

Quest Diagnostics	PATIENT INFORMATION	REPORT STATUS: FINAL
SPECIMEN INFORMATION	Name	ORDERING PHYSICIAN
SPECIMEN:	DOB:	Name
REQUISITION:	AGE:	CLIENT INFORMATION
Lab ref no:	GENDER:	Private MD Labs
	FASTING:	

COLLECTED: 09/24/2022 11:51AM PDT
 RECEIVED: 09/24/2022 11:52AM PDT
 REPORTED: 09/26/2022 11:24AM PDT

Test Name	Result	Flag	Reference Range	Lab
Comprehensive Metabolic Panel				
GLUCOSE	96	NORMAL	65-99 mg/dL	01
Fasting reference interval				
UREA NITROGEN (BUN)	17	NORMAL	7-25 mg/dL	01
CREATININE	0.88	NORMAL	0.60-1.29 mg/dL	01
EGFR	111	NORMAL	> OR = 60 mL/min/1.73m2	01

The eGFR is based on the CKD-EPI 2021 equation. To calculate the new eGFR from a previous Creatinine or Cystatin C result, go to <https://www.kidney.org/professionals/kdoqi/gfr%5Fcalculator>

CHLAMYDIA TRACHOMATIS RNA,
 TMA, NEISSERIA GONORRHOEAE
 RNA, TMA, COMMENT

The analytical performance characteristics of this assay, when used to test SurePath(TM) specimens have been determined by Quest Diagnostics. The modifications have not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

For additional information, please refer to <https://education.questdiagnostics.com/faq/FAQ154>
 (This link is being provided for information/educational purposes only.)

Herpes Simplex Virus 1 and 2 (IgG), with Reflex to HSV-2 Inhibition

HSV 1 IGG, TYPE SPECIFIC AB	<0.90	NORMAL	index	01
HSV 2 IGG, TYPE SPECIFIC AB	<0.90	NORMAL	index	01

Index Interpretation

 <0.90 Negative
 0.90-1.09 Equivocal
 >1.09 Positive

This assay utilizes recombinant type-specific antigens to differentiate HSV-1 from HSV-2 infections. A positive result cannot distinguish between recent and past infection. If recent HSV infection is suspected but the results are negative or equivocal, the assay should be repeated in 4-6 weeks. The performance characteristics of the assay have not been established for pediatric populations, immunocompromised patients, or neonatal screening.

For additional information, please refer to <http://education.QuestDiagnostics.com/faq/FAQ118>
 (This link is being provided for informational/educational purposes only.)

Hepatitis B Surface Antigen with Reflex Confirmation

HEPATITIS B SURFACE ANTIGEN	NON-REACTIVE	NORMAL	NON-REACTIVE	01
CONFIRMATION	DNR	NORMAL		01

**URINALYSIS,
COMPLETE**

COLOR	DARK YELLOW	NORMAL	YELLOW	01
APPEARANCE	CLEAR	NORMAL	CLEAR	01
SPECIFIC GRAVITY	1.031	NORMAL	1.001-1.035	01
PH	6.0	NORMAL	5.0-8.0	01
GLUCOSE	NEGATIVE	NORMAL	NEGATIVE	01
BILIRUBIN	1+	ABNORMAL	NEGATIVE	01

Presumptive positive bilirubin. Consider confirmation by serum bilirubin if clinically indicated.

KETONES	2+	ABNORMAL	NEGATIVE	01
OCCULT BLOOD	NEGATIVE	NORMAL	NEGATIVE	01
PROTEIN	TRACE	ABNORMAL	NEGATIVE	01
NITRITE	NEGATIVE	NORMAL	NEGATIVE	01
LEUKOCYTE ESTERASE	TRACE	ABNORMAL	NEGATIVE	01
WBC	NONE SEEN	NORMAL	< OR = 5 /HPF	01
RBC	NONE SEEN	NORMAL	< OR = 2 /HPF	01
SQUAMOUS EPITHELIAL CELLS	NONE SEEN	NORMAL	< OR = 5 /HPF	01
TRANSITIONAL EPITHELIAL CELLS	DNR	NORMAL	< OR = 5 /HPF	01
RENAL EPITHELIAL CELLS	DNR	NORMAL	< OR = 3 /HPF	01
BACTERIA	NONE SEEN	NORMAL	NONE SEEN /HPF	01
CALCIUM OXALATE CRYSTALS	DNR	NORMAL	NONE OR FEW /HPF	01
TRIPLE PHOSPHATE CRYSTALS	DNR	NORMAL	NONE OR FEW /HPF	01
URIC ACID CRYSTALS	DNR	NORMAL	NONE OR FEW /HPF	01
AMORPHOUS SEDIMENT	DNR	NORMAL	NONE OR FEW /HPF	01
CRYSTALS	DNR	NORMAL	NONE SEEN /HPF	01
HYALINE CAST	NONE SEEN	NORMAL	NONE SEEN /LPF	01
GRANULAR CAST	DNR	NORMAL	NONE SEEN /LPF	01
CASTS	DNR	NORMAL	NONE SEEN /LPF	01
YEAST	DNR	NORMAL	NONE SEEN /HPF	01
COMMENTS	DNR	NORMAL		01
NOTE	DNR	NORMAL		01

