

11/23/2009 8:10:05 AM FROM: LABCORP LCLS BLK TO: 2017917337 LABCORP LCLS BLK Page 1 of 4 A  
 TO: ATTN:Aleksandr Martirosov DO



LabCorp Raritan  
 69 First Avenue  
 Raritan, NJ 08869-1800

Phone: 800-631-5250

Specimen Number <b>321-425-0550-0</b>	Patient ID	Control Number 10077959545	Account Number 29152240	Account Phone Number 201-791-7771	Route NQ
Patient First Name <b>MICHAEL</b>		Patient Middle Name <b>G</b>		Aleksandr Martirosov DO	
Patient SS#	Patient Phone <del>978-255-5555</del>	Total Volume 31-00 Broadway FAIR LAWN NJ 07410			
Age (Y/M/D) 37/08/09	Sex M	Fasting No			
Patient Address 202 COMMONS AT KINGSWOOD DR EAST BRUNSWICK NJ 08816			Additional Information UPIN: 065075		
Date and Time Collected 11/17/09 07:58	Date Entered 11/17/09	Date and Time Reported 11/23/09 08:09ET	Physician Name MARTIROSOV, A	NPI 1700931185	Physician ID

**Tests Ordered**  
 CBC With Differential/Platelet; Comp. Metabolic Panel (14); Testosterone, Free and Total; Luteinizing Hormone (LH), S; Vitamin D, 25-Hydroxy; Hemoglobin A1c; TSH; Prolactin; FSH, Serum; Thyroxine (T4); Triiodothyronine (T3); Sedimentation Rate-Westergren; Ambig Abbrev CMP14 Default; Venipuncture; Fibrinogen Activity; Progesterone; Insulin; Estrogens, Total; C-Reactive Protein, Quant; Triiodothyronine, Free, Serum; Sex Horm Binding Glob, Serum; Ambig Abbrev CBC/Diff Default; Handwritten Order

A courtesy copy of this report has been sent to the patient.

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
<b>CBC With Differential/Platelet</b>					
WBC	7.0		x10E3/uL	4.0 - 10.5	01
RBC	5.87	High	x10E6/uL	4.10 - 5.60	01
Hemoglobin	18.3	High	g/dL	12.5 - 17.0	01
Hematocrit	55.3	High	%	36.0 - 50.0	01
MCV	80		fL	80 - 98	01
MCH	26.6	Low	pg	27.0 - 34.0	01
MCHC	33.0		g/dL	32.0 - 36.0	01
RDW	15.5	High	%	11.7 - 15.0	01
Platelets	179		x10E3/uL	140 - 415	01
Neutrophils	68		%	40 - 74	01
Lymphs	21		%	14 - 46	01
Monocytes	8		%	4 - 13	01
Eos	3		%	0 - 7	01
Basos	0		%	0 - 3	01
Neutrophils (Absolute)	4.8		x10E3/uL	1.8 - 7.8	01
Lymphs (Absolute)	1.5		x10E3/uL	0.7 - 4.5	01
Monocytes (Absolute)	0.6		x10E3/uL	0.1 - 1.0	01
Eos (Absolute)	0.2		x10E3/uL	0.0 - 0.4	01
Baso (Absolute)	0.0		x10E3/uL	0.0 - 0.2	01
<b>Comp. Metabolic Panel (14)</b>					
Glucose, Serum	104	High	mg/dL	65 - 99	01
BUN	22		mg/dL	5 - 26	01
Creatinine, Serum	1.21		mg/dL	0.76 - 1.27	01
eGFR	>59		mL/min/1.73	>59	
eGFR AfricanAmerican	>59		mL/min/1.73	>59	

Note: Persistent reduction for 3 months or more in an eGFR

<del>XXXXXXXXXX</del> MICHAEL G	321-425-0550-0	Seq # 0051
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Specimen Number  
**321-425-0550-0**

<b>MICHAEL G</b>		Control Number		Date and Time Collected	Date Reported	Sex	Age(Y/M/D)	Date of Birth
Account Number	Patient ID	10077959545	11/17/09 07:58	11/23/09	M	37/08/09	03/08/72	
29152240								

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
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<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](http://www.kdoqi.org).

