICABLE		6-22 (calc)	EN
SODIUM	139		135-146 mmol/L	EN
POTASSIUM	4.2		3.5-5.3 mmol/L	EN
CHLORIDE	102		98-110 mmol/L	EN
CARBON DIOXIDE	27		19-30 mmol/L	EN
CALCIUM	9.8		8.6-10.3 mg/dL	EN
PROTEIN, TOTAL	7.6		6.1-8.1 g/dL	EN
ALBUMIN	4.7		3.6-5.1 g/dL	EN
GLOBULIN	2.9		1.9-3.7 g/dL (calc)	EN
ALBUMIN/GLOBULIN RATIO	1.6		1.0-2.5 (calc)	EN
BILIRUBIN, TOTAL	0.7		0.2-1.2 mg/dL	EN
ALKALINE PHOSPHATASE	63		40-115 U/L	EN
AST	25		10-35 U/L	EN
ALT	17		9-46 U/L	EN
CBC (INCLUDES DIFF/PLT)				
WHITE BLOOD CELL COUNT	5.1		3.8-10.8 Thousand/uL	EN
RED BLOOD CELL COUNT	4.59		4.20-5.80 Million/uL	EN
HEMOGLOBIN	14.2		13.2-17.1 g/dL	EN
HEMATOCRIT	42.5		38.5-50.0 %	EN
MCV	92.6		80.0-100.0 fL	EN

MCH	31.0	27.0-33.0 pg	EN
MCHC	33.5	32.0-36.0 g/dL	EN
RDW	14.2	11.0-15.0 %	EN
PLATELET COUNT	228	140-400 Thousand/uL	EN
MPV	10.3	7.5-11.5 fL	EN
ABSOLUTE NEUTROPHILS	2912	1500-7800 cells/uL	EN
ABSOLUTE BAND NEUTROPHILS	DNR	0-750 cells/uL	EN
ABSOLUTE METAMYELOCYTES	DNR	0 cells/uL	EN
ABSOLUTE MYELOCYTES	DNR	0 cells/uL	EN
ABSOLUTE PROMYELOCYTES	DNR	0 cells/uL	EN
ABSOLUTE LYMPHOCYTES	1637	850-3900 cells/uL	EN
ABSOLUTE MONOCYTES	464	200-950 cells/uL	EN
ABSOLUTE EOSINOPHILS	66	15-500 cells/uL	EN
ABSOLUTE BASOPHILS	20	0-200 cells/uL	EN
ABSOLUTE BLASTS	DNR	0 cells/uL	EN
ABSOLUTE NUCLEATED RBC	DNR	0 cells/uL	EN
NEUTROPHILS	57.1	%	EN
BAND NEUTROPHILS	DNR	%	EN
METAMYELOCYTES	DNR	%	EN
MYELOCYTES	DNR	%	EN
PROMYELOCYTES	DNR	%	EN
LYMPHOCYTES	32.1	%	EN
REACTIVE LYMPHOCYTES	DNR	0-10 %	EN
MONOCYTES	9.1	%	EN
EOSINOPHILS	1.3	%	EN
BASOPHILS	0.4	%	EN
BLASTS	DNR	%	EN
NUCLEATED RBC	DNR	0 /100 WBC	EN
COMMENT(S)	DNR		EN
HS CRP			
HS CRP	0.5	mg/L	EN

Lower relative cardiovascular risk according to AHA/CDC guidelines.

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.

TSH			
TSH	1.61	0.40-4.50 mIU/L	EN
SEX HORMONE BINDING GLOBULIN			
SEX HORMONE BINDING GLOBULIN	67	HIGH 10-50 nmol/L	EN
PSA (FREE AND TOTAL)			
TOTAL PSA	1.1	< OR = 4.0 ng/mL	EN
FREE PSA	0.4	ng/mL	EN
% FREE PSA	36	>25 % (calc)	EN

PSA(ng/mL)	Free PSA(%)	Estimated(x) Probability of Cancer(as%)
0-2.5	(*)	Approx. 1
2.6-4.0(1)	0-27(2)	24(3)
4.1-10(4)	0-10	56
	11-15	28
	16-20	20

	21-25	16
	>or =26	8
>10(+)	N/A	>50

References:(1)Catalona et al.:Urology 60: 469-474 (2002)
(2)Catalona et al.:J.Urol 168: 922-925 (2002)
Free PSA(%) Sensitivity(%) Specificity(%)
< or = 25 85 19
< or = 30 93 9
(3)Catalona et al.:JAMA 277: 1452-1455 (1997)
(4)Catalona et al.:JAMA 279: 1542-1547 (1998)

(x)These estimates vary with age, ethnicity, family and DRE results.
(*)The diagnostic usefulness of % Free PSA has not been established in patients with total PSA below 2.6 ng/mL
(+)In men with PSA above 10 ng/mL, prostate cancer risk is determined by total PSA alone.

PSA was performed using the Beckman Coulter Immunoassay method. Values obtained from different assay methods cannot be used interchangeably. PSA levels, regardless of value, should not be interpreted as absolute evidence of the presence or absence of disease.

HEMOGLOBIN A1c

HEMOGLOBIN A1c 5.3 <5.7 % of total Hgb EN

According to 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-2013. Diabetes Care. 2013;36:s11-s66

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 for use of hemoglobin A1c for diagnosis of diabetes for children.

TESTOSTERONE,FR(DIALYSIS) AND TOTAL(LC/MS/MS)

TESTOSTERONE, TOTAL, LC/MS MS 624 250-1100 ng/dL SLI
FREE TESTOSTERONE 64.9 35.0-155.0 pg/mL SLI

QUESTASSURED 25-OH VIT D, (D2,D3), LC/MS/MS

VITAMIN D, 25-OH, TOTAL 22 **LOW** 30-100 ng/mL SLI

25-OHD3 indicates both endogenous production and supplementation. 25-OHD2 is an indicator of exogenous sources, such as diet or supplementation. Therapy is based on measurement of Total 25-OHD, with levels <20 ng/mL indicative of Vitamin D deficiency, while levels between 20 ng/mL and 30 ng/mL suggest insufficiency. Optimal levels are > or = 30 ng/mL.

VITAMIN D, 25-OH, D3 22 See Below ng/mL SLI
Reference Range: Not established
VITAMIN D, 25-OH, D2 <4 See Below ng/mL SLI
Reference Range: Not established

Performing Laboratory Information:

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