MyQuest™

CHAMBERS,KEVIN

DOB: 09/14/1993
Sex: M
Phone: (505) 967-8903
Patient ID: 4094481

Age: 31
Fasting:

Specimen: JZ492660A
Requisition: 0001967
Lab Reference ID: 45850782
Report Status: FINAL / SEE REPORT

Collected: 03/18/2025 08:10
Received: 03/18/2025 08:12
Reported: 03/25/2025 08:11

Client #: 50544437
JAY,JAN
ENHANCED WELLNESS
JAN JAY DOM/JOSEPH JAROS MD
5200 EUBANK BLVD NE STE C3
ALBUQUERQUE, NM 87111-1764
Phone: (505) 323-8100
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⚠ LIPID PANEL, STANDARD

Analyte	Value	
CHOLESTEROL, TOTAL	195	Reference Range: <200 mg/dL
⚠ **HDL CHOLESTEROL**	35 L	Reference Range: > OR = 40 mg/dL
⚠ **TRIGLYCERIDES** If a non-fasting specimen was collected, consider repeat triglyceride testing on a fasting specimen if clinically indicated. Jacobson et al. J. of Clin. Lipidol. 2015;9:129-169.	258 H	Reference Range: <150 mg/dL
⚠ **LDL-CHOLESTEROL** Reference range: <100 Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with > or = 2 CHD risk factors. LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C. Martin SS et al. JAMA. 2013;310(19): 2061-2068 (http://education.QuestDiagnostics.com/faq/FAQ164)	120 H	mg/dL (calc)
⚠ **CHOL/HDLC RATIO**	5.6 H	Reference Range: <5.0 (calc)
⚠ **NON HDL CHOLESTEROL** For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic option.	160 H	Reference Range: <130 mg/dL (calc)

⚠ COMPREHENSIVE METABOLIC PANEL

Analyte	Value	
⚠ **GLUCOSE** Fasting reference interval For someone without known diabetes, a glucose value between 100 and 125 mg/dL is consistent with prediabetes and should be confirmed with a follow-up test.	101 H	Reference Range: 65-99 mg/dL
UREA NITROGEN (BUN)	19	Reference Range: 7-25 mg/dL
CREATININE	0.96	Reference Range: 0.60-1.26 mg/dL
EGFR	108	Reference Range: > OR = 60 mL/min/1.73m2
BUN/CREATININE RATIO Not Reported: BUN and Creatinine are within reference range.	SEE NOTE:	Reference Range: 6-22 (calc)
SODIUM	137	Reference Range: 135-146 mmol/L
POTASSIUM	4.2	Reference Range: 3.5-5.3 mmol/L

CHLORIDE	102	Reference Range: 98-110 mmol/L
CARBON DIOXIDE	29	Reference Range: 18-30 mmol/L
CALCIUM	9.5	Reference Range: 8.6-10.3 mg/dL
PROTEIN, TOTAL	7.5	Reference Range: 6.1-8.1 g/dL
ALBUMIN	4.9	Reference Range: 3.6-5.1 g/dL
GLOBULIN	2.6	Reference Range: 1.9-3.7 g/dL (calc)
ALBUMIN/GLOBULIN RATIO	1.9	Reference Range: 1.0-2.5 (calc)
BILIRUBIN, TOTAL	0.8	Reference Range: 0.2-1.2 mg/dL
ALKALINE PHOSPHATASE	83	Reference Range: 36-130 U/L
AST	25	Reference Range: 10-40 U/L
ALT	44	Reference Range: 9-46 U/L

⚠ IRON AND TOTAL IRON BINDING CAPACITY

Analyte	Value	
IRON, TOTAL	153	Reference Range: 50-180 mcg/dL
⚠ IRON BINDING CAPACITY	433 H	Reference Range: 250-425 mcg/dL (calc)
% SATURATION	35	Reference Range: 20-48 % (calc)

⚠ CBC (INCLUDES DIFF/PLT)