BUN/Creatinine Ratio	18			8 - 27	
Sodium, Serum	144		mmol/L	135 - 145	01
Potassium, Serum	4.5		mmol/L	3.5 - 5.2	01
Chloride, Serum	103		mmol/L	97 - 108	01
Carbon Dioxide, Total	23		mmol/L	20 - 32	01
Calcium, Serum	9.8		mg/dL	8.5 - 10.6	01
Protein, Total, Serum	7.6		g/dL	6.0 - 8.5	01
Albumin, Serum	5.1		g/dL	3.5 - 5.5	01
Globulin, Total	2.5		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	75		IU/L	25 - 150	01
AST (SGOT)	45	High	IU/L	0 - 40	01
ALT (SGPT)	46		IU/L	0 - 55	01

**Testosterone, Free and Total**

Testosterone, Serum	1256	High	ng/dL	280 - 800	01
Free Testosterone (Direct)	>50.0	High	ng/mL	8.7 - 25.1	01
**Please note reference interval change**					
**Verified by repeat analysis**					

**Testosterone, Free and Total**

LH	<0.2	Low	mIU/mL	1.7 - 8.6	01
**Please note reference interval change**					

**Vitamin D, 25-Hydroxy**

Vitamin D, 25-Hydroxy	74.5		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.					

**Hemoglobin A1c**

Hemoglobin A1c	5.7		%	<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.					

TSH	1.040		uIU/mL	0.450 - 4.500	01
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Prolactin	4.9		ng/mL	4.0 - 15.2	01
**Please note reference interval change**					

<b>MICHAEL G</b>	321-425-0550-0	Sen # 0051
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TO:

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Phone: 800-631-5250

<b>MICHAEL G</b>		Specimen Number <b>321-425-0550-0</b>	
Account Number 29152240	Patient ID	Control Number 10077959545	Date and Time Collected 11/17/09 07:58
		Date Reported 11/23/09	Sex M
		Age(Y/M/D) 37/08/09	Date of Birth 03/08/72

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
FSH, Serum FSH	0.7	Low	mIU/mL	1.5 - 12.4	01
	**Please note reference interval change**				
Thyroxine (T4)	9.7		ug/dL	4.5 - 12.0	01
Triiodothyronine (T3)	126		ng/dL	83 - 200	01
Sedimentation Rate-Westergren	2		mm/hr	0 - 15	01

**Ambig Abbrev CMP14 Default**

A hand-written panel/profile was received from your office. In accordance with the LabCorp Ambiguous Test Code Policy dated July 2003, we have completed your order by using the closest currently or formerly recognized AMA panel. We have assigned Comprehensive Metabolic Panel (14), Test Code #322000 to this request. If this is not the testing you wished to receive on this specimen, please contact the LabCorp Client Inquiry/Technical Services Department to clarify the test order. We appreciate your business.

Fibrinogen Activity	348		mg/dL	193 - 423	01
Progesterone	1.5	High	ng/mL	0.2 - 1.4	01
	**Please note reference interval change**				
Insulin	17.2		uIU/mL	0.0 - 29.1	01
	**Effective December 7, 2009, Insulin will be** changing to the Roche ECLIA methodology. The reference interval will be changing to: 0.0 - 24.9 uIU/mL				
	**PLEASE NOTE: Specimen requirements will be changing** to: FROZEN SERUM				

Estrogens, Total	117		pg/mL		02
			Prepubertal	<40	
			Adult Male:	40 - 115	
			Postmenopausal	<40	
			HMG Treatment:		
			Therapeutic	400 - 800	
C-Reactive Protein, Quant	3.9		mg/L	0.0 - 4.9	01
Triiodothyronine, Free, Serum	3.8		pg/mL	2.0 - 4.4	01
Sex Horm Binding Glob, Serum	5	Low	nmol/L	13 - 71	01
	**Effective December 7, 2009, SHBG will be** changing to the Roche ECLIA methodology. The reference interval will be changed to: Male 14.5 - 48.4 nmol/L Female				

<b>MICHAEL G</b>	<b>321-425-0550-0</b>	Seq #0051
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Patient Name: <b>MICHAEL G</b>					Specimen Number: <b>321-425-0550-0</b>			
Account Number: 29152240	Patient ID	Control Number: 10077959545	Date and Time Collected: 11/17/09 07:58	Date Reported: 11/23/09	Sex: M	Age(Y/M/D): 37/08/09	Date of Birth: 03/08/72	

17 - 50 years 26.1 - 110.0 nmol/L  
 Postmenopausal (Untreated) 14.1 - 68.9 nmol/L

**Ambig Abbrev CBC/DIFF Default**

01

A hand-written panel/profile was received from your office. In accordance with the LabCorp Ambiguous Test Code Policy dated July 2003, we have assigned CBC with Differential/Platelet, Test Code #005009 to this request. If this is not the testing you wished to receive on this specimen, please contact the LabCorp Client Inquiry/ Technical Services Department to clarify the test order. We appreciate your business.

01	RN	LabCorp Raritan 69 First Avenue, Raritan, NJ 08869-1800	Dir: Michael Mahoney, MD
02	BN	LabCorp Burlington 1447 York Court, Burlington, NC 27215-3361	Dir: William F Hancock, MD
For inquiries, the physician may contact Branch: 800-223-0631 Lab: 800-631-5250			

WEITZMAN, MICHAEL G	321-425-0550-0	Seq # 0051
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**FINAL REPORT**

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