

Patient: SALANTI, ANNA MARIE
Patient ID:
Encounter ID:
DOB: 1/26/1952 **Age:** 63 years **Sex:** F
Pt. Phone: (503)977-2660
Admitting: POPIEL, BRIAN JAMES
Copy To:

PROVIDENCE HEALTH & SERVICES
 Oregon Region Laboratories

For all correspondence use laboratory contact information noted below.

Oregon Regional Laboratory CLIA # 38D2032720 (503) 215-6660	Providence St. Vincent CLIA # 38D0624944 (503) 215-6660	Providence Portland CLIA # 38D0624031 (503) 215-6660	Providence Milwaukie CLIA # 38D0624625 (503) 215-6660	Providence Newberg CLIA # 38D0662978 (503) 215-6660
Providence Seaside CLIA # 38D0622986 (503) 215-6660	Providence Hood River CLIA # 38D0622025 (503) 215-6660	Providence Medford CLIA # 38D0627783 (503) 215-6660	Providence Willamette Falls CLIA # 38D0064519 (503) 215-6660	Providence Marion County Lab CLIA # 38D2063812 (503) 215-6660

BLOOD COUNT

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte		Ref Range	Units
WBC	5.5	[3.5-11.0]	10 ⁹ /L
RBC	4.39	[3.80-5.20]	10 ¹² /L
HGB	14.0	[11.7-15.7]	g/dL
HCT	41.1	[34.9-46.9]	%
MCV	93.5	[80.0-100.0]	fL
MCH	31.8	[26.4-34.0]	pg
MCHC	34.0	[31.4-35.8]	g/dL
RDW	12.9	[11.5-14.5]	%
PLT	251	[140-444]	10 ⁹ /L
MPV	8.5	[6.5-11.6]	fL
Neutrophils	67.0	[40.0-81.0]	%
Lymphocytes	20.2	[20.0-53.0]	%
Monocytes	9.3	[1.0-10.0]	%
Eosinophils	3.2	[0.0-6.0]	%
Basophils	0.3	[0.0-2.0]	%
Neutrophils Abs	3.7	[1.8-8.0]	10 ⁹ /L
Lymphocytes Abs	1.1	[1.0-4.8]	10 ⁹ /L
Monocytes Abs	0.5	[0.0-0.8]	10 ⁹ /L
Eosinophils Abs	0.2	[0.0-0.5]	10 ⁹ /L
Basophils Abs	0.0	[0.0-0.2]	10 ⁹ /L

All tests performed at Providence Oregon Regional Laboratory, 4400 NE Halsey St, Building 3, Portland OR 97213 unless otherwise specified.

Legend: L=Low H=High P=Critical C=Corrected f=Footnote
 @=Abnormal ^= Interpretive Comment ^=Corrected micro susceptibility

POPIEL, BRIAN JAMES
 Providence Health Systems
 Providence Health System
 Portland OR 97213

MRN: 20000776036
 Acct #: 50143874903
 Printed: 6/11/2015 10:28 AM
 Chart ID: 61422138

Pt Type: Outpt
 Admit Date: 5/19/2015
 Page 1 of 12
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CMP

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte		Ref Range	Units
Sodium	138	[135-144]	mmol/L
Potassium	4.2	[3.7-5.5]	mmol/L
Chloride	104	[99-110]	mmol/L
Carbon Dioxide	24	[20-31]	mmol/L
Anion Gap	10	[4-13]	
Glucose	97	[60-99]	mg/dL
BUN	18	[6-23]	mg/dL
Creatinine	0.73	[0.60-1.30]	mg/dL
Calcium	9.3	[8.3-10.4]	mg/dL
Alkaline Phos	82	[32-110]	IU/L
Bilirubin Total	0.8	[0.2-1.2]	mg/dL
AST (SGOT)	22	[11-39]	IU/L
ALT (SGPT)	29	[6-42]	IU/L
Total Protein	7.0	[6.1-8.0]	g/dL
Albumin	4.2	[3.2-4.9]	g/dL
Fasting Status	Over 12 hours		
eGFR, African American *	>60	[>=60]	mL/min/1.73 m2
eGFR, Non-African American	>60	[>=60]	mL/min/1.73 m2

