

Specimen Number

04112925820

Control Number

62014825685

100%



Specimen # 041-129-2582-0	Lab SE	Time 08:47	Fasting Y	e-Results Patient Inquiry		
Additional Information			Volume	Clinical Information:		
Patient Name FRANK		Sex M	Age 064/11	Physician ID	Patient ID 24576	
Patient Address			DOB	Account: Sonoran Naturopathic Center 02111760		
Control # 62014825685	Draw 02/10/09	Entered 02/11/09	Last Report 02/19/09	9316 E Raintree Dr Ste 140 SCOTTSDALE, AZ 85260 4806142322		

Test Ordered

CBC with Differential/Platelet
 CBG with Free Cortisol
 Iron and TIBC
 Testosterone, Free and Total
 Hemoglobin A1c
 Estradiol
 GGT
 Osmolality, Serum
 Ferritin, Serum
 Venipuncture

Comp. Metabolic Panel (14)
 Lipid Panel
 PSA Total+% Free
 IGF-1
 Dehydroepiandrosterone sulfate
 vitamin D, 25-Hydroxy
 Thyroxine (T4)
 Insulin
 Triiodothyronine, Free, Serum

Tests	Results	Units	Reference Interval	Lab
CBC with Differential/Platelet				
WBC	7.4	x10E3/uL	4.0-10.5	01
RBC	5.36	x10E6/uL	4.10-5.60	01
Hemoglobin	17.1	H g/dL	12.5-17.0	01
Hematocrit	49.5	%	36.0-50.0	01
MCV	92	fL	80-98	01
MCH	32.0	pg	27.0-34.0	01
MCHC	34.6	g/dL	32.0-36.0	01
RDW	13.6	%	11.7-15.0	01
Platelets	284	x10E3/uL	140-415	01
Neutrophils	58	%	40-74	01
Lymphs	27	%	14-46	01
Monocytes	9	%	4-13	01
Eos	5	%	0-7	01
Basos	1	%	0-3	01
Neutrophils (Absolute)	4.3	x10E3/uL	1.8-7.8	01
Lymphs (Absolute)	2.0	x10E3/uL	0.7-4.5	01
Monocytes (Absolute)	0.7	x10E3/uL	0.1-1.0	01
Eos (Absolute)	0.4	x10E3/uL	0.0-0.4	01
Baso (Absolute)	0.1	x10E3/uL	0.0-0.2	01
Comp. Metabolic Panel (14)				
Glucose, Serum	110	H mg/dL	65-99	01
BUN	16	mg/dL	5-26	01
Creatinine, Serum	1.24	mg/dL	0.76-1.27	01

► Glom Filtr Rate, Est	59	L	mL/min/1.73	>59	
If African-American	>59		mL/min/1.73	>59	
Note: Persistent reduction for 3 months or more in an eGFR <60 mL/min/1.73 m2 defines CKD. Patients with eGFR values >/=60 mL/min/1.73 m2 may also have CKD if evidence of persistent proteinuria is present. Additional information may be found at www.kdoqi.org.					
BUN/Creatinine Ratio	13			8-27	
Sodium, Serum	140		mmol/L	135-145	01
Potassium, Serum	4.4		mmol/L	3.5-5.2	01
Chloride, Serum	105		mmol/L	97-108	01
Carbon Dioxide, Total	24		mmol/L	20-32	01
Calcium, Serum	9.3		mg/dL	8.5-10.6	01
Protein, Total, Serum	6.6		g/dL	6.0-8.5	01
Albumin, Serum	4.4		g/dL	3.6-4.8	01
Globulin, Total	2.2		g/dL	1.5-4.5	
A/G Ratio	2.0			1.1-2.5	
Bilirubin, Total	0.5		mg/dL	0.1-1.2	01
Alkaline Phosphatase, S	68		IU/L	25-160	01
AST (SGOT)	20		IU/L	0-40	01
ALT (SGPT)	23		IU/L	0-55	01
CBG with Free Cortisol					
Cort.Bind.Glob.(CBG)	2.2		mg/dL		02
Reference Range:					
Older Children and Adults: 2.3 - 3.9					
*ASR - Analyte Specific Reagent					
This test was developed and its performance characteristics determined by Esoterix. It has not been cleared or approved by the U. S. Food and Drug Administration. The FDA has determined that such clearance is not necessary. This test is used for clinical purposes. It should not be regarded as investigational or for research. This laboratory is regulated under the Clinical Laboratory Improvement Amendment (CLIA) of 1988 as qualified to perform high complexity clinical testing.					
Cortisol, Serum or Plasma	18		ug/dL		02
Reference Range:					
Adults					
8:00 AM 8.0 - 19					
4:00 PM 4.0 - 11					
Free Cortisol, Serum	4.1		ug/dL		02
Reference Range:					
Adults 8:00 AM: 0.2 - 1.8					
Percent Free Cortisol, Serum	23		%		02
Reference Range:					
Adults 8:00 am: 2.3 - 9.5					
Lipid Panel					
Cholesterol, Total	154	Good	mg/dL	was 202	100-199
Triglycerides	107		mg/dL	was 133	0-149

