

Patient Information		Specimen Information	Client Information
DOB: Gender: Phone: Patient ID: Health ID:	AGE: Fasting:	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	

COMMENTS: FASTING:YES			
Test Name COMPREHENSIVE METABOLIC PANEL	In Range Out Of	Range Reference Range	Lab EN
GLUCOSE	81	65-99 mg/dL	
		Fasting reference interval	
UREA NITROGEN (BUN) CREATININE	13 0.62	7-25 mg/dL 0.50-1.10 mg/dL	
eGFR NON-AFR. AMERICAN	113		
eGFR NON-AFR. AMERICAN eGFR AFRICAN AMERICAN	131	> OR = 60 mL/min/1.73m2	
	NOT APPLICABLE	> OR = 60 mL/min/1.73m2 6-22 (calc)	
BUN/CREATININE RATIO SODIUM	139	135-146 mmol/L	
	4.2		
POTASSIUM CHLORIDE	106	3.5-5.3 mmol/L	
CARBON DIOXIDE	25	98-110 mmol/L 20-31 mmol/L	
CALCIUM	9.7	8.6-10.2 mg/dL	
PROTEIN, TOTAL	6.8	6.1-8.1 g/dL	
ALBUMIN	4.3	3.6-5.1 g/dL	
GLOBULIN	2.5	1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	1.7	1.0-2.5 (calc)	
BILIRUBIN, TOTAL	0.9	0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	34	33-115 U/L	
AST	14	10-30 U/L	
ALT	10	6-29 U/L	
TSH	0.65	mIU/L	EN
ISA	0.65	Reference Range	EIN
		> or = 20 Years 0.40-4.50	
		Pregnancy Ranges	
		First trimester 0.26-2.66	
		Second trimester 0.55-2.73	
		Third trimester 0.43-2.91	
T4, FREE	1.0	0.8-1.8 ng/dL	EN
T3, FREE	3.2	2.3-4.2 pg/mL	EN
ESTROGEN, TOTAL, SERUM	177.7	pg/mL	EZ

Reference Ranges for Total Estrogen:

Follicular Phase
(1-12 days): 90-590 pg/mL
Luteal Phase: 130-460 pg/mL
TOPODAUSAL: 50-170 pg/mL

The total estrogen assay is not recommended for use in

pre-pubertal children.

PREGNENOLONE, LC/MS/MS 22-237 ng/dL EZ

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Nichols Institute San Juan Capistrano. It has not been cleared or approved by FDA. This assay has been validated

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pursuant to the CLIA	regulations and is us	ed for clinical	
purposes.			10.50
CBC (INCLUDES DIFF/PLT)	A 10	2 0 10 0 17	EN
WHITE BLOOD CELL COUNT	4.7	3.8-10.8 Thousand/uL	
RED BLOOD CELL COUNT	4.10	3.80-5.10 Million/uL	
HEMOGLOBIN	12.5	11.7-15.5 g/dL	
HEMATOCRIT	38.6	35.0-45.0 %	
MCV	94.1 30.5	80.0-100.0 fL	
MCH		27.0-33.0 pg	
MCHC	32.4	32.0-36.0 g/dL	
RDW	12.1	11.0-15.0 %	
PLATELET COUNT	238	140-400 Thousand/uL	
MPV	10.8	7.5-12.5 fL	
ABSOLUTE NEUTROPHILS	2632	1500-7800 cells/uL	
ABSOLUTE LYMPHOCYTES	1575	850-3900 cells/uL	
ABSOLUTE MONOCYTES ABSOLUTE EOSINOPHILS	357 108	200-950 cells/uL	
	28	15-500 cells/uL 0-200 cells/uL	
ABSOLUTE BASOPHILS ABSOLUTE NUCLEATED RBC	0	0 cells/uL	
NEUTROPHILS	56		
LYMPHOCYTES	33.5	96 96 96	
MONOCYTES	7.6	9	
EOSINOPHILS	2.3	9	
BASOPHILS	0.6	8	
DHEA SULFATE	137	23-266 mcg/dL	EN
PROGESTERONE	5.4	ng/mL	EN
PROGESTERONE	3.4	Reference Ranges	TOIN
		Female	
		Follicular Phase < 1.0	
		Luteal Phase 2.6-21.5	
		Post menopausal < 0.5	
		Pregnancy	
		1st Trimester 4.1-34.0	
		2nd Trimester 24.0-76.0	
		3rd Trimester 52.0-302.0	
ESTRADIOL	87	pg/mL	EN
	3753.5.	Reference Range	ISTRACT T
		Follicular Phase: 19-144	
		Mid-Cycle: 64-357	
		Luteal Phase: 56-214	
		Postmenopausal: < or = 31	

Reference range established on post-pubertal patient population. No pre-pubertal reference range established using this assay. For any patients for whom low Estradiol levels are anticipated (e.g. males, pre-pubertal children and hypogonadal/post-menopausal females), the Quest Diagnostics Nichols Institute Estradiol, Ultrasensitive, LCMSMS assay is recommended (order code 30289).

Please note: patients being treated with the drug fulvestrant (Faslodex(R)) have demonstrated significant interference in immunoassay methods for estradiol measurement. The cross reactivity could lead to falsely elevated estradiol test results leading to an



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Test Name In Range Out Of Range Reference Range Lab inappropriate clinical assessment of estrogen status. Quest Diagnostics order code 30289-Estradiol, Ultrasensitive LC/MS/MS demonstrates negligible cross reactivity with fulvestrant. SEX HORMONE BINDING EN 61 17-124 nmol/L GLOBULIN TESTOSTERONE, TOTAL, SLI LC/MS/MS 26 2-45 ng/dL

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Nichols Institute Valencia. It has not been cleared or approved by the US Food and Drug Administration. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

PERFORMING SITE:

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