

Name: Julee Song | DOB: 5/18/1982 | MRN: 100513687 | PCP: ULLANDA P FYFFE, MD | Legal Name: Julee Song

XR HYSTEROSALPINGOGRAM

Results

Study Result

Narrative & Impression

HYSTEROSALPINGOGRAM

Following a detailed discussion of the procedure, including potential risks and benefits, written consent was obtained. A vaginal speculum was placed. The cervix was prepped with Betadine. The cervix was cannulated utilizing a 5F Hystero cath. Under direct fluoroscopic visualization, sterile iodinated contrast was injected.

Fluoroscopy time: 49 seconds

Exposure

PSD: 25 mGy

DAP: 425.4 cGy*cm2

Images: 8

FINDINGS:

Multilobular filling defect is identified at the level of the lower uterine segment which persist after removal of the balloon catheter and after voiding suggestive of endoluminal polyps or alternative lesion.

There is no filling defect identified within the uterine body or fundal region.

Both fallopian tubes are patent demonstrating opacification and free spillage of contrast to the peritoneal cavity bilaterally.

The patient tolerated the procedure well with no immediate complications.

IMPRESSION:

Multilobular filling defect within the lower uterine segment persisting after voiding suggestive of endoluminal polyps or alternative lesion.

Consider further evaluation with hysteroscopy/biopsy.

Fallopian tubes are patent.

Images

View your images

Study Result

Narrative & Impression

HYSTEROSALPINGOGRAM

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Consider further evaluation with hysteroscopy/biopsy.

Fallopian tubes are patent.

Imaging

XR HYSTEROSALPINGOGRAM (Order: 650001669) - 2/12/2024

Result History

XR HYSTEROSALPINGOGRAM (Order #650001669) on 2/12/2024 - Order Result History Report

Patient: SONG^JULEE (F)
DOB: 05-18-1982
Date: 02-12-2024 10:10 AM
Image: 1/1



Referring Physician: Unknown^Unknown
Study: XR HYSTEROSALPINGOGRAM
Series: Pelvis (RF)

Zoom: 66%
Center/Width: 648.00 / 528.00 (LINEAR)

Patient: SONG^JULEE (F)
DOB: 05-18-1982
Date: 02-12-2024 10:10 AM
Image: 1/1



Referring Physician: Unknown^Unknown
Study: XR HYSTEROSALPINGOGRAM
Series: Barium Singleshot (RF)

Zoom: 66%
Center/Width: 644.00 / 568.00 (LINEAR)

Patient: SONG^JULEE (F)
DOB: 05-18-1982
Date: 02-12-2024 10:10 AM
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Referring Physician: Unknown^Unknown
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Study: XR HYSTEROSALPINGOGRAM
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Referring Physician: Unknown^Unknown
Study: XR HYSTEROSALPINGOGRAM
Series: Barium Singleshot (RF)

Zoom: 66%
Center/Width: 644.00 / 568.00 (LINEAR)

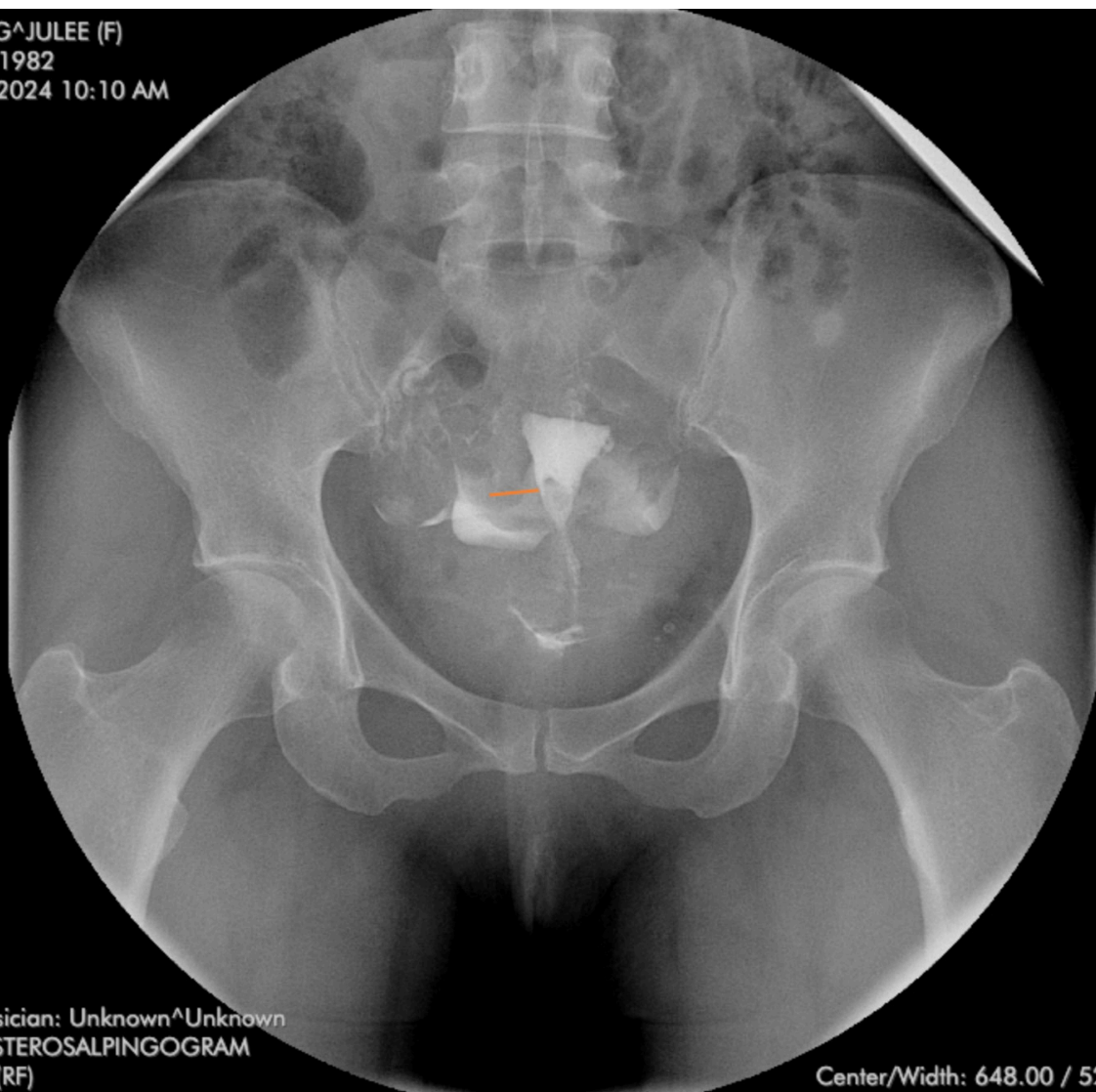
Patient: SONG^JULEE (F)
DOB: 05-18-1982
Date: 02-12-2024 10:10 AM
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Referring Physician: Unknown^Unknown
Study: XR HYSTEROSALPINGOGRAM
Series: Pelvis (RF)

Zoom: 66%
Center/Width: 648.00 / 528.00 (LINEAR)

Patient Information

Patient Name: Julee Song
 Date Of Birth: 05/18/1982
 Gender: Female
 Ethnicity: East Asian
 Patient ID: 61159
 Medical Record #: N/A
 Collection Kit: 32467450-2-C
 Accession ID: 623771
 Case File ID: 11937941

Test Information

Ordering Physician: Dr. Sara Morelli, MD
 Clinic Information: University Reproductive Associates
 Phone: 201-288-6330
 Report Date: 04/03/2024
 Sample Collected: 03/19/2024
 Sample Received: 03/21/2024
 Sample Type: Blood

**CARRIER SCREENING REPORT**

ABOUT THIS SCREEN: Horizon™ is a carrier screen for specific autosomal recessive and X-linked diseases. This information can help patients learn their risk of having a child with specific genetic conditions.

ORDER SELECTED: The Horizon 421 panel was ordered for this patient.

FINAL RESULTS SUMMARY:**Negative for 421 out of 421 diseases**

No Pathogenic variants were detected in the genes that were screened. The patient's remaining carrier risk after the negative screening results is listed for each disease/gene on the Horizon website at <https://www.natera.com/panel-option/h-all/>. Please see the following pages of this report for a comprehensive list of all conditions included on this individual's screen.

Carrier screening is not diagnostic and may not detect all possible pathogenic variants in a given gene.

RECOMMENDATIONS

Individuals who would like to review their Horizon report with a Natera Laboratory Genetic Counselor may schedule a telephone genetic information session by calling 650-249-9090 or visiting naterasession.com. Clinicians with questions may contact Natera at 650-249-9090 or email support@natera.com.

Christina M. Eng, M.D.
 Christina M. Eng, M.D.
 Medical Director, Baylor Genetics

Ulysses Meng, Ph.D.
 Ulysses Meng, Ph.D.
 Laboratory Director, Baylor Genetics

I. Diana Kim, Ph.D., FACMG
 I. Diana Kim, Ph.D., FACMG
 Senior Laboratory Director, Natera

Yang Wang, Ph.D., FACMG
 Yang Wang, Ph.D., FACMG
 Laboratory Director, Natera

Date Collected: 03/08/2025

Date Received: 03/08/2025

Date Reported: 03/14/2025

Fasting: No

Ordered Items: FSH and LH; Free T-3; Cortisol; ACTH, Plasma; Prolactin; IGF-1; Thyroid Stim Immunoglobulin; T4, Free; T3; TSH; Thyroglobulin Antibody; Thyroid Peroxidase (TPO) Ab; Venipuncture

Date Collected: 03/08/2025

FSH and LH

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
LH ⁰¹	9.6	5.6 12/23/2020 Adult Female Follicular phase Ovulation phase Luteal phase Postmenopausal	mIU/mL Range 2.4 - 12.6 14.0 - 95.6 1.0 - 11.4 7.7 - 58.5	
FSH ⁰¹	6.7	5.1 12/23/2020 Adult Female Follicular phase Ovulation phase Luteal phase Postmenopausal	mIU/mL Range 3.5 - 12.5 4.7 - 21.5 1.7 - 7.7 25.8 - 134.8	

Free T-3

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Free T-3 ⁰²	2.8 Reference Range: >=20y: 2.0 - 4.4		pg/mL	

Cortisol

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Cortisol ⁰¹	10.1		ug/dL	6.2-19.4
Please Note: The reference interval and flagging for this test is for an AM collection. If this is a PM collection please use: Cortisol PM: 2.3-11.9				

ACTH, Plasma

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
ACTH, Plasma ⁰¹	10.1		pg/mL	7.2-63.3
ACTH reference interval for samples collected between 7 and 10 AM.				

Prolactin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Prolactin ⁰¹	14.1	22.0* 12/23/2020	ng/mL	4.8-33.4

* Previous Reference Interval: (Prolactin: 4.8-23.3 ng/mL)

IGF-1

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
▲ Insulin-Like Growth Factor I ⁰³	295 High		ng/mL	74-239

Date Collected: 06/02/2025

Date Received: 06/02/2025

Date Reported: 06/04/2025

Fasting: Not Given

Ordered Items: CBC, Platelet, No Differential; Chlamydia/GC Amplification; TSH; Rubella Antibodies, IgG; RPR, Rfx Qn RPR/Confirm TP; HIV Ab/p24 Ag with Reflex; Varicella-Zoster V Ab, IgG; Anti-Mullerian Hormone; Rh+ABO+Ab Scr; HBsAg Screen

Date Collected: 06/02/2025

CBC, Platelet, No Differential

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
WBC ⁰¹	4.8		4.8	03/31/2025	x10E3/uL	3.4-10.8
RBC ⁰¹	4.22		4.17	03/31/2025	x10E6/uL	3.77-5.28
Hemoglobin ⁰¹	14.2		14.0	03/31/2025	g/dL	11.1-15.9
Hematocrit ⁰¹	42.3		40.6	03/31/2025	%	34.0-46.6
▲ MCV ⁰¹	100	High	97	03/31/2025	fL	79-97
▲ MCH ⁰¹	33.6	High	33.6	03/31/2025	pg	26.6-33.0
MCHC ⁰¹	33.6		34.5	03/31/2025	g/dL	31.5-35.7
RDW ⁰¹	12.2		11.5	03/31/2025	%	11.7-15.4
Platelets ⁰¹	303		366	03/31/2025	x10E3/uL	150-450

Chlamydia/GC Amplification

Test	Current Result and Flag	Units	Reference Interval
Chlamydia trachomatis, NAA ⁰¹	Negative		Negative
Neisseria gonorrhoeae, NAA ⁰¹	Negative		Negative

TSH

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH ⁰¹	1.390	2.100 03/31/2025	uIU/mL	0.450-4.500

Rubella Antibodies, IgG

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Rubella Antibodies, IgG ⁰¹	4.71	4.89 03/19/2024	index	Immune >0.99
		Non-immune	<0.90	
		Equivocal	0.90 - 0.99	
		Immune	>0.99	

RPR, Rfx Qn RPR/Confirm TP

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
RPR ⁰¹	Non Reactive	Non Reactive 03/19/2024		Non Reactive

HIV Ab/p24 Ag with Reflex

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
HIV Ab/p24 Ag Screen ⁰¹	Non Reactive	Non Reactive 03/19/2024		Non Reactive
	HIV-1/HIV-2 antibodies and HIV-1 p24 antigen were NOT detected. There is no laboratory evidence of HIV infection. HIV Negative			

Varicella-Zoster V Ab, IgG

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Varicella Zoster IgG ⁰¹	Reactive	3060*	03/19/2024		Non Reactive
Please note reference interval change A Reactive result is considered evidence of immunity to VZV. Reactive indicates that VZV IgG was detected consistent with previous infection and/or vaccination. A Non Reactive result indicates that VZV IgG was not detected suggesting that immunity has not been acquired.					

* Previous Reference Interval: (Varicella Zoster IgG: Immune >165 index)

Anti-Mullerian Hormone

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Anti-Mullerian Hormone ⁰¹	1.13			ng/mL	0.03-5.47
Age Range					
0 - 19 years Not Established					
20 - 24 years 1.22 - 11.70					
25 - 29 years 0.89 - 9.85					
30 - 34 years 0.58 - 8.13					
35 - 39 years 0.15 - 7.49					
40 - 44 years 0.03 - 5.47					
>44 years Not Established					
Roche Diagnostics Electrochemiluminescence Immunoassay (ECLIA) values obtained with different assay methods or kits cannot be used interchangeably. Age-dependent reference intervals were established for AMH in a German and Belgium population of apparent healthy females, aged 20-44 years. The ranges given are for information only and may vary from other published data.[1] 1. Roche cobas(R) Elecsys AMH Package Insert, Roche Diagnostics, Indianapolis, IN.					

Rh+ABO+Ab Scr

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
ABO Grouping ⁰¹	AB	AB	03/19/2024		
Rh Factor ⁰¹	Positive	Positive	03/19/2024		
Please note: Prior records for this patient's ABO / Rh type are not available for additional verification.					
Antibody Screen ⁰¹	Negative	Negative	03/19/2024		Negative

HBsAg Screen

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
HBsAg Screen ⁰¹	Negative	Negative	03/19/2024		Negative

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Date Collected: 06/17/2025

Date Received: 06/17/2025

Date Reported: 06/26/2025

Fasting: Not Given

Ordered Items: TSH Receptor Antibody (TBII); IGF-1; Thyroid Stim Immunoglobulin; Growth Hormone, Serum

Date Collected: 06/17/2025

TSH Receptor Antibody (TBII)

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH Receptor Antibody (TBII) A, 01	<0.3 Reference Range: Antibody Titer: <1.0 U/L = Negative 1.1 - 1.5 U/L = Equivocal >1.5 U/L = Positive		U/L	

IGF-1

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Insulin-Like Growth Factor I ^{B, 02}	199	295 03/08/2025	ng/mL	74-239

Thyroid Stim Immunoglobulin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Thyroid Stim Immunoglobulin B, 02	<0.10	14.60 03/08/2025	IU/L	0.00-0.55

Growth Hormone, Serum

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Growth Hormone, Serum ^{B, 02}	1.3		ng/mL	0.0-10.0

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Test Report Date

A: 06/26/2025
B: 06/19/2025

Performing Labs

01: ES - Esoterix Inc, 4301 Lost Hills Road, Calabasas Hills, CA 91301-5358 Dir: Brian Poirier, MD
02: BN - Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD
For inquiries, the physician may contact Branch: 800-631-5250 Lab: 800-631-5250

Song, Julee

Patient ID: **F968272**
Specimen ID: **168-210-0025-0**

DOB: **05/18/1982**
Age: **43**
Sex: **Female**

Patient Report

Account Number: **31479452**
Ordering Physician: **K CHEESMAN**



Patient Details

Song, Julee
600 12TH ST APT 803, PALISADES PARK, NJ,
076502085

Phone: **551-804-6028**
Date of Birth: **05/18/1982**
Age: **43**
Sex: **Female**
Patient ID: **F968272**
Alternate Patient ID: **F968272**

Physician Details

K CHEESMAN
ENDOCRINE ASSOCIATES
5 E 98th St 3rd Fl, NEW YORK, NY, 10029

Phone: **212-241-3422**
Account Number: **31479452**
Physician ID:
NPI: **1760781546**

Specimen Details

Specimen ID: **168-210-0025-0**
Control ID: **789161929**
Alternate Control Number: **789161929**
Date Collected: **06/17/2025 0930 Local**
Date Received: **06/17/2025 0000 ET**
Date Entered: **06/17/2025 1152 ET**
Date Reported: **06/26/2025 2005 ET**

Date Collected: 07/02/2025

Date Received: 07/02/2025

Date Reported: 07/03/2025

Fasting: Yes

Ordered Items: Prolactin; Measles Antibodies, IgG; HCV Antibody; Venipuncture

General Comments & Additional Information

Clinical Info: CC:6469620179
A courtesy copy of this report has been sent to 6469620179.

Date Collected: 07/02/2025

Prolactin

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Prolactin ^{A, 01}	17.1	14.1 03/08/2025	ng/mL	4.8-33.4

Measles Antibodies, IgG

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Measles Antibodies, IgG ^{A, 01}	156.0		AU/mL	Immune >16.4
		Negative	<13.5	
		Equivocal	13.5 - 16.4	
		Positive	>16.4	
	Presence of antibodies to Rubeola is presumptive evidence of immunity except when acute infection is suspected.			

HCV Antibody

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hep C Virus Ab ^{A, 01}	Non Reactive			Non Reactive
	HCV antibody alone does not differentiate between previously resolved infection and active infection. Equivocal and Reactive HCV antibody results should be followed up with an HCV RNA test to support the diagnosis of active HCV infection.			

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Test Report Date
A: 07/03/2025

Performing Labs
01: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: 800-631-5250 Lab: 800-631-5250

<div>Patient Details</div> <div>Song, Julee</div> <div>600 12TH ST APT 803, PALISADES PARK, NJ, 07650</div> <div>Phone: 551-804-6028</div> <div>Date of Birth: 05/18/1982</div> <div>Age: 43</div> <div>Sex: Female</div> <div>Patient ID:</div> <div>Alternate Patient ID:</div>	<div>Physician Details</div> <div>M IRANI</div> <div>Fertility Preservation Acct</div> <div>1305 York Ave 6th fl, NEW YORK, NY, 10021</div> <div>Phone: 646-962-3276</div> <div>Account Number: 31014385</div> <div>Physician ID:</div> <div>NPI: 1154602670</div>	<div>Specimen Details</div> <div>Specimen ID: 183-436-3151-0</div> <div>Control ID: 10603954686</div> <div>Alternate Control Number:</div> <div>Date Collected: 07/02/2025 0733 Local</div> <div>Date Received: 07/02/2025 0000 ET</div> <div>Date Entered: 07/02/2025 1359 ET</div> <div>Date Reported: 07/03/2025 1305 ET</div>
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Date Collected: 07/11/2025

Date Received: 07/11/2025

Date Reported: 07/12/2025

Fasting: Not Given

Ordered Items: CBC, Platelet, No Differential

Date Collected: 07/11/2025

CBC, Platelet, No Differential

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
WBC ⁰¹	4.1		4.8	06/02/2025	x10E3/uL	3.4-10.8
RBC ⁰¹	4.41		4.22	06/02/2025	x10E6/uL	3.77-5.28
Hemoglobin ⁰¹	14.6		14.2	06/02/2025	g/dL	11.1-15.9
Hematocrit ⁰¹	43.7		42.3	06/02/2025	%	34.0-46.6
▲ MCV ⁰¹	99	High	100	06/02/2025	fL	79-97
▲ MCH ⁰¹	33.1	High	33.6	06/02/2025	pg	26.6-33.0
MCHC ⁰¹	33.4		33.6	06/02/2025	g/dL	31.5-35.7
RDW ⁰¹	12.0		12.2	06/02/2025	%	11.7-15.4
Platelets ⁰¹	358		303	06/02/2025	x10E3/uL	150-450

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Performing Labs
01: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: 800-631-5250 Lab: 800-631-5250

<div>Patient Details</div> <div>Song, Julee</div> <div>600 12th St, Palisades Park, NJ, 07650</div> <div>Phone: 551-804-6028</div> <div>Date of Birth: 05/18/1982</div> <div>Age: 43</div> <div>Sex: Female</div> <div>Patient ID: 381305</div> <div>Alternate Patient ID: 381305</div>	<div>Physician Details</div> <div>M Costantin</div> <div>RMA of NJ ENGLEWOOD</div> <div>25 ROCKWOOD PL Ste 320, ENGLEWOOD, NJ, 07631</div> <div>Phone: 201-569-7773</div> <div>Account Number: 29118895</div> <div>Physician ID: 25MA087688</div> <div>NPI: 1861630451</div>	<div>Specimen Details</div> <div>Specimen ID: 192-006-0178-0</div> <div>Control ID: L7504419612</div> <div>Alternate Control Number: L750441961225</div> <div>Date Collected: 07/11/2025 0807 Local</div> <div>Date Received: 07/11/2025 0000 ET</div> <div>Date Entered: 07/11/2025 1921 ET</div> <div>Date Reported: 07/12/2025 0405 ET</div>
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Date Collected: 06/02/2025

Date Received: 06/02/2025

Date Reported: 06/04/2025

Fasting: Not Given

Ordered Items: HCV Antibody RFX to Quant PCR

Date Collected: 06/02/2025

HCV Antibody RFX to Quant PCR

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
HCV Ab ⁰¹	Non Reactive	Non Reactive	03/19/2024		Non Reactive
Interpretation: ⁰¹	Not infected with HCV unless early or acute infection is suspected (which may be delayed in an immunocompromised individual), or other evidence exists to indicate HCV infection.				

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Performing Labs
01: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: 800-631-5250 Lab: 800-631-5250

Patient Details Song, Julee 600 12th St, Palisades Park, NJ, 07650 Phone: 551-804-6028 Date of Birth: 05/18/1982 Age: 43 Sex: Female Patient ID: 381305 Alternate Patient ID: 381305	Physician Details M Costantin RMA of NJ ENGLEWOOD 25 ROCKWOOD PL Ste 320, ENGLEWOOD, NJ, 07631 Phone: 201-569-7773 Account Number: 29118895 Physician ID: 25MA087688 NPI: 1861630451	Specimen Details Specimen ID: 153-006-1912-0 Control ID: L7500283218 Alternate Control Number: L750028321849 Date Collected: 06/02/2025 1044 Local Date Received: 06/02/2025 0000 ET Date Entered: 06/02/2025 2330 ET Date Reported: 06/04/2025 1105 ET
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Date Collected: 06/02/2025

Date Received: 06/02/2025

Date Reported: 06/04/2025

Fasting: Not Given

Ordered Items: CBC, Platelet, No Differential; Chlamydia/GC Amplification; TSH; Rubella Antibodies, IgG; RPR, Rfx Qn RPR/Confirm TP; HIV Ab/p24 Ag with Reflex; Varicella-Zoster V Ab, IgG; Anti-Mullerian Hormone; Rh+ABO+Ab Scr; HBsAg Screen

Date Collected: 06/02/2025

CBC, Platelet, No Differential

Test	Current Result and Flag		Previous Result and Date		Units	Reference Interval
WBC ⁰¹	4.8		4.8	03/31/2025	x10E3/uL	3.4-10.8
RBC ⁰¹	4.22		4.17	03/31/2025	x10E6/uL	3.77-5.28
Hemoglobin ⁰¹	14.2		14.0	03/31/2025	g/dL	11.1-15.9
Hematocrit ⁰¹	42.3		40.6	03/31/2025	%	34.0-46.6
▲ MCV ⁰¹	100	High	97	03/31/2025	fL	79-97
▲ MCH ⁰¹	33.6	High	33.6	03/31/2025	pg	26.6-33.0
MCHC ⁰¹	33.6		34.5	03/31/2025	g/dL	31.5-35.7
RDW ⁰¹	12.2		11.5	03/31/2025	%	11.7-15.4
Platelets ⁰¹	303		366	03/31/2025	x10E3/uL	150-450

Chlamydia/GC Amplification

Test	Current Result and Flag	Units	Reference Interval
Chlamydia trachomatis, NAA ⁰¹	Negative		Negative
Neisseria gonorrhoeae, NAA ⁰¹	Negative		Negative

TSH

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH ⁰¹	1.390	2.100 03/31/2025	uIU/mL	0.450-4.500

Rubella Antibodies, IgG

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Rubella Antibodies, IgG ⁰¹	4.71	4.89 03/19/2024	index	Immune >0.99
		Non-immune	<0.90	
		Equivocal	0.90 - 0.99	
		Immune	>0.99	

RPR, Rfx Qn RPR/Confirm TP

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
RPR ⁰¹	Non Reactive	Non Reactive 03/19/2024		Non Reactive

HIV Ab/p24 Ag with Reflex

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
HIV Ab/p24 Ag Screen ⁰¹	Non Reactive	Non Reactive 03/19/2024		Non Reactive
	HIV-1/HIV-2 antibodies and HIV-1 p24 antigen were NOT detected. There is no laboratory evidence of HIV infection. HIV Negative			

Varicella-Zoster V Ab, IgG

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Varicella Zoster IgG ⁰¹	Reactive	3060*	03/19/2024		Non Reactive
Please note reference interval change A Reactive result is considered evidence of immunity to VZV. Reactive indicates that VZV IgG was detected consistent with previous infection and/or vaccination. A Non Reactive result indicates that VZV IgG was not detected suggesting that immunity has not been acquired.					

* Previous Reference Interval: (Varicella Zoster IgG: Immune >165 index)

Anti-Mullerian Hormone

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Anti-Mullerian Hormone ⁰¹	1.13			ng/mL	0.03-5.47
Age Range					
0 - 19 years Not Established					
20 - 24 years 1.22 - 11.70					
25 - 29 years 0.89 - 9.85					
30 - 34 years 0.58 - 8.13					
35 - 39 years 0.15 - 7.49					
40 - 44 years 0.03 - 5.47					
>44 years Not Established					
Roche Diagnostics Electrochemiluminescence Immunoassay (ECLIA) values obtained with different assay methods or kits cannot be used interchangeably. Age-dependent reference intervals were established for AMH in a German and Belgium population of apparent healthy females, aged 20-44 years. The ranges given are for information only and may vary from other published data.[1] 1. Roche cobas(R) Elecsys AMH Package Insert, Roche Diagnostics, Indianapolis, IN.					

Rh+ABO+Ab Scr

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
ABO Grouping ⁰¹	AB	AB	03/19/2024		
Rh Factor ⁰¹	Positive	Positive	03/19/2024		
Please note: Prior records for this patient's ABO / Rh type are not available for additional verification.					
Antibody Screen ⁰¹	Negative	Negative	03/19/2024		Negative

HBsAg Screen

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
HBsAg Screen ⁰¹	Negative	Negative	03/19/2024		Negative

Disclaimer
The Previous Result is listed for the most recent test performed by Labcorp in the past 5 years where there is sufficient patient demographic data to match the result to the patient. Results from certain tests are excluded from the Previous Result display.

Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Date Collected: 07/25/2025

Date Received: 07/25/2025

Date Reported: 07/31/2025

Fasting: Not Given

Ordered Items: Pathology Report; 88305 Surg Path-1st Site; IHC 1st AB Stain x1 GLBL

General Comments & Additional Information

CO-RNS2025-20600190
A duplicate report has been generated due to demographic updates.

Diagnosis and Specimen Info

Material Submitted	Details
● Part A: endometrium	<div><div>Diagnosis:</div><div>ENDOMETRIAL BIOPSY: EARLY SECRETORY ENDOMETRIUM. NO EVIDENCE OF HYPERPLASIA, ATYPIA, OR MALIGNANCY. ⁰²</div></div> <div><div>Comment:</div><div>A CD138 stain is negative for plasma cells, arguing against chronic endometritis. Clinical correlation is recommended, with follow up, as clinically appropriate. All controls show appropriate reactivity. This report may include one or more immunoperoxidase stain results which use analyte-specific reagents. These tests were developed and their performance characteristics determined by Labcorp. They have not been cleared or approved by the U.S. Food and Drug Administration. The F.D.A. has determined that such clearance or approval is not necessary. The positive and negative controls have been reviewed by the pathologist and are satisfactory. ⁰²</div></div> <div><div>Gross description:</div><div>1 Container, formalin-filled, labeled with patient identification. ENDOMETRIAL BIOPSY,: Received labeled ENDOMETRIAL are multiple fragments of tan, hemorrhagic material measuring 1.5 x 1.5 x 0.1 cm in aggregate. Submitted in toto in cassette(s) 1. ⁰¹</div></div> <div><div>Electronically signed by</div><div>Ashhad Mahmood, MD, Pathologist ⁰² Diagnosis: MDI 07/31/2025 1027 Local ⁰² Gross Description: /KCE 07/26/2025 0115 Local ⁰¹</div></div> <div><div>Clinician Provided ICD Codes: N71.9 ⁰¹</div><div>Clinical History: CD 138 STAIN ⁰¹</div><div>Reported CPT Codes: 883051, W20061 ⁰²</div></div>

Performing Labs

01: RJ - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Lab: 908-526-2400 Dir: Liza Jodry, MD
02: DIANJ - Diagnostic Pathology Services, 16 Lilac Way, Skillman, NJ 08558-1727 Lab: 201-669-2347 Dir: Ashhad Mahmood, MD
For Inquiries, the physician may contact the lab using the numbers indicated above.

Song, Julee

Patient ID: JS05181982
Specimen ID: 206-F35-0019-0

DOB: 05/18/1982
Age: 43
Sex: Female

Patient Report

Account Number: 29118895
Ordering Physician: M COSTANTIN



Patient Details

Song, Julee
600 12TH ST APT 803, PALISADES PARK, NJ
07650-2085

Phone: 551-804-6028
Date of Birth: 05/18/1982
Age: 43
Sex: Female
Patient ID: JS05181982
Alternate Patient ID: JS05181982

Physician Details

M COSTANTIN
RMA of NJ ENGLEWOOD
25 ROCKWOOD PL Ste 320, ENGLEWOOD, NJ
07631

Phone: 201-569-7773
Account Number: 29118895
Physician ID:
NPI: 1861630451

Specimen Details

Specimen ID: 206F3500190
Control ID: L7506046817
Alternate Control Number: L7506046817
Date Collected: 07/25/2025 0000 Local
Date Received: 07/25/2025 0000 ET
Date Entered: 07/25/2025 2131 ET
Date Reported: 07/31/2025 1406 ET

PATIENT NAME	
Song, Julee	
DOB	CYCLE ID
05/18/1982	5
JOB ID	
23183	

REFERRING INSTITUTION
RMANJ
REFERRING PHYSICIAN
Maria Costantini-Ferrando, MD
TEST
PGT-A

SPECIMEN(S) COLLECTED
07/31/2025
SPECIMEN(S) RECEIVED
08/01/2025
REPORT DATE
08/11/2025

Embryo	Sample ID	Whole Chromosome Aneuploidy (PGT-A) Results	Sex	Segmental Aneuploidy (PGT-A) Results
1	23183a1	Positive -17	Female	Negative

Aneuploidy Results Interpretation

“**Negative**” indicates that no whole extra or missing chromosomes were detected in the sample. “**Positive**” indicates that at least one whole extra or missing chromosome was detected in the sample. Positive can also indicate that haploidy or triploidy was detected in the sample. Details regarding the specific abnormality/abnormalities identified are included in this report. “**No result**” indicates that testing was unable to yield a result. There are a number of different reasons for this to occur. A rebiopsy could be considered and submitted for testing. Results of this testing should be interpreted within the context of additional laboratory results, family history, and clinical findings. Genetic counseling is recommended to discuss the implications of these test results. Follow up prenatal diagnosis is recommended by either chorionic villus sampling (CVS) or amniocentesis to confirm the PGTseq-A results and for a complete genetic evaluation.

Limitations

PGTseq-A was validated using samples from embryos created with the use of Intracytoplasmic Sperm Injection (ICSI). Use of conventional insemination may increase the risk for contamination from maternal or paternal sources. If undetected contamination is present it can result in a false negative or false positive.

The risk for misdiagnosis for a chromosome aneuploidy due to a false negative test is estimated to be 1 -2%. In addition, PGTseq-A cannot detect balanced structural rearrangements or uniparental disomy. Some forms of triploidy can be detected. However, this testing cannot detect all polyploidies. This testing does not report results in the mosaic range (intermediate copy number). PGT-A negative embryos with mosaic range results will be reported as negative - no whole chromosome aneuploidy detected. Biological limitations can also impact results. Testing is performed on a biopsy of the embryo. Therefore, there is a possibility that the cells in the remainder of the embryo are different than the cells tested. This testing does not test for any inherited conditions or any genetic/non-genetic conditions within an individual's family history and only detects whole chromosome aneuploidy and some segmental aneuploidies. PGTseq-A does not test for all types of chromosomal or genetic abnormalities and does not rule out the possibility that the developing embryo may still have genetic abnormalities and/or birth defects. There is a 3-5% general population risk of having a child with a birth defect or intellectual disability due to genetic and/or non-genetic etiologies. PGT-A does not reduce that risk. PGTseq-A reduces but does not eliminate the risk for whole chromosome aneuploidy, therefore routine prenatal screening and/or diagnosis is recommended.

Segmental Aneuploidy Interpretation

Segmental aneuploidy refers to a segment of the chromosome that is duplicated or deleted. Segmental aneuploidies are reported using hg19 coordinates as well as cytobands, however the breakpoints are not precise using this testing. The hg19 coordinates and cytobands indicate the estimated maximum size. It is possible that the deletion/duplication may be smaller or larger than the estimated reported size. Given this information, Juno Genetics does not classify the significance of the segmental aneuploidy.

“**Negative**” indicates that a segmental aneuploidy was not detected in the sample. “**Positive**” indicates that a segmental aneuploidy was detected in the sample and the details regarding the specific segmental aneuploidy identified are listed in this report. “**No result**” indicates that testing was unable to yield a result. There are a number of different reasons for this to occur. Results of this testing should be interpreted within the context of additional laboratory results, family history, and clinical findings. Genetic counseling is recommended to discuss the implications

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Electronically Signed By: Vaidehi Jobanputra, Ph.D., FACMG, Laboratory Director

Date: 08/11/2025 14:48:34

Page 1 of 2

PATIENT NAME	
Song, Julee	
DOB	CYCLE ID
05/18/1982	5
JOB ID	
23183	

REFERRING INSTITUTION
RMANJ
REFERRING PHYSICIAN
Maria Costantini-Ferrando, MD
TEST
PGT-A

SPECIMEN(S) COLLECTED
07/31/2025
SPECIMEN(S) RECEIVED
08/01/2025
REPORT DATE
08/11/2025

of these test results. Follow up prenatal diagnosis is recommended by either chorionic villus sampling (CVS) or amniocentesis to confirm the PGTseq-A results and for a complete genetic evaluation.

Studies indicate that when embryos with a segmental aneuploidy are transferred, there is a reduced chance of implantation and live birth. The significance and mechanism of a segmental aneuploidy is not completely understood. In an internal study where embryos had multiple biopsies performed, the segmental aneuploidy was identified in approximately 50% of rebiopsy samples. There have been reports of segmental aneuploidies identified in an embryo biopsy sample that were confirmed to be present in the fetus and resulted in abnormal ultrasound findings. Therefore, segmental aneuploidies have the potential to result in a pregnancy with abnormalities. Studies have also shown that embryos with segmental aneuploidies can result in a normal pregnancy. The probability that a segmental aneuploidy will be present in the fetus is currently unknown and cannot be predicted.

Segmental Aneuploidy Limitations

PGTseq-A cannot detect all segmental aneuploidy or copy number variants. The limits of detection for segmental aneuploidy vary depending on the chromosome and quality of the embryo biopsy sample. A **“Negative”** result does not eliminate the risk for a segmental aneuploidy. It is recommended the patient meet with a genetic counselor to discuss recommendations for prenatal diagnosis including amniocentesis and chorionic villus sampling as well as the potential implications of the result if the patient elects to transfer an embryo with a segmental aneuploidy. Most copy number variants that are identified prenatally and postnatally will not be detected by PGT-A since they are below the limit of detection. Copy number variants below 3Mb will be reported at the discretion of the laboratory director.

PGTseq-A Test Method

PGTseq is a next generation sequencing-based assay that utilizes multiplex targeted PCR to amplify regions across all 24 chromosomes to quantify the copy number of each chromosome. PGTseq-A is performed on trophectoderm biopsy samples. Analytical validation of PGTseq-A showed that the overall diagnostic accuracy is 98.7%, sensitivity is >99% and specificity is 98.3%. A clinical validation study for the PGTseq-A assay indicated that no live births were achieved following the transfer of embryos diagnosed with whole chromosome aneuploidy (Tiegs, 2020).

Juno Genetics implements several safeguards to avoid technical errors. Juno Genetics is not responsible for errors in specimen collection, transportation or other errors made prior to receipt at our laboratory. Due to the complexity of genetic testing, diagnostic errors, although rare, may occur due to sample mix-up, DNA contamination, or other laboratory operational errors.

Disclaimer

This test was developed and its performance characteristics determined by Juno Genetics. It has not been cleared or approved by the FDA. The laboratory is approved under the Clinical Laboratory Improvement Act (CLIA) as qualified to perform high-complexity clinical tests (CLIA ID: 31D2077738). This test is used for clinical purposes.

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Electronically Signed By: Vaidehi Jobanputra, Ph.D., FACMG, Laboratory Director

Date: 08/11/2025 14:48:34

Page 2 of 2

Song, Julee	DOB: 05/18/1982	PID: 381305
Auth AOL	Date: 07/25/2025	Time: 10:12 AM

Note:

Op Note: Vaginal oocyte retrieval

Informed consent obtained and consent signed.

1. Pre Op Dx: Infertility
2. Post Op Dx: same
3. Procedure: Vaginal oocyte retrieval under ultrasound guidance, endometrial biopsy
4. Surgeon: Angela Leung, MD
5. Findings: ovaries consistent with controlled ovarian hyperstimulation
6. EBL: minimal
7. Anesthesia: IV Sedation administered by attending anesthesiologist
8. Path: none
9. Drains: none
10. Complications: none

Procedure:

The patient was taken to the operating room, moved on to the operating table and then placed in the dorsal lithotomy position. General anesthesia was accomplished and the patient was prepped and draped in a sterile fashion. The ultrasound transducer with attached needle guide was introduced into the vagina and the follicles were visualized. A 17-gauge needle was introduced into the follicles under direct visualization and the follicles were aspirated. All aspiration tubes were sent immediately to the IVF laboratory for examination.

Endometrial biopsy performed for evaluation of endometrium. Risks of procedure discussed with patient, including possible hemorrhage and/or infection. Cervix prepped and pipelle catheter introduced into cervical canal. Once inside endometrial cavity, suction used to aspirate tissue in all four quadrants. Catheter removed. Patient tolerated procedure well.

At completion of the procedure a speculum was inserted into the vagina and hemostasis was assured by careful inspection. The patient tolerated the procedure well and was discharged to the care of anesthesia and the PACU team

Procedure Location: Liberty Corner Surgical Center at Basking Ridge- 140 Allen Road, Basking Ridge, NJ 07920

Signature: Angela Leung, MD

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: HRG **Exam Date:** 07/11/2025

Visit Note

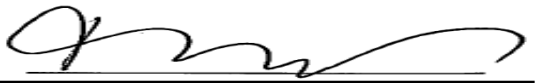
CC: Initial cycle visit for fertility treatment monitoring HPI: Patient preparing for cycle start. Discussed timing of medication start and when to expect next visit. ROS: Constitutional and GU symptoms reviewed and negative. Plan: We will evaluate BW, USS, past treatment, and current diagnosis. Will modify treatment plan this afternoon as needed and advise patient. If bloodwork and ultrasound are appropriate to start based on this patient's treatment plan, this cycle will begin. The patient was instructed to expect communication from their team today with further education and instructions

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd
 Follistim AQ 225.000 IU sc qd
 Letrozole 5.000 mg po qd
 Menopur 75.000 IU sc qd
 Oral Estrace 0.000 mg po bid *

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee

SSN: 2747

Age: 43.31

Home: Work: Prov: MC Nurse: VZV

Ultrasound Examination

US Prov: MC

Exam Date: 07/14/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/14/2025 Julee Song is a 43.16 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 6.30 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

w/MC;
##MCDLV/##

RTO: 3 DAYS, PND BW



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: MC **Exam Date:** 07/14/2025

Visit Note

CC: This patient is monitoring for fertility treatment. Cycle is in progress. HPI: Discussed medication administration and side effects thus far. Patient has tolerated well and has no complaints today. ROS: Constitutional and GU symptoms reviewed. Denies adverse effects with cycle medications. Plan: Today's plan includes evaluation of bloodwork, ultrasound findings, past treatment, and current diagnosis. When the results return, we will modify treatment plan this afternoon as needed and advise patient of medication doses and timing of return visit.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Letrozole 5.000 mg po qd

Menopur 75.000 IU sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: MC Exam Date: 07/16/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/16/2025 Julee Song is a 43.16 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
No follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
2 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
No follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 5.40 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:
start HGH today @vzv//9am with MC@vzv;
##MC/DLV##

RTO: PND BW, 2-3 DAYS


Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Office Examination

US Prov: MC **Exam Date:** 07/16/2025

Visit Note

CC: Patient returns to our office for ultrasound monitoring of fertility treatment cycle. HPI: Inquired how patient is feeling – doing well with treatment. Discussed ultrasound findings in detail and cycle progress. Answered any and all questions. ROS: Constitutional and GU symptoms reviewed and found to be negative. Noted any bloating and potential side effects from medications. Plan: Patient will have bloodwork drawn which will be reviewed this afternoon. Review of ultrasound findings, age, diagnosis, and past cycles will be incorporated in order to determine the most appropriate medication dosing and timing of return visit. We will discuss the plan with the patient in detail.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Ganirelix 250.000 mcg sc qd

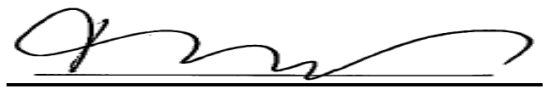
Letrozole 0.000 mg po qd

Menopur 150.000 IU sc qd

Omnitrope 2.500 mg sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: HRG Exam Date: 07/18/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/18/2025 Julee Song is a 43.17 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

4 antral follicles < 11mm,
 1 follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 No follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The left ovary was evaluated and measured and found to have:

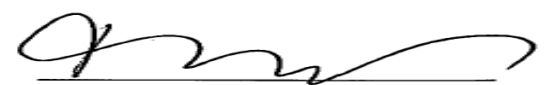
2 antral follicles < 11mm,
 2 follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 No follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 5.70 mm and was found to have a pattern Intermediate based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).
 Cul-de-sac fluid was evaluated

The comments were as follows:

##HRG/MYC2##

RTO: 2 days ,pnd bw


 Maria Costantini-Ferrando

Home: Work: Prov: MC Nurse: VZV

Office Examination

Exam Date: 07/18/2025

Visit Note

CC: Monitoring for fertility Tx HPI: Reviewed response to treatment and progression of cycle. Discussed possible side effects. ROS: Constitutional and GU symptoms reviewed Will evaluate BW, USS, past treatment and current diagnosis. Will modify treatment plan this pm as needed and advise patient.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Ganirelix 250.000 mcg sc qd


Menopur 150.000 IU sc qd

Omnitrope 2.500 mg sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.

Reviewed 07/18/2025



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: ET7 Exam Date: 07/20/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/20/2025 Julee Song is a 43.17 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

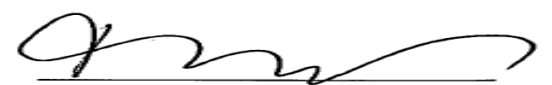
2 antral follicles < 11mm,
 1 follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 No follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
 2 follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 1 follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 9.00 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).
 Cul-de-sac fluid was evaluated

The comments were as follows:
 pt out of omnitrope ##et7/mev2##
 RTO: pnd bw


 Maria Costantini-Ferrando

Home: Work: Prov: MC Nurse: VZV

Office Examination

US Prov: ET7 Exam Date: 07/20/2025

Visit Note

CC: Morning monitoring performed today for fertility treatment cycle that is currently ongoing. HPI: Patient presents after many days of treatment for evaluation. Denies complaints. Discussed cycle progress and timing of next steps. Expected side effects from medications reviewed and patient reassured. ROS: Overall, patient is tolerating treatment thus far and has expected constitutional and GU symptoms. Plan: Labs drawn this morning will be reviewed later today. Ultrasound results will be used to formulate a plan that accounts for the patient's prior cycles, age, and diagnosis. Updated instructions for medication administration and next visit timing will be communicated to the patient.

Instructions for today's medications are currently as follows:

Dexamethasone 0.250 mg po qd

Follistim AQ 225.000 IU sc qd

Ganirelix 250.000 mcg sc qd

Menopur 150.000 IU sc qd

Omnitrope 0.000 mg sc qd

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: ET7 Exam Date: 07/22/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/22/2025 Julee Song is a 43.18 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
 No follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 1 follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
 1 follicles between 11mm and 13mm,
 No follicles between 14mm and 15mm,
 3 follicles between 16mm and 17mm,
 No follicles between 18mm and 19mm,
 No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 9.60 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

ET7. Pt may consider cx vs proceeding for VOR;

##ET7/NAJ##

RTO: discussed proceeding to VOR with this cycle, 1 day to scan w/MC @9, pnd bw



Maria Costantini-Ferrando

Song, Julee	SSN:	2747	Age:	43.31
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Home:	Work:	Prov:	MC	Nurse:	VZV
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Ultrasound Examination

US Prov: MC Exam Date: 07/23/2025

Stim Ultrasound Final Report

Indication for exam: Evaluation of the complete female pelvis for fertility treatment progress.

07/23/2025 Julee Song is a 43.18 year old who was seen at Reproductive Medicine Associates this morning for a complete evaluation of the female pelvis via transvaginal ultrasound using a 7.5 MHz transvaginal probe. The examination was performed and documented in full.

The bladder was noted to be empty and devoid of masses or filling defects.

The right ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
1 follicles between 18mm and 19mm,
No follicles > 19mm

The left ovary was evaluated and measured and found to have:

2 antral follicles < 11mm,
1 follicles between 11mm and 13mm,
No follicles between 14mm and 15mm,
No follicles between 16mm and 17mm,
3 follicles between 18mm and 19mm,
No follicles > 19mm

The uterus was then evaluated. The endometrium was noted to be 12.80 mm and was found to have a pattern Trilaminar based on the Grunfeld grading system(Grunfeld L, Walker B, Bergh PA, Sandler B, Hofmann G, Navot D. High-resolution endovaginal ultrasonography of the endometrium: a noninvasive test for endometrial adequacy. Obstet Gynecol 1991;78(2):2004).

Cul-de-sac fluid was evaluated

The comments were as follows:

w/MC at 9am;

##MC/NAJ##

RTO: Possible Trigger, pnd bw



Maria Costantini-Ferrando

Home: Work: Prov: MC Nurse: VZV

Office Examination

US Prov: MC Exam Date: 07/23/2025

Visit Note

CC: Patient is here today for close monitoring of her REI treatment cycle and progress to date. HPI: During this visit, an ultrasound was performed and cycle progress and response was discussed with patient. Side effects from treatment medications and their physiologic significance were reviewed. ROS: The patient has constitutional and GU symptoms that are expected at this stage of her fertility treatment. Plan: Assessment of cycle progress will be performed once bloodwork results are received. Ultrasound and hormonal levels will be interpreted in the setting of this patient's specific age, diagnosis, and prior history. We will communicate later today with a plan of action for medication dosing and her next visit to our clinic.

Instructions for today's medications are currently as follows:

Dexamethasone 0.000 mg po qd

Follistim AQ 0.000 IU sc qd

Ganirelix 0.000 mcg sc bid *

Lupron Trigger 40.000 unit sc at time specified by RN, repeat dose 12 hrs later *

Menopur 0.000 IU sc qd

Pregnyl 3300.000 kIU sc tonight, at time specified by RN

A focused history was obtained and a complete review of the reproductive cycle was performed with the patient. An examination of the patient was performed with specific attention to the abdomen as well as external and internal female genitalia.

A team conference was held later in the day to review the results of the morning office visit, and a nursing phone call was made to the patient to confirm the results and an understanding of instructions. Detailed plans were made to follow up.

Reviewed 07/23/2025

[illegible]

Maria Costantini-Ferrando

Song, Julee						-2747	
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172		Prov: MC		Nurse: VZV

Retrieval

General Information

Retrieval Date:	07/25/2025	Embryologist	TXD	Donor ID:
Retrieval Start Time:	10:02AM	Physician:	AOL	
ID Verification:	<input checked="" type="checkbox"/>	By: SAV1	Donor Age:	

Cumulus / Cornona Complex

Number Of Oocytes:	3	Embryologist:	TXD
Incubator:	35		

Reviewed By:	HYL	Review	08/01/2025 02:09 PM
Reviewer Comments:			

Comments:

Insemination Notes:

Reproductive Medicine Associates of New Jersey - Basking Ridge
 140 Allen Road, Basking Ridge, NJ 07920, (908)604-7800

Phone:(908)604-7800

Fax:(973)290-8370

Song, Julee				-2747	
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172	Prov: MC	Nurse: VZV

Male Analysis

Date / Time	Vial #	%Normal	Purpose	Source	Source Type	Source DOB	Source SSN
07/25/2025 09:13 AM			IVF-ICSI	Kim, Myung Han	EJACULATED	04/25/1982	

Insemination

Embryologist	DRS		Embryologist:	Hokyung Lee
Witness:	CHP1		Hyal Date:	07/25/2025
Insemination Date:	07/25/2025		Hyal Time:	12:58PM
Insemination Time:	02:40PM	# Eggs: 3	Concentration:	
Concentration:				

Sperm Post Process

Embryologist: ANG	Progress: 2.5	<input type="checkbox"/> AmorphHead	<input type="checkbox"/> Gradient
Gradients	% Viability:	<input type="checkbox"/> Tapered	<input type="checkbox"/> Mini-gradient
Volume: 0.3		<input type="checkbox"/> Neck Defect	<input type="checkbox"/> Pure Sperm
cx10/ml 13.0		<input type="checkbox"/> Vacuol. Head	<input type="checkbox"/> Swim-up
% Normal:		<input type="checkbox"/> Abnormal Tail	<input type="checkbox"/> Sediment
% Motility: 99.0		<input type="checkbox"/> PinHead	<input type="checkbox"/> Pentoxifyll
		<input type="checkbox"/> Acrosome Missing Small	<input type="checkbox"/> Cent. 1800 g.

Comments:

Zymot used per special request by MC
 SAV IDd post zymot sample

Song, Julee										-2747	
DOB: 05/18/1982		Cycle #: 5		Cycle Type: IVF					Proc#: 141172		Prov: MC Nurse: VZV

DAY 1

Embryo#	Outcome	Emb	Witness	Date	Time	Pro Nuc	Polar Body	Maturity	24hr Chk	Incubator	Comment
1	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	
2	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	
3	Ongoing	TZ	AXB	07/26/2025	06:43AM	2	2			35	

DAY 3

Embryo#	Outcome	Emb	Witness	Date	Time	Grade	Cell	Frag%	Frag Type	Symmetry	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	ChgOver	Incubator	Thaw Survival	Comment
1	Ongoing	VAC	RYM1	07/28/2025	09:29AM	1					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		
2	Ongoing	VAC	RYM1	07/28/2025	09:29AM	2					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		
3	Ongoing	VAC	RYM1	07/28/2025	09:29AM	3					<input type="checkbox"/>				<input checked="" type="checkbox"/>	Laser	VAC	72		

DAY 5

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
1	Ongoing	VAC	HHL	07/30/2025	07:16AM	Blast		1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
2	Ongoing	VAC	HHL	07/30/2025	07:16AM	MOR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Ongoing	VAC	HHL	07/30/2025	07:16AM	6					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

Song, Julee

DOB: 05/18/1982

Cycle #: 5

Cycle Type: IVF

Proc#: 141172

-2747

Prov: MC

Nurse: VZV

DAY 6

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
1	MFC	MZC		07/31/2025	07:25AM	Blast		4	C	C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				<input type="checkbox"/>		72			Pnd	Pnd	Pnd	Pnd
2	Ongoing	MZC		07/31/2025	07:25AM	Blast		1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Ongoing	MZC		07/31/2025	07:25AM	6					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

DAY 7

Embryo#	Outcome	Emb	Wit	Date	Time	Stage	Cell Type	Exp	ICM	Troph	ICM Absent	ICM Necrotic	TE Necrotic	Bx	Bx For	Bx Emb	Bx Method	AH	AH Method	Incubator	Thaw Survival	Comment	Gen Anal.	Ploidy	PGD	Appro.for ET
2	Discard	HYL		08/01/2025	07:09AM	Blast	Arrest	1			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						
3	Discard	HYL		08/01/2025	07:09AM	6	Arrest				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		72						

Song, Julee		-2747	
DOB: 05/18/1982	Cycle #: 5	Cycle Type: IVF	Proc#: 141172
		Prov: MC	Nurse: VZV

Replacement

General Information

Replace Date:	Embryologist:	Cath:
Replace Time:	Physician:	

Embryo Status and Quantities

Embryos Loaded:
Embryos Returned:
Embryos Intact:
Returned Empty Zona:
Final Embryos Repl:

Attributes

<input type="checkbox"/> Forceps	<input type="checkbox"/> Blood Outside	<input type="checkbox"/> Muc. Plug
<input type="checkbox"/> Tenac	<input type="checkbox"/> Mucus Outside	<input type="checkbox"/> Difficult
<input type="checkbox"/> O-sheath	<input type="checkbox"/> Blood Inside	<input type="checkbox"/> Anesthetic
<input type="checkbox"/> Dialated	<input type="checkbox"/> Mucus Inside	<input type="checkbox"/> Valium
<input type="checkbox"/> Pain		<input type="checkbox"/> Trial Cath
<input type="checkbox"/> Mucs. Aspir		<input type="checkbox"/> Irrigation
Depth Pen:	Attempts Pen:	

Endo / Video

Reloads:
Endo Thick:
Endo Type:
Reload Cath:
Tape ID:
Location:

Replaced Embryos

Song, Julee										-2747	
DOB: 05/18/1982		Cycle #: 5		Cycle Type: IVF				Proc#: 141172		Prov: MC	Nurse: VZV

Cryo

Embryo	Outcome	Emb	Date	Time	Technique	Recryo	Exp	ICM	Troph	Cells	Cell Stage	FDA Label	Cryo Location	Comment
1	Cryoed	BZC	07/31/2025	09:15AM	VIT		4	C	C	Blast	Day 6	NOT EVALUATED FOR INFECTIOUS SUBSTANCES - WARNING: ADVISE RECIPIENT OF COMMUNICABLE DISEASE RISKS	[BR Active Embryo Storage] BR Dewar 60 Tier A Box 20 Goblet F2 Straw 1 D6 PGT AX1#1	

Results

Cycle 3

June 2, 2025 CD18 (random day labs/us)

Estradiol (E2)

158.7

pg/mL

Luteinizing hormone (LH)

3.17

mIU/mL

Progesterone (P4)

17.49

ng/mL

Thyroid Stimulating Hormone (TSH)

1.390

uIU/mL

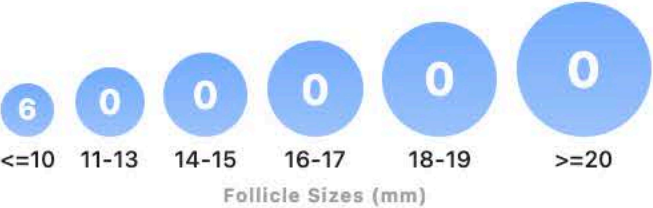
Human Chorionic Gonadotropin (BHCG)

<3

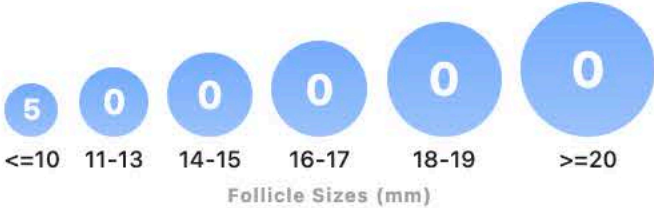
mIU/mL

Ultrasound Scan

Left Ovary



Right Ovary



Endometrial Thickness



July 9, 2025

Estradiol (E2)
117.9
pg/mL

Progesterone (P4)
2.89
ng/mL

Human Chorionic Gonadotropin (BHCG)
<3
mIU/mL

July 2, 2025 CD17

Progesterone (P4)
41.2
ng/mL

June 23, 2025 CD10

Estradiol (E2)
171.5
pg/mL

Luteinizing hormone (LH)
12.39
mIU/mL

Progesterone (P4)
0.403
ng/mL

Ultrasound Scan

Left Ovary

4

0

0

0

0

0

<=1011-1314-1516-1718-19>=20

Follicle Sizes (mm)

Right Ovary

5

0

0

1

0

1

<=1011-1314-1516-1718-19>=20

Follicle Sizes (mm)

Endometrial Thickness

8.8

015

June 16, 2025 CD3

Estradiol (E2)
68.89
pg/mL

Progesterone (P4)
0.612
ng/mL

Human Chorionic Gonadotropin (BHCG)
<3
mIU/mL

Ultrasound Scan

Left Ovary

4

0

0

0

0

0

<=1011-1314-1516-1718-19>=20

Follicle Sizes (mm)

Right Ovary

5

0

0

0

0

0

<=1011-1314-1516-1718-19>=20

Follicle Sizes (mm)

Endometrial Thickness

5.4

015

July 24, 2025

ER4 freeze all, PGT: prev luteal Estrace 2mg PO BID x 9 days; COH started CD1 (7/11/25) letrozole 5 mg x 5 days, dexamethasone 0.5 mg daily, Gonal 225, Menopur 75; CD6 (7/16) Gonal 200, Menopur 150, Omnitrope 2.9 mg x 4 days; triggered on CD13 (7/23/25) w/ Pregnyl 3300u and Lupron 40mL, additional Lupron 40mL 12H later; ER 7/25/25 (36H post trigger) 3 oocytes retrieved; 3 mature, 3 fertilized