5/19/2015 08:05:00 eGFR, African American:

Over 18 years:

Creatinine values and the eGFRs are IDMS standardized. For renal dosing of medications in elderly and/or under-weight patients, use calculated Creatinine Clearance instead of eGFR. To adjust for any other unknown variables, see NKDEP website at www.nkdep.nih.gov

Under 18 years:

eGFRs are not calculated for children <18 yrs old. To adjust for unknown variables, see NKDEP website at www.nkdep.nih.gov

LIPID

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte		Ref Range	Units
Fasting Status	Over 12 hours		
Cholesterol	260 H	[<=199]	mg/dL
Triglycerides	177 H	[<=149]	mg/dL
HDL Cholesterol	49	[40-59]	mg/dL
Chol HDL Ratio	5.3		

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LIPID

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte	Ref Range	Units
LDL calc *	[<=99]	mg/dL

176 H

5/19/2015 08:05:00 LDL calc:
 National Cholesterol Education Panel Classifications:

Cholesterol (mg/dL):
 Moderate Risk: 200-239; High Risk: >/=240
 HDL Cholesterol (mg/dL):
 Low: <40; High: >/=60
 Triglyceride (mg/dL; fasting):
 Borderline High: 150-199; High: 200-499; Very High: >/=500
 LDL Cholesterol (mg/dL):
 Near or above optimal: 100-129; Borderline High: 130-159;
 High: 160-189; Very High: >/=190

GENERAL CHEMISTRY

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte	Ref Range	Units
GGT	[8-41]	IU/L

26

SPECIAL CHEMISTRY

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte	Ref Range	Units
Cortisol Baseline *	[3-22]	ug/dL
DHEA-S	[35-430]	ug/dL
Ferritin	[10-291]	ng/mL
HB A1c, %	[4.0-6.0]	%
Insulin Level	[6-27]	uIU/mL
Iron	[40-150]	ug/dL
TIBC	[246-436]	ug/dL
Transferrin Sat	[13-50]	%
Vitamin B12	[211-911]	pg/mL
Folate	[>=5.4]	ng/mL

1991 H
 >24.0

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SPECIAL CHEMISTRY

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte		Ref Range	Units
Estradiol *	21	[0-357]	pg/mL
Thyroxine (T4)	7.0	[4.5-10.9]	ug/dL
TSH *	2.73	[0.33-4.70]	uIU/mL
FT3	3.1	[2.3-4.2]	pg/mL
Vit D 25OH *	55.2	[30.0-100.0]	ng/mL

5/19/2015 08:05:00 Cortisol Baseline:
 AM 0700-0900: 4-22 ug/dL
 PM 1500-1700: 3-17 ug/dL

5/19/2015 08:05:00 Estradiol:
 MALE: 0-40 pg/mL

FEMALE:
 Follicular 20-144 pg/mL
 Midcycle 64-357 pg/mL
 Luteal 56-214 pg/mL
 Postmenopausal(Untreated) 0-32 pg/mL

5/19/2015 08:05:00 TSH:

Evidence suggests that patients undergoing fluorescein dye angiography can retain small amounts of fluorescein in the body for up to 48 to 72 hours post-treatment. In the cases of patients with renal insufficiency, retention could be much longer. Samples containing fluorescein can produce falsely depressed values when tested with the ADVIA Centaur TSH3 Ultra assay, and should not be tested. With fluorescein interference, observed TSH3 Ultra values can be as low as <0.01 uIU/mL. Samples should be resubmitted post fluorescein clearance to ensure there is no interference with TSH3 test results.