CBC (includes Differential and Platelets)

WHITE BLOOD CELL COUNT	8.8	NORMAL	3.8-10.8 Thousand/uL	01
RED BLOOD CELL COUNT	4.72	NORMAL	4.20-5.80 Million/uL	01
HEMOGLOBIN	14.8	NORMAL	13.2-17.1 g/dL	01
HEMATOCRIT	43.2	NORMAL	38.5-50.0 %	01
MCV	91.5	NORMAL	80.0-100.0 fL	01
MCH	31.4	NORMAL	27.0-33.0 pg	01
MCHC	34.3	NORMAL	32.0-36.0 g/dL	01
RDW	11.9	NORMAL	11.0-15.0 %	01
PLATELET COUNT	299	NORMAL	140-400 Thousand/uL	01
MPV	9.7	NORMAL	7.5-12.5 fL	01
ABSOLUTE NEUTROPHILS	6741	NORMAL	1500-7800 cells/uL	01
ABSOLUTE BAND NEUTROPHILS	DNR	NORMAL	0-750 cells/uL	01
ABSOLUTE METAMYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE MYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE PROMYELOCYTES	DNR	NORMAL	0 cells/uL	01
ABSOLUTE LYMPHOCYTES	1602	NORMAL	850-3900 cells/uL	01
ABSOLUTE MONOCYTES	431	NORMAL	200-950 cells/uL	01
ABSOLUTE EOSINOPHILS	0	LOW	15-500 cells/uL	01
ABSOLUTE BASOPHILS	26	NORMAL	0-200 cells/uL	01
ABSOLUTE BLASTS	DNR	NORMAL	0 cells/uL	01
ABSOLUTE NUCLEATED RBC	DNR	NORMAL	0 cells/uL	01
NEUTROPHILS	76.6	NORMAL	%	01
BAND NEUTROPHILS	DNR	NORMAL	%	01
METAMYELOCYTES	DNR	NORMAL	%	01

MYELOCYTES	DNR	NORMAL	%	01
PROMYELOCYTES	DNR	NORMAL	%	01
LYMPHOCYTES	18.2	NORMAL	%	01
REACTIVE LYMPHOCYTES	DNR	NORMAL	0-10 %	01
MONOCYTES	4.9	NORMAL	%	01
EOSINOPHILS	0.0	NORMAL	%	01
BASOPHILS	0.3	NORMAL	%	01
BLASTS	DNR	NORMAL	%	01
NUCLEATED RBC	DNR	NORMAL	0 /100 WBC	01
COMMENT(S)	DNR	NORMAL		01

Hepatitis C Antibody with Reflex to HCV, RNA, Quantitative, Real-Time PCR

HEPATITIS C ANTIBODY	NON-REACTIVE	NORMAL	NON-REACTIVE	01
INDEX	0.08	NORMAL	<1.00	01

HCV antibody was non-reactive. There is no laboratory evidence of HCV infection.

In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested.

For additional information please refer to <http://education.questdiagnostics.com/faq/FAQ22v1> (This link is being provided for informational/educational purposes only.)

Syphilis Antibody Cascading Reflex

T. PALLIDUM AB	NEGATIVE	NORMAL	NEGATIVE	01
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No antibodies to T. pallidum (the agent causing syphilis) were detected in the specimen. This result, however, does not exclude very recent T. pallidum infection; testing of a second specimen, collected 2-4 weeks after this specimen, is recommended if the index of suspicion for recent infection is high.

HIV-1/2 Antigen and Antibodies, Fourth Generation, with Reflexes

HIV AG/AB, 4TH GEN	NON-REACTIVE	NORMAL	NON-REACTIVE	01
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HIV-1 antigen and HIV-1/HIV-2 antibodies were not detected. There is no laboratory evidence of HIV infection.

PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

For additional information please refer to <http://education.questdiagnostics.com/faq/FAQ106> (This link is being provided for informational/educational purposes only.)

The performance of this assay has not been clinically validated in patients less than 2 years old.