▶ HDL Cholesterol	(39) 50	L	mg/dL	was 49	>39	01
Comment	According to ATP-III Guidelines, HDL-C >59 mg/dL is considered a negative risk factor for CHD.					01
VLDL Cholesterol Calc	21		mg/dL		5-40	
LDL Cholesterol Calc	94		mg/dL	was 126	0-99	
Iron and TIBC						
Iron Bind.Cap.(TIBC)	341		ug/dL		250-450	
UIBC	257		ug/dL		150-375	01
Iron, Serum	84		ug/dL		40-155	01
Iron Saturation	25		%		15-55	
PSA Total+% Free						
Prostate Specific Ag, Serum	0.8	Good	ng/mL		0.0-4.0	01
Roche ECLIA methodology.						
According to the American Urological Association, PSA should be undetectable after radical prostatectomy. A PSA of less than 0.5 ng/mL (or undetectable) is not likely to be associated with disease recurrence within five years of treatment. Values obtained with different assay methods or kits cannot be used interchangeably. Results cannot be interpreted as absolute evidence of the presence or absence of malignant disease.						
PSA, Free	0.33		ng/mL		N/A	01
Roche ECLIA methodology.						
% Free PSA	41.3		%			
The table below lists the probability of prostate cancer for men with non-suspicious DRE results and total PSA between 4 and 10 ng/mL, by patient age (Catalona et al, JAMA 1998, 279:1542).						
	% Free PSA	50-64 yr	65-75 yr			
	0.00-10.00%	56%	55%			
	10.01-15.00%	24%	35%			
	15.01-20.00%	17%	23%			
	20.01-25.00%	10%	20%			
	>25.00%	5%	9%			
Please note: Catalona et al did not make specific recommendations regarding the use of percent free PSA for any other population of men.						
Testosterone, Free and Total						
Testosterone, Serum	740	Good	ng/dL		241-827	01
▶ Free Testosterone(Direct)	18.9	H	pg/mL		6.6-18.1	03
IGF-1						
Insulin-Like Growth Factor I	180		ng/mL		75-212	03
Hemoglobin A1c						
Hemoglobin A1c	5.4	Sum	%		<7.0	01
		Diabetic Adult			<7.0	
		Healthy Adult			4.8 - 5.9	
					(DCCT/NGSP)	

American Diabetes Association's Summary of Glycemic Recommendations for Adults with Diabetes:
 Hemoglobin A1c <7.0%. More stringent glycemic goals (A1c <6.0%) may further reduce complications at the cost of increased risk of hypoglycemia.

Dehydroepiandrosterone Sulfate				
DHEA-Sulfate	252	ug/dL	42-290	03
Estradiol				
Estradiol	30	pg/mL	0-53	01
Adult Male: <54				
Menstruating Female				
(Day of cycle relative to LH Peak)				
	Follicular (-12)		19 - 83	
	(- 4)		64 - 183	
	Midcycle (- 1)		150 - 528	
	Luteal (+ 2)		58 - 157	
	(+ 6)		60 - 211	
	(+12)		55 - 150	
Postmenopausal Female (Untreated) 0 - 31				

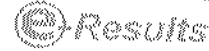
Bayer Centaur/ACS Methodology

Vitamin D, 25-Hydroxy
 Vitamin D, 25-Hydroxy 62.5 *Better was off 3* ng/mL 32.0-100.0 01
 Recent studies consider the lower limit of 32.0 ng/mL to be a threshold for optimal health.
 Hollis BW. J Nutr. 2005 Feb;135(2):317-22.

GGT	25	IU/L	0-65	01
Thyroxine (T4)	7.9	ug/dL	4.5-12.0	01
Osmolality, Serum	291	mOsm/KH2O	275-295	04
Insulin	3.2	uIU/mL	0.0-29.1	01
Ferritin, Serum	45	ng/mL	22-322	01
Triiodothyronine, Free, Serum	5.7	H pg/mL	2.3-4.2	01

*** END OF REPORT ***

01	SE	LabCorp Seattle 550 17th Avenue Ste 300, Seattle, WA 98122	Dir: Kristin Mantei, MD Contact by: 206-861-7000
02	ES	Esoterix Endocrinology 4301 Lost Hills Road, Calabasas Hills, CA 91301	Dir: Samuel Pepkowitz, MD Contact by: 800-444-9111
03	BN	LabCorp Burlington 1447 York Court, Burlington, NC 27215	Dir: William F Hancock, MD Contact by: 800-762-4344
04	OS	Dynacare A LabCorp Co NW 550 17th Avenue Ste 310, Seattle, WA 98122	Dir: David Corwin, MD Contact by: 206-861-7000

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 These results are considered preliminary and are not the final lab report.
 A final report will be provided via your current reporting mechanism.  Laboratory Corporation of America

*keep test W/T
 keep D
 Gluco
 chelation?
 Iron*