5/19/2015 08:05:00 Vit D 25OH:
 Adult Nutritional Status:

Vitamin D Status	25 OH Vitamin D Value
Deficiency	< 20 ng/mL
Insufficiency	20 - 29 ng/mL
Sufficiency	30 - 80 ng/mL
Toxicity	> 150 ng/mL

Evidence suggests that patients undergoing fluorescein dye angiography can retain small amounts of fluorescein in the body for up to 48 to 72 hours post-treatment. In the cases of patients with renal insufficiency, retention could be much longer. Samples containing fluorescein can produce falsely elevated values when tested with the ADVIA Centaur Vitamin D assay, and should not be tested. With fluorescein interference, observed Vitamin D values can be as high as >150 ng/mL. Samples should be resubmitted post fluorescein clearance to ensure there is no interference with Vitamin D results

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IMMUNOLOGY

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte	Ref Range	Units
ASO	<100 [≤ 250]	IU/mL

INFECTIOUS DISEASE/VIROLOGY

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte	Ref Range	Units
IgA, Serum	287 [70-310]	mg/dL
Gliadin Ab, IgA *	20 H [0-19]	Units
TTG Ab, IgA *	6 [0-19]	Units
TTG Ab, IgG *	3 [0-19]	Units

5/19/2015 08:05:00 Gliadin Ab, IgA:
 REFERENCE INTERVAL Gliadin Ab, IgA

19 Units or less Negative
 20 - 30 Units Weak Positive
 31 Units or greater Positive

5/19/2015 08:05:00 TTG Ab, IgA:
 IgA antibody against human TTG, if detected at a level greater than 19 units, may suggest the possibility of certain gluten sensitive enteropathies such as celiac disease and Dermatitis Herpetiformis.

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INFECTIOUS DISEASE/VIROLOGY

5/19/2015 08:05:00 TTG Ab, IgG:
 REFERENCE INTERVAL Tissue
 Transglutaminase Ab, IgG

19 Units or less Negative
 20 - 30 Units Weak Positive
 31 Units or greater Positive

The Tissue Transglutaminase IgG assay may aid in the diagnosis of gluten-sensitive enteropathy, (i.e. Celiac Disease, Dermatitis Herpetiformis) in Tissue Transglutaminase IgA negative patients with confirmed IgA deficiency. A negative Tissue Transglutaminase IgG test alone does not rule out gluten-sensitive enteropathy.

REFERENCE TESTING

Collected Date 05/19/15
 Collected Time 08:05:00

Analyte		Ref Range	Units
ARUP Misc Test 1	SEE NOTE f		
ARUP Misc Test 2	SEE NOTE f		
ARUP Misc Test 3	SEE NOTE f		
B. burgdorferi IgG WB, ARUP	Negative f	[Negative]	
B. burgdorferi IgM WB, ARUP	Negative f	[Negative]	
Candida Antibody IgA, ARUP	1.33 Hf	[<=0.89]	EV
Candida Antibody IgG, ARUP	1.46 Hf	[<=0.89]	EV
Candida Antibody IgM, ARUP	1.58 Hf	[<=0.89]	EV
Dihydrotestosterone, ARUP	33.7 f	[24.0-208.0]	pg/mL
Mycoplasma pneumoniae, IgG, ARUP	0.12 Hf	[<=0.09]	U/L
Mycoplasma pneumoniae, IgM, ARUP	0.06 f	[<=0.76]	U/L
Testosterone, Female/Child, Total, ARUP	17 f	[5-32]	ng/dL
Sex Hormone Binding Globulin, ARUP	29 Lf	[30-135]	nmol/L
Testosterone, Free LC-MS/MS, ARUP	3.0 f	[0.6-3.8]	pg/mL
Pregnenolone, ARUP	25 f	[15-132]	ng/dL
Magnesium, RBC (ARUP)	2.2 f	[1.5-3.1]	mmol/L

5/19/2015 08:05:00 ARUP Misc Test 1:
 Test Name = CD57+ NK Cells, Peripheral Blood by Flow Cytometry
 Test # = 2008912
 Specimen Type = EDTA WB
 Fluid Source (If applicable) = _

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CLIA # 38D0662978
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- Providence Seaside
CLIA # 38D0622966
(503) 215-6880
- Providence Hood River
CLIA # 38D0622025
(503) 215-6660
- Providence Medford
CLIA # 38D0627783
(503) 215-6660
- Providence Willamette Falls
CLIA # 38D0064519
(503) 215-6660
- Providence Marion County Lab
CLIA # 38D2063812
(503) 215-6660