Analyte	Value	
WHITE BLOOD CELL COUNT	5.5	Reference Range: 3.8-10.8 Thousand/uL
⚠ RED BLOOD CELL COUNT	6.33 H	Reference Range: 4.33-5.82 Million/uL
⚠ HEMOGLOBIN Verified by repeat analysis.	19.4 H	Reference Range: 13.7-17.7 g/dL
⚠ HEMATOCRIT	56.4 H	Reference Range: 41.5-53.8 %
MCV	89.1	Reference Range: 80.0-100.0 fL
MCH	30.6	Reference Range: 27.0-33.0 pg
MCHC For adults, a slight decrease in the calculated MCHC value (in the range of 30 to 32 g/dL) is most likely not clinically significant; however, it should be interpreted with caution in correlation with other red cell parameters and the patient's clinical condition.	34.4	Reference Range: 32.0-36.0 g/dL
RDW	12.4	Reference Range: 11.0-15.0 %
PLATELET COUNT	221	Reference Range: 140-400 Thousand/uL
MPV	10.6	Reference Range: 7.5-12.5 fL
ABSOLUTE NEUTROPHILS	3003	Reference Range: 1500-7800 cells/uL
ABSOLUTE LYMPHOCYTES	1771	Reference Range: 850-3900 cells/uL
ABSOLUTE MONOCYTES	539	Reference Range: 200-950 cells/uL
ABSOLUTE EOSINOPHILS	149	Reference Range: 15-500 cells/uL
ABSOLUTE BASOPHILS	39	Reference Range: 0-200 cells/uL

NEUTROPHILS	54.6	%
LYMPHOCYTES	32.2	%
MONOCYTES	9.8	%
EOSINOPHILS	2.7	%
BASOPHILS	0.7	%

VITAMIN D,25-OH,TOTAL,IA

Analyte	Value	
VITAMIN D,25-OH,TOTAL,IA	30	Reference Range: 30-100 ng/mL

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Vitamin D Status         25-OH Vitamin D:

Deficiency:                    <20 ng/mL
Insufficiency:               20 - 29 ng/mL
Optimal:                   > or = 30 ng/mL

For 25-OH Vitamin D testing on patients on
D2-supplementation and patients for whom quantitation
of D2 and D3 fractions is required, the QuestAssureD(TM)
25-OH VIT D, (D2,D3), LC/MS/MS is recommended: order
code 92888 (patients >2yrs).
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COMMENT

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See Note 1

Note 1

For additional information, please refer to http://education.QuestDiagnostics.com/faq/FAQ199 (This link
is being provided for informational/ educational purposes only.)
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TESTOSTERONE, FREE (DIALYSIS), TOTAL (MS) AND SEX HORMONE BINDING GLOBULIN

Analyte	Value	
TESTOSTERONE, TOTAL, MS	379	Reference Range: 250-1100 ng/dL

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Men with clinically significant hypogonadal symptoms and testosterone values
repeatedly in the range of the 200-300 ng/dL or less, may benefit from
testosterone treatment after adequate risk and benefits counseling.

For additional information, please refer to
https://education.questdiagnostics.com/faq/FAQ165
(This link is being provided for informational/educational purposes only.)
(Note)

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.
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TESTOSTERONE, FREE	81.5	Reference Range: 35.0-155.0 pg/mL

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(Note)
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
Ithiel James L. Frame, MD, PhD
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SEX HORMONE BINDING GLOBULIN	18.2	Reference Range: 10-50 nmol/L

MAGNESIUM

Analyte	Value	
MAGNESIUM	2.2	Reference Range: 1.5-2.5 mg/dL

T3 REVERSE, LC/MS/MS

Analyte	Value	
T3 REVERSE, LC/MS/MS	12	Reference Range: 8-25 ng/dL

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. 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.

ANA SCREEN, IFA, W/REFL TITER AND PATTERN

Analyte	Value	
ANA SCREEN, IFA	NEGATIVE	Reference Range: NEGATIVE

ANA IFA is a first line screen for detecting the presence of up to approximately 150 autoantibodies in various autoimmune diseases. A negative ANA IFA result suggests an ANA-associated autoimmune disease is not present at this time, but is not definitive. If there is high clinical suspicion for Sjogren's syndrome, testing for anti-SS-A/Ro antibody should be considered. Anti-Jo-1 antibody should be considered for clinically suspected inflammatory myopathies.

