



Patient Information	Specimen Information	n Client Information
	Specimen: Requisition: Lab Ref #: Collected: Received: Reported:	REQUEST A TEST - PWN HEALTH 7027 MILL RD STE 201 BRECKSVILLE, OH 44141-1852

COMMENTE	FACTING MEC
COMMENTS:	FASTING:YES

Test Name COMPREHENSIVE METABOLIC	In Range Out Of R	Range Reference Range	Lab CB
PANEL			CD
GLUCOSE	91	65-99 mg/dL	
		Fasting reference interval	
UREA NITROGEN (BUN)	9	7-25 mg/dL	
CREATININE	0.54	0.50-1.03 mg/dL	
EGFR	111	> OR = 60 mL/min/1.73m2	
The eGFR is based on the C	CKD-EPI 2021 equation. To	calculate	
the new eGFR from a previous			
result, go to https://www.	kidney.org/professionals	/	
kdoqi/gfr%5Fcalculator			
BUN/CREATININE RATIO	NOT APPLICABLE	6-22 (calc)	
SODIUM	139	135-146 mmol/L	
POTASSIUM	4.2	3.5-5.3 mmol/L	
CHLORIDE	104	98-110 mmol/L	
CARBON DIOXIDE	27	20-32 mmol/L	
CALCIUM	9.5	8.6-10.4 mg/dL	
PROTEIN, TOTAL	7.1	6.1-8.1 g/dL	
ALBUMIN	4.5	3.6-5.1 g/dL	
GLOBULIN	2.6	1.9-3.7 g/dL (calc)	
ALBUMIN/GLOBULIN RATIO	1.7	1.0-2.5 (calc)	
BILIRUBIN, TOTAL	0.6	0.2-1.2 mg/dL	
ALKALINE PHOSPHATASE	98	37-153 U/L	
AST	16	10-35 U/L	
ALT	12	6-29 U/L	
MAGNESIUM	2.1	1.5-2.5 mg/dL	CB
PIAGNESTON		122	

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

IRON	AND	TOTAL	IRON
BIN	DING	CAPAC	ITY

IRON, TOTAL 75
IRON BINDING CAPACITY 383
% SATURATION 20
FERRITIN 18

45-160 mcg/dL

CB

250-450 mcg/dL (calc) 16-45 % (calc) 16-232 ng/mL CB





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Test Name In Range Out Of Range Reference Range Lab

> Reference Range 5.7-19.9 mg/L

VITAMIN B12/FOLATE,

CB

SLI

SLI

SLI

SERUM PANEL VITAMIN B12

234

200-1100 pg/mL

Please Note: Although the reference range for vitamin B12 is 200-1100 pg/mL, it has been reported that between 5 and 10% of patients with values between 200 and 400 pg/mL may experience neuropsychiatric and hematologic abnormalities due to occult B12 deficiency; less than 1% of patients with values above 400 pg/mL will have symptoms.

FOLATE, SERUM 18.6 ng/mL

Reference Range

Low:

<3.4 3.4-5.4

Borderline: Normal:

>5.4

VITAMIN E (TOCOPHEROL)

ALPHA-TOCOPHEROL

mg/L

Levels of alpha-tocopherol <5 mg/L are consistent with Vitamin E deficiency in adults.

Vitamin supplementation within 24 hours prior to blood draw may affect the accuracy of results.

See Endnote 1

BETA-GAMMA-TOCOPHEROL

1.3

17.4

<4.4 mg/L

See Endnote 1

VITAMIN C

VITAMIN C

0.7

137

0.3 - 2.7 mg/dL

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VITAMIN B1 (THIAMINE),

BLOOD, LC/MS/MS

78-185 nmol/L

Vitamin supplementation within 24 hours prior to blood draw may affect the accuracy of results.

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CLIENT SERVICES:

SPECIMEN:





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VITAMIN A (RETINOL) 49 38-98 mcg/dL SLI

**Clin Chem Vol. 34.No.8. pp1625-1628. 1998 Vitamin supplementation within 24 hours prior to blood draw may affect the accuracy of results.

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VITAMIN B6, PLASMA 7.8 2.1-21.7 ng/mL Z3E

(Note)

VITAMIN SUPPLEMENTATION WITHIN 24 HOURS PRIOR TO BLOOD DRAW MAY AFFECT THE ACCURACY OF RESULTS.

THIS TEST WAS DEVELOPED AND ITS ANALYTICAL PERFORMANCE CHARACTERISTICS HAVE BEEN DETERMINED BY MEDFUSION. IT HAS NOT BEEN CLEARED OR APPROVED BY THE FDA. THIS ASSAY HAS BEEN VALIDATED PURSUANT TO THE CLIA REGULATIONS AND IS USED FOR CLINICAL PURPOSES.