REFERENCE TESTING

05/19/15 08:05:00 ARUP Misc Test 1:
Test name Result Flag Units RefIntvl

% CD57+CD3- (NK Cells) 7 % of lymph 1-16
Abs CD57+CD3- (NK Cells) 86 cells/uL 21-357

INTERPRETIVE INFORMATION: CD57+ NK Cells, Peripheral Bld, FlowCyto

This test identifies and quantifies the CD57+/CD3- NK cells. The significance of low CD57+NK values in diagnosing and monitoring chronic Lyme disease is not well established and should be used in conjunction with other diagnostic tests specified in the Centers for Disease Control Lyme Disease case definition.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement A: aruplab.com/CS
Performed by ARUP Laboratories,
500 Chipeta Way, SLC, UT 84108 800-522-2787
www.aruplab.com, Jerry W. Hussong, MD - Lab. Director

5/19/2015 08:05:00 ARUP Misc Test 2:

Test Name = Zinc, RBC
Test # = 2006460
Specimen Type = RBC Tracs Element Free
Fluid Source (If applicable) =

05/19/15 08:05:00 ARUP Misc Test 2:
Test name Result Flag Units RefIntvl

Zinc, RBC 1100 mcg/dL
RBCs

Reporting Limit: 44 mcg/dL

NMS Labs derived data for 2.5th - 97.5th percentile range is 794 - 1470 mcg/dL (n=2940).
The RBC sample used for analysis was measured by weight and multiplied by the density of human RBC (1.10 g/mL) to obtain mcg/dL units.

Analysis by Inductively Coupled Plasma/Optical Emission Spectrometry (ICP/OES)
Performed at: National Medical Services
3701 Welsh Road, Willow Grove, PA 19090

5/19/2015 08:05:00 ARUP Misc Test 3:

Test Name = Cortisol, Free
Test # = 0098391
Specimen Type = Serum
Fluid Source (If applicable) =

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REFERENCE TESTING

05/19/15 08:05:00 ARUP Misc Test 3:
 Test name Result Flag Units RefIntvl

Cortisol, Free 0.44 ⁷⁵ ug/dL

INTERPRETIVE INFORMATION: Cortisol, Free
 8-10 a.m. collection: 0.31-1.19 ug/dL
 4-6 p.m. collection: 0.15-0.94 ug/dL
 Test developed and characteristics determined by ARUP
 Laboratories. See Compliance Statement B: aruplab.com/CS
 Performed by ARUP Laboratories,
 500 Chipeta Way, SLC, UT 84108 800-522-2787
 www.aruplab.com, Jerry W. Hussong, MD - Lab. Director
 05/19/15 08:05:00 B. burgdorferi IgG WB, ARUP:

Band(s) present: NONE
 (Insufficient number of bands for positive result)
 INTERPRETIVE INFORMATION: Borrelia Burgdorferi Ab, IgG Western Blot
 For this assay, a positive result is reported when any 5 or more
 of the following 10 bands are present: 18, 23, 28, 30, 39, 41, 45,
 58, 66, or 93 kDa. All other banding patterns are reported as
 negative.

05/19/15 08:05:00 B. burgdorferi IgM WB, ARUP:
 Band(s) present: NONE
 (Insufficient number of bands for positive result)
 INTERPRETIVE INFORMATION: Borrelia Burgdorferi Antibody, IgM
 Western Blot
 For this assay, a positive result is reported when any 2 or more
 of the following bands are present: 23, 39, or 41 kDa. All other
 banding patterns are reported as negative.
 Performed by ARUP Laboratories,
 500 Chipeta Way, SLC, UT 84108 800-522-2787
 www.aruplab.com, Jerry W. Hussong, MD - Lab. Director

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Providence Newberg
CLIA # 38D062978
(503) 215-6660

Providence Seaside
CLIA # 38D0622888
(503) 215-6660

Providence Hood River
CLIA # 38D0622025
(503) 215-6660

Providence Medford
CLIA # 38D0627783
(503) 215-6660

Providence Willamette Falls
CLIA # 38D0054519
(503) 215-6660

Providence Marion County Lab
CLIA # 38D2063812
(503) 215-6660

REFERENCE TESTING

05/19/15 08:05:00 Candida Antibody IgA, ARUP:
INTERPRETIVE INFORMATION: Candida Ab, IgA
0.89 EV or less: Negative - No significant level
of detectable Candida albicans
antibody.

