

| Version: 7 of 7 | | | | | |
|--|-----------------|--|---------------|-------------------------|---------------------|
| Detail Results: Patient Info | | | | Results Info | |
| Patient Name: | KRYSTIE BABALOS | Home Phone: | (604)838-0317 | Date of Service: | 2025-06-26 07:57:00 |
| Date of Birth: | 1984-07-18 | Work Phone: | | Date Received: | 2025-07-09 15:52 |
| Age: | 40 years | Sex: | F | Report Status: | Final |
| Health #: | 9015128098 | Patient Location: | LIFELABS | Client Ref. #: | 39206 |
| | | | | Accession #: | 25-215543015 |
| Requesting Client: JOSEPH NOBLE | | cc: Client: CAITLIN DUNNE, LAURA NICHOLAS, JOSEPH NOBLE | | | |

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|----------------------------|---------------|------------|------------------------|--------------|----------------------------|---------------|
| GENERAL | | | | | | |
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| General Information | | | | | | |
| hours pc: 13 | | | | | | |

| | | | | | | |
|-------------------------|---------------|------------|------------------------|--------------|----------------------------|---------------|
| HAEM1 | | | | | | |
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Hematology Panel | | | | | | |
| WBC | 7.7 | N | 4.0-10.0 | 10*9/L | 2025-06-26 13:30:22 | Final |
| RBC | 5.09 | A | 3.50-5.00 | 10*12/L | 2025-06-26 13:30:22 | Final |
| Hemoglobin | 139 | N | 115-155 | g/L | 2025-06-26 13:30:22 | Final |
| Hematocrit | 0.44 | N | 0.35-0.45 | L/L | 2025-06-26 13:30:22 | Final |
| MCV | 86 | N | 82-98 | fl | 2025-06-26 13:30:22 | Final |
| MCH | 27.3 | A | 27.5-33.5 | pg | 2025-06-26 13:30:22 | Final |
| MCHC | 316 | N | 300-370 | g/L | 2025-06-26 13:30:22 | Final |
| RDW | 12.9 | N | 11.5-14.5 | % | 2025-06-26 13:30:22 | Final |
| Platelet Count | 242 | N | 150-400 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Neutrophils | 4.5 | N | 2.0-7.5 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Lymphocytes | 2.3 | N | 1.0-4.0 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Monocytes | 0.7 | N | 0.1-0.8 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Eosinophils | 0.1 | N | 0.0-0.7 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Basophils | 0.0 | N | 0.0-0.2 | 10*9/L | 2025-06-26 13:30:22 | Final |
| Granulocytes Immature | 0.0 | N | 0.0-0.1 | 10*9/L | 2025-06-26 13:30:22 | Final |
| ESR | 11 | N | 2-30 | mm/hr | 2025-06-26 14:30:44 | Final |

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|--|---------------|------------|------------------------|--------------|----------------------------|---------------|
| CHEM1 | | | | | | |
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Iron / TIBC | | | | | | |
| Iron | 19.5 | N | 10.6-33.8 | umol/L | 2025-06-27 05:40:21 | Final |
| Transferrin | 2.55 | N | 2.00-4.00 | g/L | 2025-06-27 05:40:21 | Final |
| Iron Saturation | 0.30 | N | 0.13-0.45 | | 2025-06-27 05:40:21 | Final |
| The reference interval has changed at the higher end as 45% or 0.45 TSAT is suggestive of iron overload. | | | | | | |
| Vitamin B12 | 498 | | | pmol/L | 2025-06-27 05:40:21 | Final |

| CHEM1 | | | | | | |
|--|---|-----|-----------------|-------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Ferritin | > 220 pmol/L Normal, deficiency unlikely 150-220 pmol/L Borderline, deficiency is possible < 150 pmol/L Low, consistent with deficiency Effective July 15 2024, clinical cut-offs will replace reference intervals for test interpretation. | | | | | |
| | 150 | N | 15-247 | ug/L | 2025-06-27 05:40:21 | Final |
| Adults >18 y: <15 ug/L: diagnostic of iron deficiency 15-30 ug/L: probable iron deficiency >30 ug/L: iron deficiency unlikely >100 ug/L: normal iron stores =>600 ug/L: consider test for iron overload See BC guideline for Iron Deficiency Diagnosis and Management, 2019 | | | | | | |

| CHEM4 | | | | | | |
|---|--------|-----|-----------------|--------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Glucose Fasting | 5.5 | N | 3.3-5.5 | mmol/L | 2025-06-27 05:40:21 | Final |
| Electrolytes | | | | | | |
| Sodium | 140 | N | 135-145 | mmol/L | 2025-06-27 05:40:21 | Final |
| Potassium | 4.1 | N | 3.5-5.0 | mmol/L | 2025-06-27 05:40:21 | Final |
| Creatinine/eGFR | | | | | | |
| Creatinine | 62 | N | 45-90 | umol/L | 2025-06-27 05:40:21 | Final |
| Estimated GFR | 109 | N | >=60 | | 2025-06-27 05:40:21 | Final |
| Units for eGFR are mL/min/1.73sq.m Kidney function estimate based on assumption of a stable serum creatinine concentration: diet, drugs, pregnancy, clinical state and muscle mass can affect accuracy of the estimate. Urinary ACR may assist interpretation. See https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/chronic-kidney-disease | | | | | | |
| Gamma GT | 9 | N | <44 | U/L | 2025-06-27 05:40:21 | Final |
| Alanine Aminotransferase | 11 | N | <36 | U/L | 2025-06-27 05:40:21 | Final |