AC-0: Negative

International Consensus on ANA Patterns (https://doi.org/10.1515/cclm-2018-0052)

For additional information, please refer to http://education.QuestDiagnostics.com/faq/FAQ177 (This link is being provided for informational/ educational purposes only.)

HS CRP

Analyte	Value	
HS CRP	2.7	mg/L

Reference Range
Optimal <1.0
Jellinger PS et al. Endocr Pract.2017;23(Suppl 2):1-87.
For ages >17 Years:

hs-CRP mg/L	Risk According to AHA/CDC Guidelines
<1.0	Lower relative cardiovascular risk.
1.0-3.0	Average relative cardiovascular risk.
3.1-10.0	Higher relative cardiovascular risk. Consider retesting in 1 to 2 weeks to exclude a benign transient elevation in the baseline CRP value secondary to infection or inflammation.
>10.0	Persistent elevation, upon retesting, may be associated with infection and inflammation.

Pearson TA, Mensah GA, Alexander RW, et al. Markers of inflammation and cardiovascular disease: application to clinical and public health practice: A statement for healthcare professionals from the Centers for Disease Control and Prevention and the American Heart Association. Circulation 2003; 107(3): 499-511.

GLUCOSE-6-PHOSPHATE DEHYDROGENASE, QN

Analyte	Value	
GLUCOSE-6-PHOSPHATE DEHYDROGENASE	12.1	Reference Range: 7.0-20.5 U/g Hgb

CORTISOL, TOTAL, LC/MS

Analyte	Value	
CORTISOL, TOTAL, LC/MS	**21.5**	mcg/dL

Adult Reference Ranges for Cortisol, Total:

8-10 AM 4.6-20.6 mcg/dL
4-6 PM 1.8-13.6 mcg/dL

Cortisol Response to ACTH
Peak >20.0 mcg/dL
Peak >16.0 mcg/dL after IM injection

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. 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.

THYROID PEROXIDASE ANTIBODIES

Analyte	Value	
THYROID PEROXIDASE ANTIBODIES	**<1**	Reference Range: <9 IU/mL

HOMOCYSTEINE

Analyte	Value	
HOMOCYSTEINE	**6.5**	Reference Range: <11.4 umol/L

Homocysteine is increased by functional deficiency of folate or vitamin B12. Testing for methylmalonic acid differentiates between these deficiencies. Other causes of increased homocysteine include renal failure, folate antagonists such as methotrexate and phenytoin, and exposure to nitrous oxide.
Selhub J, et al., Ann Intern Med. 1999;131(5):331-9.

DHEA SULFATE

Analyte	Value	
DHEA SULFATE	**170**	Reference Range: 93-415 mcg/dL

FERRITIN

Analyte	Value	
FERRITIN	**114**	Reference Range: 38-380 ng/mL

PROGESTERONE

Analyte	Value	
PROGESTERONE	**<0.5**	Reference Range: <1.4 ng/mL

T3, TOTAL

Analyte	Value	
T3, TOTAL	**105**	Reference Range: 76-181 ng/dL

T4, FREE

Analyte	Value	
T4, FREE	1.1	Reference Range: 0.8-1.8 ng/dL

T4 (THYROXINE), TOTAL

Analyte	Value	
T4 (THYROXINE), TOTAL	6.2	Reference Range: 4.9-10.5 mcg/dL

TSH

Analyte	Value	
TSH	2.19	Reference Range: 0.40-4.50 mIU/L

T3, FREE

Analyte	Value	
T3, FREE	3.9	Reference Range: 2.3-4.2 pg/mL

ESTRADIOL

Analyte	Value	
ESTRADIOL	29	Reference Range: < OR = 39 pg/mL

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 inappropriate clinical assessment of estrogen status. Quest Diagnostics order code 30289-Estradiol, Ultrasensitive LC/MS/MS demonstrates negligible cross reactivity with fulvestrant.