0.90-0.99 EV: Equivocal - Questionable presence
of antibodies. Repeat testing in
10-14 days may be helpful.

1.00 EV or greater: Positive - Antibody to Candida
albicans detected, which may
indicate a current or past
infection.

The best evidence for current infection is a significant
change on two appropriately timed specimens where both tests
are done in the same laboratory at the same time. However,
low levels of IgM antibodies may occasionally persist for
more than 12 months post-infection.

Test developed and characteristics determined by ARUP
Laboratories. See Compliance Statement D: aruplab.com/CS

05/19/15 08:05:00 Candida Antibody IgG, ARUP:
INTERPRETIVE INFORMATION: Candida Ab, IgG
0.89 EV or less: Negative - No significant level
of detectable Candida albicans
antibody.

0.90-0.99 EV: Equivocal - Questionable presence
of antibodies. Repeat testing in
10-14 days may be helpful.

1.00 EV or greater: Positive - Antibody to Candida
albicans detected, which may
indicate a current or past
infection.

The best evidence for current infection is a significant
change on two appropriately timed specimens where both tests
are done in the same laboratory at the same time. However,
low levels of IgM antibodies may occasionally persist for
more than 12 months post-infection.

Test developed and characteristics determined by ARUP
Laboratories. See Compliance Statement D: aruplab.com/CS

All tests performed at Providence Oregon Regional Laboratory, 4400 NE Halsey St. Building 3, Portland OR 97213 unless otherwise specified.

Legend: L=Low H=High P=Critical C=Corrected f=Footnote
@=Abnormal ^= Interpretive Comment ^=Corrected micro susceptibility

POPIEL, BRIAN JAMES
Providence Health Systems
Providence Health System
Portland OR 97213

MRN: 20000776036
Acct #: 50143874903
Printed: 6/11/2015 10:28 AM
Chart ID: 61422138

Pt Type: Outpt
Admit Date: 5/19/2015
Page 9 of 12
N/A

Patient: SALANTI, ANNA MARIE
Patient ID:
Encounter ID:
DOB: 1/26/1952 **Age:** 63 years **Sex:** F
Pt. Phone: (503)977-2660
Admitting: POPIEL, BRIAN JAMES
Copy To:

PROVIDENCE HEALTH & SERVICES
 Oregon Region Laboratories

For all correspondence use laboratory contact information noted below.

Oregon Regional Laboratory CLIA # 38D2032720 (503) 215-6660	Providence St. Vincent CLIA # 38D0624944 (503) 215-6660	Providence Portland CLIA # 38D0624031 (503) 215-6660	Providence Milwaukie CLIA # 38D0624625 (503) 215-6660	Providence Newberg CLIA # 38D0662976 (503) 215-6660
Providence Seaside CLIA # 38D0622986 (503) 215-6660	Providence Hood River CLIA # 38D0622025 (503) 215-6660	Providence Madford CLIA # 38D0627783 (503) 215-6660	Providence Willamette Falls CLIA # 38D0064519 (503) 215-6660	Providence Marion County Lab CLIA # 38D2063812 (503) 215-6660

REFERENCE TESTING

05/19/15 08:05:00 Candida Antibody IgM, ARUP:
INTERPRETIVE INFORMATION: Candida Ab, IgM
 0.89 EV or less: Negative - No significant level of detectable Candida albicans antibody.
 0.90-0.99 EV: Equivocal - Questionable presence of antibodies. Repeat testing in 10-14 days may be helpful.
 1.00 EV or greater: Positive - Antibody to Candida albicans detected, which may indicate a current or past infection.

The best evidence for current infection is a significant change on two appropriately timed specimens where both tests are done in the same laboratory at the same time. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement D: aruplab.com/CS
 Performed by ARUP Laboratories,
 500 Chipeta Way, SLC,UT 84108 800-522-2787
 www.aruplab.com, Jerry W. Hussong, MD - Lab. Director.

