



Ordering Provider: JIM D THOMPSON, MD		Patient Name: WINTER, JOCELYN L			
		Patient ID (MRN): AANT8798		Client PT ID (MRN):	
		Date of Birth: 5/17/1991 Sex: F Age: 33Y			
Location: ONS;1		Patient Phone #: (505) 480-8995		Portal Patient ID: 66986326	
Requisition#: 333365322	Report Status: Preliminary	Collection Date/Time: 04/07/2025 11:17		Receive Date/Time: 04/07/2025 15:32	
Test Name	Flag	Result	Ref Range	Units	Lab
Comp Metabolic Panel					
Sodium		140	135-145	mmol/L	{TC}
Potassium		3.9	3.5-5.2	mmol/L	{TC}
Chloride		105	98-107	mmol/L	{TC}
CO2	L	15	19-29	mmol/L	{TC}
Anion Gap	H	19	<18	mmol/L	{TC}
Glucose		91	60-100	mg/dL	{TC}
BUN		9	7-25	mg/dL	{TC}
Creatinine		0.65	0.50-1.04	mg/dL	{TC}
Calculated eGFR		119	>60	mL/min/1.73m2	{TC}
The eGFR is calculated using the 2021 CKD-EPI creatinine equation that does not use a race coefficient.					
GFR Comment		An eGFR based on creatinine concentration is only useful when renal function is stable. It is not suitable for individuals with unstable creatinine concentrations or extremes in muscle mass or diet.			{TC}
Calcium		9.2	8.5-10.2	mg/dL	{TC}
Total Protein	H	8.3	6.1-8.2	gm/dL	{TC}
Albumin		3.8	3.3-5.2	gm/dL	{TC}
Globulin	H	4.5	2.4-4.2	gm/dL	{TC}
Bilirubin, total		<0.2	0.0-1.2	mg/dL	{TC}
Alk Phos		119	40-129	U/L	{TC}
AST(SGOT)		37	10-40	U/L	{TC}
ALT(SGPT)	H	51	10-40	U/L	{TC}
Hep C Antibody					
Hep C Antibody		Nonreactive	Nonreactive		{TC}
Signal/Cutoff Ratio		Not applicable	0.00-0.89 {s_co_ratio}		{TC}
FSH					
		5.7	mIU/mL		{TC}
Female Reference Interval: Follicular phase: 3.4-12.5 mIU/mL Ovulation: 4.7-21.5 mIU/mL Luteal phase: 1.7-7.7 mIU/mL Postmenopausal: 25.8-134.8 mIU/mL					
HIV Screen					
		Nonreactive	Nonreactive		{TC}

Legend: H= High, L= Low, @= Abnormal, *= Critical Value

The information contained in this message is confidential information intended ONLY for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law. If you have received this communication in error, PLEASE NOTIFY US IMMEDIATELY by telephone and shred/delete the original message.

Continued



Ordering Provider: JIM D THOMPSON, MD		Patient Name: WINTER, JOCELYN L			
		Patient ID (MRN): AANT8798		Client PT ID (MRN):	
		Date of Birth: 5/17/1991 Sex: F Age: 33Y			
Location: ONS;1		Patient Phone #: (505) 480-8995		Portal Patient ID: 66986326	
Requisition#: 333365322	Report Status: Preliminary	Collection Date/Time: 04/07/2025 11:17		Receive Date/Time: 04/07/2025 15:32	
Test Name	Flag	Result	Ref Range	Units	Lab
<p>New Mexico state law requires informed consent before you have human immunodeficiency virus (HIV) tests performed on your patients. The ordering physician is responsible for obtaining the consent, and TriCore Reference Laboratories requires that it has been obtained. Results of HIV tests are disclosed from records whose confidentiality is protected by state law. State law prohibits making any further disclosure of such information without the specific written consent of the person to whom such information pertains, or as otherwise permitted by state law. A person who makes an unauthorized disclosure of this information is guilty of a petty misdemeanor and shall be sentenced to imprisonment in the county jail for a definite term not to exceed six months or the payment of a fine not more than five hundred dollars (\$500), or both.</p> <p>This information has been disclosed to you from records that may contain information whose confidentiality is protected by state law, such as information about HIV or sexually transmitted diseases. State law prohibits you from making any further disclosure of such information without the specific written consent of the person to whom such information pertains, or as otherwise permitted by state law. A person who makes an unauthorized disclosure of this information is guilty of a petty misdemeanor and shall be sentenced to imprisonment in the county jail for a definite term not to exceed six months or the payment of a fine of not more than five hundred dollars (\$500), or both.</p>					
Prolactin		14.8	4.8-23.3	ng/mL	{TC}
Reference interval is for non-pregnant females. Pregnancy, lactation, and the administration of oral contraceptives can increase prolactin concentrations.					
Progesterone		<0.20		ng/mL	{TC}
<p>Female Reference Interval: Follicular phase: <0.19 ng/mL Ovulation: 0.05 - 4.14 ng/mL Luteal phase: 4.11 - 14.5 ng/mL Postmenopausal: <0.20 ng/mL 1st Trimester: 11.0-44.3 ng/mL 2nd Trimester: 25.4-83.4 ng/mL 3rd Trimester: 58.7-214 ng/mL</p>					
Hep B Surface Ag		Nonreactive	Nonreactive		{TC}
{TC} = Performed at TriCore Reference Laboratories, 1001 Woodward PL NE, Albuquerque, NM 87102. CLIA 32D0534957 David Grenache, PhD					

Legend: H= High, L= Low, @= Abnormal, *= Critical Value

The information contained in this message is confidential information intended ONLY for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. Unauthorized re-disclosure or failure to maintain confidentiality could subject you to penalties described in federal and state law. If you have received this communication in error, PLEASE NOTIFY US IMMEDIATELY by telephone and shred/delete the original message.