VITAMIN B12/FOLATE, SERUM PANEL

Analyte	Value	
VITAMIN B12	746	Reference Range: 200-1100 pg/mL
FOLATE, SERUM	19.4	ng/mL

Reference Range
Low: <3.4
Borderline: 3.4-5.4
Normal: >5.4

PSA (FREE AND TOTAL)

Analyte	Value	
PSA, TOTAL	0.6	Reference Range: < OR = 4.0 ng/mL
PSA, FREE	0.3	ng/mL

Analyte	Value	
PSA, % FREE	50	Reference Range: >25 % (calc)

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PSA(ng/mL)      Free PSA(%)     Estimated(x) Probability
                                     of Cancer(as%)
0-2.5              (*)              Approx. 1
2.6-4.0(1)         0-27(2)                 24(3)
4.1-10(4)          0-10                    56
                   11-15                   28
                   16-20                   20
                   21-25                   16
                   >or =26                  8
>10(+)             N/A                    >50

References:(1)Catalona et al.:Urology 60: 469-474 (2002)
           (2)Catalona et al.:J.Urol 168: 922-925 (2002)
              Free PSA(%)   Sensitivity(%)  Specificity(%)
              < or = 25          85              19
              < or = 30          93               9
           (3)Catalona et al.:JAMA 277: 1452-1455 (1997)
           (4)Catalona et al.:JAMA 279: 1542-1547 (1998)

(x)These estimates vary with age, ethnicity, family
   history and DRE results.
(*)The diagnostic usefulness of % Free PSA has not been
   established in patients with total PSA below 2.6 ng/mL
(+)In men with PSA above 10 ng/mL, prostate cancer risk is
   determined by total PSA alone.

The Total PSA value from this assay system is
standardized against the equimolar PSA standard.
The test result will be approximately 20% higher
when compared to the WHO-standardized Total PSA
(Siemens assay). Comparison of serial PSA results
should be interpreted with this fact in mind.

PSA was performed using the Beckman Coulter
Immunoassay method. Values obtained from different
assay methods cannot be used interchangeably. PSA
levels, regardless of value, should not be interpreted
as absolute evidence of the presence or absence of
disease.
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HEMOGLOBIN A1c

Analyte	Value	
HEMOGLOBIN A1c	5.4	Reference Range: <5.7 % of total Hgb

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For the purpose of screening for the presence of
diabetes:

<5.7%       Consistent with the absence of diabetes
5.7-6.4%    Consistent with increased risk for diabetes
            (prediabetes)
> or =6.5%  Consistent with diabetes

This assay result is consistent with a decreased risk
of diabetes.

Currently, no consensus exists regarding use of
hemoglobin A1c for diagnosis of diabetes in children.

According to American Diabetes Association (ADA)
guidelines, hemoglobin A1c <7.0% represents optimal
control in non-pregnant diabetic patients. Different
metrics may apply to specific patient populations.
Standards of Medical Care in Diabetes(ADA).
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Performing Sites

EZ Quest Diagnostics/Nichols SJC-San Juan Capistrano,, 33608 Ortega Hwy, San Juan Capistrano, CA 92675-2042 Laboratory Director: Irina Maramica MD,PhD,MBA

IG Quest Diagnostics-Dallas Lab, 4770 Regent Blvd, Irving, TX 75063-2445 Laboratory Director: Clare McCormick-Baw MD, PhD

QJP Quest Diagnostics-Central Laboratory, 5601 Office Blvd NE, Albuquerque, NM 87109-5879 Laboratory Director: Robert L Breckenridge, MD

Z3E MedFusion-MedFusion, 2501 South State Highway 121, Suite 1100, Lewisville, TX 75067-8188 Laboratory Director: Ithiel James L Frame MD,PhD

Key

Priority Out of Range Out of Range

These results have been sent to the person who ordered the tests. Your receipt of these results should not be viewed as medical advice and is not meant to replace discussion with your doctor or other healthcare professional.