MDF med fusion 2501 South State Highway 121, Suite 1100 Lewisville TX 75067 972-966-7300 Michael Chaump, MD

ZINC 83 60-130 mcg/dL CB

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Endnote 1

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Report Status: Final



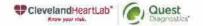
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Endocrinology

Test Name		Result	Reference Range	Lat
TAMIN D,25-OH,TOTAL,IA	Ī	40	30-100 ng/mL	NV
Vitamin D Status	25-OH Vitamin	n D:	7	
Deficiency:	<20 ng,	/mL		
Insufficiency:	20 - 29 ng	/mL		
Optimal:	> or = 30 ng/	/mL		
For 25-OH Vitamin D				
D2-supplementation	and patients for wh	hom quantitatio	n	
of D2 and D3 fracti	정기의 회의 전쟁에 가지면 모기가 있다. 전에 부모를 경기되었다면 가지 않아 되지 않아 되었다.	: [하는 6] [[[[[] [[] [] [] [] [] [] [] [] [] []		
25-OH VIT D, (D2,D3		ommended: order		
code 92888 (patient	s >2yrs).			
For more informatio	n on this test, go	to:		
http://education.qu	estdiagnostics.com,	/faq/FAQ163		
	provided for			
(This link is being	broarded for			

PERFORMING SITE:

NW QUEST DIAGNOSTICS-SEATTLE, 1737 AIRPORT WAY, S. SUITE 200, SEATTLE, WA 98134-1636 Laboratory Director. ROGER W GRAHAM, MD, CLIA: 50D0633094



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			Cardio IQ	Q®			
	Cu	rrent	Risk/	Reference Int	terval		Historical
Test Name	Resul	t & Risk	Optimal Moderate High		Units -	Result & Risk	
	Optimal	Non-Optimal	Optimal	moderate	man		
FATTY ACIDS							
OmegaCheck® Whole Blood: (EPA+DPA+DHA)		4.3	>=5.5	3.8-5.4	<=3.7	% by wt	
ARACHIDONIC ACID/EPA RATIO	31.0		M 2	3.7-40.7		- 1	
OMEGA-6/OMEGA-3 RATIO	9.8			3.7-14.4		44) (32)	
OMEGA-3 TOTAL	3	4.3				% by wt	
EPA	0.5	3		0.2-2.3		% by wt	
DPA	1.3			0.8-1.8		% by wt	
DHA	2.5		***	1.4-5.1		% by wt	
OMEGA-6 TOTAL	4	2.0				% by wt	
ARACHIDONIC ACID	15.5			8.6-15.6		% by wt	
LINOLEIC ACID	23.0			18.6-29.5		% by wt	

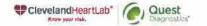
For details on reference ranges please refer to the reference range/comment section of the report.

4myheart Diet & Exercise Coaching Program: Need help achieving and maintaining an optimal weight? Managing stress? Trying to improve physical fitness levels? The 4myheart program provides support and personalized lifestyle guidance to help improve heart health. Please talk to your provider, visit 4myheart.com or call 1-800-432-7889 opt 2 to learn more.

Medical Information For Healthcare Providers: If you have questions about any of the tests in our Cardio IQ offering, please call Client Services at our Quest Diagnostics-Cleveland HeartLab Cardiometabolic Center of Excellence. They can be reached at 866,358,9828, option 1 to arrange a consult with our clinical education team.

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Reference Range/Comments

Analyte Name	In Range	Out Range	Reference Range	Lab
EPA+DPA+DHA	5.5		>5.4 % by wt	Z4M

Increasing blood levels of long-chain n-3 fatty acids are associated with a lower risk of sudden cardiac death (1), Based on the top (75th percentile) and bottom (25th percentile) quartiles of the CHL reference population, the following relative risk categories were established for OmegaCheck: A cut-off of >=5.5% by wt defines a population at optimal relative risk, 3.8-5.4% by wt defines a population at moderate relative risk, and <=3.7% by wt defines a population at high relative risk of sudden cardiac death. The totality of the scientific evidence demonstrates that when consumption of fish oils is limited to 3 g/day or less of EPA and DHA, there is no significant risk for increased bleeding time beyond the normal range. A daily dosage of 1 gram of EPA and DHA lowers the circulating triglycerides by about 7-10% within 2 to 3 weeks. (Reference: 1-Albert et al. NEJM. 2002; 346: 1113-1118). This test is performed by a Liquid Chromatography-Tandem Mass Spectrometry (LC/MS/MS) method. This test was developed and its performance characteristics determined by the Cleveland HeartLab, Inc. It has not been cleared or approved by the U.S. FDA. The Cleveland HeartLab, Inc. is regulated under Clinical Laboratory Improvement Amendments (CLIA) as qualified to perform high-complexity testing. This test is used for clinical purposes, it should not be regarded as investigational or for research.

ARACHIDONIC ACID	15.5	8.6-15.6 % by wt	Z4M
ARACHIDONIC ACID/EPA RATIO	31.0	3.7-40.7	Z4M
DHA	2.5	1.4-5.1 % by wt	Z4M
DPA	1.3	0.8-1.8 % by wt	Z4M
EPA	0.5	0.2-2.3 % by wt	Z4M
LINOLEIC ACID	23.0	18.6-29.5 % by wt	Z4M
OMEGA-3 TOTAL	4,3	% by wt	Z4M
OMEGA-6 TOTAL	42.0	% by wt	Z4M
Cleveland HeartLab measures a number of omega-	6 fatty acids with AA and LA b	eing the two most abundant forms reported.	IX.
OMEGA-6/OMEGA-3 RATIO	9.8	3.7-14.4	Z4M

PERFORMING SITE:

Z4M CLEVELAND HEARTLAB INC, 6701 CARNEGIE AVENUE SUITE 500, CLEVELAND, OH 44103-4623 Laboratory Director: BILL G RICHENDOLLAR, MD, CLIA: 36D1032987

CLIENT SERVICES:

SPECIMEN: