



3/16/2010 9:10:56 AM FROM: LABCORP LCLS BLK TO: 15032749370 LABCORP
 TO: Dr. Thom Dixon Seat LCA In-house Billable

LabCorp

Laboratory Corporation of America

LabCorp Seattle
 550 17th Avenue Ste 300
 Seattle, WA 98122-5789

Phone: 206-861-7000

Specimen Number 070-129-6254-0	Patient ID 24587	Control Number 62014829452	Account Number 46999200	Accession Phone Number 206-861-7000	Route IN
Patient Last Name			Account Address		
Patient First Name ANNA			Seattle-LCA In-house Billable		
Patient Middle Name			Attn: Jennifer Kersey		
Patient SSN ***-**-6644	Patient Phone 503-977 2660	Total Volume			
550 17th Ave Ste 300			Seattle WA 98122		
Age (Y/M/D) 58/01/13	Date of Birth 01/26/52	Sex F	Fasting No		
Patient Address 7619 SW 26TH AVE Portland OR 97219			Additional Information CC:5032749370		
Date and Time Collected 03/11/10 06:29	Date Hired 03/12/10	Date and Time Reported 03/16/10 10:10ET	Physician Name DIXON, P	NPI	Physician ID

Tests Ordered
 Thyroxine (T4) Free, Direct, S; TSH; Reverse T3; Triiodothyronine, Free, Serum; Venipuncture; Fax Report

General Comments
 This is a courtesy copy of a laboratory report.

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Thyroxine (T4) Free, Direct, S					
T4, Free (Direct)	1.64		ng/dL	0.82 - 1.77	01
TSH	0.005	Low	uIU/mL	0.450 - 4.500	01
Reverse T3	222		pg/mL	90 - 350	02
Triiodothyronine, Free, Serum	7.4	High	pg/mL	2.0 - 4.4	01

01	SE	LabCorp Seattle 550 17th Avenue Ste 300, Seattle, WA 98122-5789	Dir: Kristin Mantei, MD
02	BN	LabCorp Burlington 1447 York Court, Burlington, NC 27215 3367	Dir: William F Hancock, MD

For inquiries, the physician may contact **Branch: 800-859-6046 Lab: 206-861-7000**

ANNA	24587	070-129-6254-0	Seq # 5999
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FINAL REPORT

Stress

Admit Date:

Dis Date:

ANNA
MRN: 1157319

- ?Chronic Lung Disease
- ?Renal Failure
- ?CHF
- ?Coronary Artery Disease (CAD)
- ?Peripheral Vascular Disease
- ?Cerebrovascular Disease

Current Clinical Presentation:

?The patient had no chest pain on presentation. The patient has no recent history of CHF.

Baseline ECG:

- *Normal sinus rhythm.
- *Normal repolarization.

Exercise Protocol:

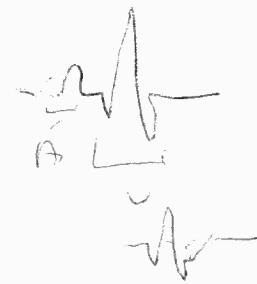
- *The patient exercised for a total of 10:00 min using the Standard Bruce exercise protocol, achieving stage 4 and a max METs of 12.8.
- *Exercise functional capacity was good.
- *The patient experienced no chest pain.
- *Symptoms noted during stress include: dyspnea.
- *The test was terminated due to fatigue and patient request.
- *The patient perceived the level of exertion was maximal (Borg scale 20).

Stress ECG:

- *Sinus tachycardia.
- *There is 2 mm slow upsloping ST-segment depression in the inferior leads.
- *Also, there is 1 mm slow upsloping ST-segment depression in the lateral leads.

Recovery ECG:

- *Normal sinus rhythm.
- *ST segment response during recovery was normal.
- *ST depression returned to baseline at 45 sec. into recovery.



Stress Test Conclusion:

- *Non-diagnostic stress test.
- *There was a normal heart rate response, with a normal blood pressure response.
- *An adequate level of stress was achieved.
- *ST depression inferolateral at peak, resolving in less than 45 sec. into recovery. Need to correlate with stress echo.