| CHEM6 | | | | | | |
|-----------------|--------|-----|-----------------|--------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Lipids | | | | | | |
| Cholesterol | 4.80 | N | 2.00-5.19 | mmol/L | 2025-06-27 05:40:21 | Final |
| LDL Cholesterol | 2.69 | N | 1.50-3.40 | mmol/L | 2025-06-27 05:40:21 | Final |

| CHEM6 | | | | | | |
|--|--------|-----|-----------------|--------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| <p>The optimal LDL cholesterol level for intermediate and high risk individuals is ≤ 2.00 mmol/L. If triglycerides are ≥ 1.50 mmol/L, consider monitoring of alternate lipid targets non HDL-cholesterol or apoB. For low risk individuals with LDL cholesterol ≥ 5.00 mmol/L, target reduction of LDL cholesterol ≥ 50 percent. See Can J Cardiol 2013 vol 29 pgs 151 to 167.</p> | | | | | | |
| HDL Cholesterol | 1.81 | N | >1.19 | mmol/L | 2025-06-27 05:40:21 | Final |
| Chol/HDL (Risk Ratio) | 2.65 | N | <4.4 | | 2025-06-27 05:40:21 | Final |
| Non HDL Cholesterol | 2.99 | | | mmol/L | 2025-06-27 05:40:21 | Final |
| <p>Non HDL-cholesterol is calculated from total cholesterol and HDL-C and is not affected by the fasting status of the patient. The optimal non HDL-cholesterol level for intermediate and high risk individuals is ≤ 2.60 mmol/L. See Can J Cardiol 2013 vol 29 pgs 151 to 167.</p> | | | | | | |
| Triglycerides | 0.67 | N | <2.21 | mmol/L | 2025-06-27 05:40:21 | Final |

| CHEM7 | | | | | | |
|--------------|--------|-----|-----------------|--------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Homocysteine | 5.6 | N | 5.1-15.4 | umol/L | 2025-06-26 14:50:23 | Final |

| CHEM11 | | | | | | |
|---|--------|-----|-----------------|-------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| TSH | 2.28 | N | 0.32-5.04 | mU/L | 2025-06-27 05:40:21 | Final |
| <p>The FT4 and FT3 orders were cancelled as per BC Guidelines. However, the specimen will be stored for seven days. Gestational reference intervals: 1st Trimester 0.10-3.50 mU/L 2nd Trimester 0.30-3.50 mU/L 3rd Trimester 0.45-4.00 mU/L</p> | | | | | | |
| Thyroperoxidase Ab | 14 | N | <35 | IU/mL | 2025-06-26 14:30:44 | Final |

| CHEM15 | | | | | | |
|--|--------|-----|-----------------|--------|---------------------|--------|
| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
| Estradiol | 2977 | A | | pmol/L | 2025-06-27 05:40:21 | Final |
| <p>Follicular: 77 - 921 pmol/L Midcycle: 139 - 2382 pmol/L Luteal: 77 - 1145 pmol/L Postmenopausal: <103 pmol/L</p> | | | | | | |
| Progesterone | 158.5 | A | | nmol/L | 2025-06-27 05:40:21 | Final |
| <p>Follicular: < 1.7 nmol/L Luteal: 2.2 - 60 nmol/L Postmenopausal: < 0.7 nmol/L</p> <p>The lower threshold to confirm ovulation is 18 nmol/L.</p> | | | | | | |

CHEM17

| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
|--|--------|-----|-----------------|-------|---------------------|--------|
| C Reactive Protein | 0.5 | N | <5.0 | mg/L | 2025-06-27 05:40:21 | Final |
| Test method: Abbott Alinity hs-CRP, suitable for cardiovascular disease assessment and detection of active inflammation. CRP = >2.0 mg/L is a risk enhancing factor for cardiovascular disease, as defined in the Guidelines of the American Heart Association and the American College of Cardiology (JACC 2019; 74: e177). | | | | | | |

CHEM18

| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
|--|--------|-----|-----------------|-------|---------------------|--------|
| Nuclear Ab Titre | Neg | N | Titre <1:80 | | 2025-06-27 14:00:24 | Final |
| Negative: Antinuclear antibodies (ANA) are negative at 1:80 titre. | | | | | | |
| Tissue Transglutaminase Ab IgA | <0.5 | N | <12.0 | U/mL | 2025-06-26 14:30:44 | Final |
| NEGATIVE IgA antibody to tissue transglutaminase has approximately 95% sensitivity and specificity for gluten enteropathy. False negative results may occur with a gluten-restricted diet or IgA deficiency. The BioPlex method includes an internal control to confirm IgA is sufficient, thus avoiding false negatives due to IgA deficiency. | | | | | | |

This and the preceding tests were performed at Burnaby Reference Laboratory - 3680 Gilmore Way, Burnaby, BC, V5G 4V8

CHEM23

| Test Name(s) | Result | Abn | Reference Range | Units | Date/Time Completed | Status |
|--------------|--------|-----|-----------------|--------|---------------------|--------|
| Zinc | 13.1 | N | 9.2-26.0 | umol/L | 2025-07-09 14:50:27 | Final |
| Copper | 19.4 | N | 13-24 | umol/L | 2025-07-09 14:50:27 | Final |

This and the preceding tests were performed at Victoria Reference Laboratory - 3201-4464 Markham Street, Victoria, BC, V8Z 7X8

END OF REPORT