05/19/15 08:05:00 Dihydrotestosterone, ARUP:
INTERPRETIVE INFORMATION: 5-a-Dihydrotestosterone by Tandem Mass Spectrometry, Serum

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS
 Performed by ARUP Laboratories,
 500 Chipeta Way, SLC,UT 84108 800-522-2787
 www.aruplab.com, Jerry W. Hussong, MD - Lab. Director

05/19/15 08:05:00 Mycoplasma pneumoniae, IgG, ARUP:
INTERPRETIVE INFORMATION: Mycoplasma pneumoniae Ab, IgG
 0.09 U/L or less Negative
 0.10 - 0.32 U/L Equivocal
 0.33 U/L or greater Positive

INTERPRETIVE DATA: Over 50% of healthy adults have a relatively high background of specific M. pneumoniae IgG antibodies in their sera, probably because of past M. pneumoniae infections. Therefore, paired sera obtained with a time interval of 1 to 3 weeks are highly recommended in adults to confirm reinfection by M. pneumoniae, which is demonstrated by a significant change in IgG antibodies. A significant change is indicated if one sample is above 0.32 U/L and the other is below 0.20 U/L.

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PROVIDENCE HEALTH & SERVICES
Oregon Region Laboratories

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Providence Seaside CLIA # 38D0622986 (503) 215-6660	Providence Hood River CLIA # 38D0622025 (503) 215-6680	Providence Medford CLIA # 38D0627783 (503) 215-6660	Providence Willamette Falls CLIA # 38D0064519 (503) 215-6680	Providence Marion County Lab CLIA # 38D2063812 (503) 215-6660

REFERENCE TESTING

05/19/15 08:05:00 Mycoplasma pneumoniae, IgM, ARUP:
INTERPRETIVE INFORMATION: Mycoplasma pneumoniae Ab, IgM

- 0.76 U/L or less Negative: No clinically significant amount of M. pneumoniae IgM antibody detected.
- 0.77 - 0.95 U/L Low Positive: M. pneumoniae-specific IgM presumptively detected. Collection of a follow-up sample in 1-2 weeks is recommended to assure reactivity.
- 0.96 U/L or greater Positive: Highly significant amount of M. pneumoniae-specific IgM antibody detected. However, low levels of IgM antibodies may occasionally persist for more than 12 months post-infection.

Performed by ARUP Laboratories,
500 Chipeta Way, SLC, UT 84108 800-522-2787
www.aruplab.com, Jerry W. Hussong, MD - Lab. Director
05/19/15 08:05:00 Testosterone, Female/Child, Total, ARUP:

Total Testosterone, Females 18 years and older
Premenopausal 9-55 ng/dL
Postmenopausal 5-32 ng/dL
REFERENCE INTERVAL: Testosterone, LC-MS/MS
Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).
Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS
05/19/15 08:05:00 Sex Hormone Binding Globulin, ARUP:
REFERENCE INTERVAL: Sex Hormone Binding Globulin
Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

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REFERENCE TESTING

05/19/15 08:05:00 Testosterone, Free LC-MS/MS, ARUP:

To convert to pmol/L, multiply pg/mL by 3.47
The concentration of Free Testosterone is derived from a mathematical expression based on the constant for the binding of testosterone to sex hormone binding globulin.

REFERENCE INTERVAL: Testosterone, Free LC-MS/MS
Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS
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500 Chipeta Way, SLC, UT 84108 800-522-2787
www.aruplab.com, Jerry W. Hussong, MD - Lab. Director

05/19/15 08:05:00 Pregnenolone, ARUP:
REFERENCE INTERVAL: Pregnenolone by MS/MS, Serum
Access complete set of age- and/or gender-specific reference intervals for this test in the ARUP Laboratory Test Directory (aruplab.com).

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS
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500 Chipeta Way, SLC, UT 84108 800-522-2787
www.aruplab.com, Jerry W. Hussong, MD - Lab. Director

05/19/15 08:05:00 Magnesium, RBC (ARUP):
INTERPRETIVE INFORMATION: MG RBC
RBC magnesium results reflect the intracellular stores and general homeostasis of magnesium. Results may be falsely low if RBCs in the submitted specimen are lysed or not promptly separated from the plasma.

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS
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