July 23, 2025

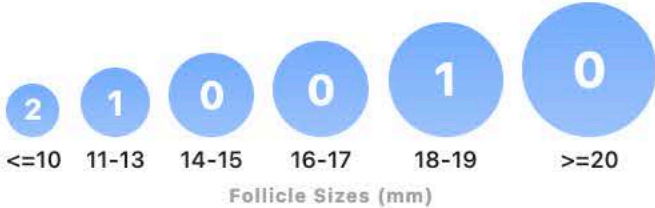


Ultrasound Scan

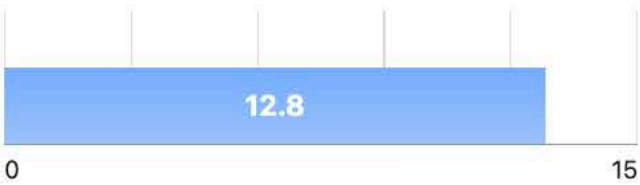
Left Ovary



Right Ovary



Endometrial Thickness



Results

Cycle 5

July 22, 2025

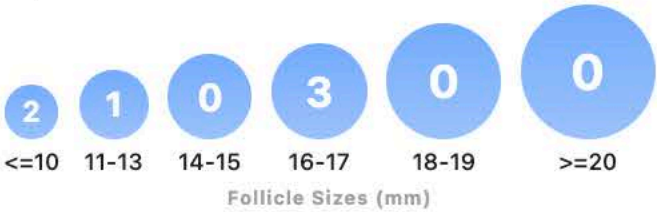
Estradiol (E2)
444.8
pg/mL

Luteinizing hormone (LH)
5.50
mIU/mL

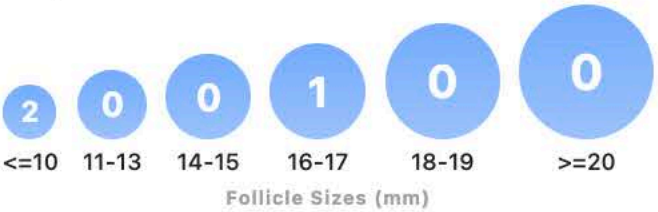
Progesterone (P4)
0.829
ng/mL

Ultrasound Scan

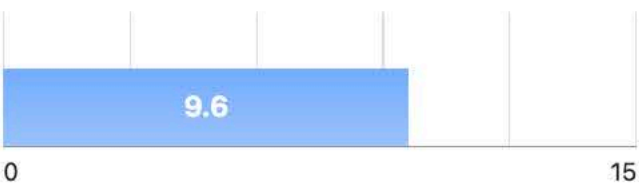
Left Ovary



Right Ovary



Endometrial Thickness



July 20, 2025

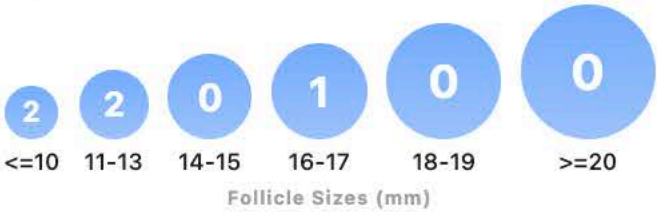
Estradiol (E2)
147.7
pg/mL

Luteinizing hormone (LH)
1.26
mIU/mL

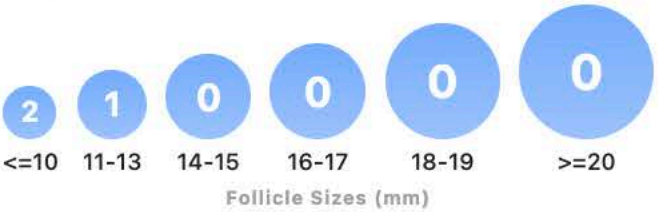
Progesterone (P4)
0.347
ng/mL

Ultrasound Scan

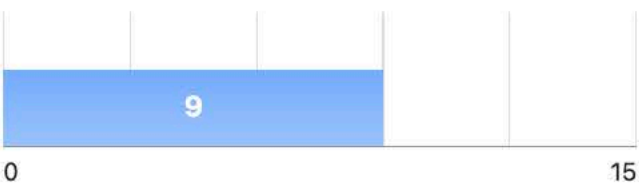
Left Ovary



Right Ovary



Endometrial Thickness



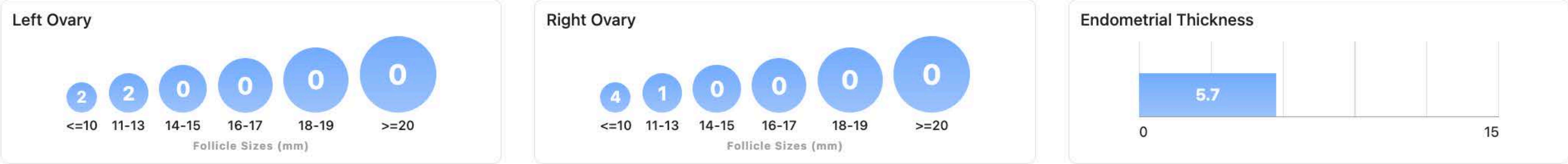
July 18, 2025

Estradiol (E2)
65.31
pg/mL

Luteinizing hormone (LH)
1.59
mIU/mL

Progesterone (P4)
0.276
ng/mL

Ultrasound Scan



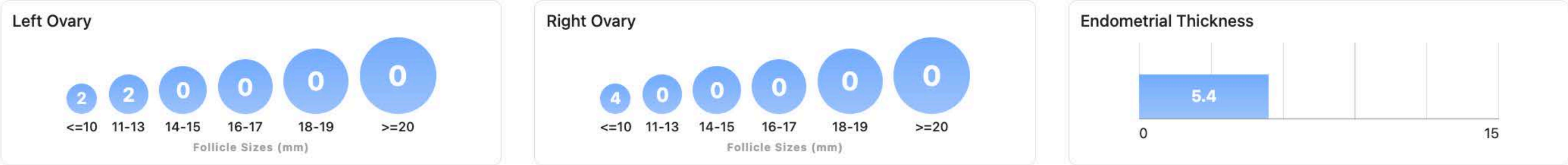
July 16, 2025

Estradiol (E2)
36.28
pg/mL

Luteinizing hormone (LH)
12.82
mIU/mL

Progesterone (P4)
0.463
ng/mL

Ultrasound Scan



July 14, 2025

Estradiol (E2)
22.68
pg/mL

Luteinizing hormone (LH)
8.84
mIU/mL

Progesterone (P4)
0.469
ng/mL

Ultrasound Scan

Left Ovary

4

0

0

0

0

0

<=10

11-13

14-15

16-17

18-19

>=20

Follicle Sizes (mm)

Right Ovary

4

0

0

0

0

0

<=10

11-13

14-15

16-17

18-19

>=20

Follicle Sizes (mm)

Endometrial Thickness

6.3

0

15

July 11, 2025

Estradiol (E2)
107.1
pg/mL

Luteinizing hormone (LH)
1.29
mIU/mL

Progesterone (P4)
0.435
ng/mL

Human Chorionic Gonadotropin (BHCG)
<3
mIU/mL

Ultrasound Scan

Left Ovary

4

0

0

0

0

0

<=10

11-13

14-15

16-17

18-19

>=20

Follicle Sizes (mm)

Right Ovary

4

0

0

0

0

0

<=10

11-13

14-15

16-17

18-19

>=20

Follicle Sizes (mm)

Endometrial Thickness

8.1

0

15

Date Collected: 07/25/2025

Date Received: 07/25/2025

Date Reported: 07/31/2025

Fasting: Not Given

Ordered Items: Pathology Report; 88305 Surg Path-1st Site; IHC 1st AB Stain x1 GLBL

General Comments & Additional Information

CO-RNS2025-20600190
A duplicate report has been generated due to demographic updates.

Diagnosis and Specimen Info

Material Submitted	Details
● Part A: endometrium	<div><div>Diagnosis:</div><div>ENDOMETRIAL BIOPSY: EARLY SECRETORY ENDOMETRIUM. NO EVIDENCE OF HYPERPLASIA, ATYPIA, OR MALIGNANCY. ⁰²</div></div> <div><div>Comment:</div><div>A CD138 stain is negative for plasma cells, arguing against chronic endometritis. Clinical correlation is recommended, with follow up, as clinically appropriate. All controls show appropriate reactivity. This report may include one or more immunoperoxidase stain results which use analyte-specific reagents. These tests were developed and their performance characteristics determined by Labcorp. They have not been cleared or approved by the U.S. Food and Drug Administration. The F.D.A. has determined that such clearance or approval is not necessary. The positive and negative controls have been reviewed by the pathologist and are satisfactory. ⁰²</div></div> <div><div>Gross description:</div><div>1 Container, formalin-filled, labeled with patient identification. ENDOMETRIAL BIOPSY,: Received labeled ENDOMETRIAL are multiple fragments of tan, hemorrhagic material measuring 1.5 x 1.5 x 0.1 cm in aggregate. Submitted in toto in cassette(s) 1. ⁰¹</div></div> <div><div>Electronically signed by</div><div>Ashhad Mahmood, MD, Pathologist ⁰² Diagnosis: MDI 07/31/2025 1027 Local ⁰² Gross Description: /KCE 07/26/2025 0115 Local ⁰¹</div></div> <div><div>Clinician Provided ICD Codes: N71.9 ⁰¹</div><div>Clinical History: CD 138 STAIN ⁰¹</div><div>Reported CPT Codes: 883051, W20061 ⁰²</div></div>

Performing Labs

01: RJ - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Lab: 908-526-2400 Dir: Liza Jodry, MD
02: DIANJ - Diagnostic Pathology Services, 16 Lilac Way, Skillman, NJ 08558-1727 Lab: 201-669-2347 Dir: Ashhad Mahmood, MD
For Inquiries, the physician may contact the lab using the numbers indicated above.

Song, Julee

Patient ID: JS05181982
Specimen ID: 206-F35-0019-0

DOB: 05/18/1982
Age: 43
Sex: Female

Patient Report

Account Number: 29118895
Ordering Physician: M COSTANTIN



Patient Details

Song, Julee
600 12TH ST APT 803, PALISADES PARK, NJ
07650-2085

Phone: 551-804-6028
Date of Birth: 05/18/1982
Age: 43
Sex: Female
Patient ID: JS05181982
Alternate Patient ID: JS05181982

Physician Details

M COSTANTIN
RMA of NJ ENGLEWOOD
25 ROCKWOOD PL Ste 320, ENGLEWOOD, NJ
07631

Phone: 201-569-7773
Account Number: 29118895
Physician ID:
NPI: 1861630451

Specimen Details

Specimen ID: 206F3500190
Control ID: L7506046817
Alternate Control Number: L7506046817
Date Collected: 07/25/2025 0000 Local
Date Received: 07/25/2025 0000 ET
Date Entered: 07/25/2025 2131 ET
Date Reported: 07/31/2025 1406 ET

Date Collected: 08/02/2025

Date Received: 08/02/2025

Date Reported: 08/06/2025

Fasting: Yes

Ordered Items: Heavy Metals Profile I, Blood; Hemoglobin A1c; Thyroxine (T4) Free, Direct; DHEA-Sulfate; Testosterone; TSH; Vitamin D, 25-Hydroxy; Triiodothyronine (T3); Thyroid Antibodies; Magnesium; Glucose, Plasma; Triiodothyronine (T3), Free; Selenium, Serum/Plasma; Venipuncture

Date Collected: 08/02/2025

Heavy Metals Profile I, Blood

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Lead, Blood ^{A, B, 01}	<1.0		ug/dL	0.0-3.4
Blood Lead Collection Method: Venous Testing performed by Inductively coupled plasma/Mass Spectrometry. Environmental Exposure: WHO Recommendation <5.0 Occupational Exposure: OSHA Lead Std 40.0 BEI 30.0 Detection Limit = 1.0				
Arsenic, Blood ^{A, C, 01}	4		ug/L	0-9
Detection Limit = 1				
Mercury, Blood ^{A, C, 01}	3.0		ug/L	0.0-14.9
Detection Limit = 1.0				

Hemoglobin A1c

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Hemoglobin A1c ^{D, 02}	5.4	5.7 03/31/2025	%	4.8-5.6
Please Note: ^{D, 02}	Prediabetes: 5.7 - 6.4 Diabetes: >6.4 Glycemic control for adults with diabetes: <7.0			

Thyroxine (T4) Free, Direct

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
T4,Free(Direct) ^{D, 02}	1.00	1.14 03/31/2025	ng/dL	0.82-1.77

DHEA-Sulfate

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
▲ DHEA-Sulfate ^{D, 02}	308.0 High	137.0 12/31/2024	ug/dL	57.3-279.2

Testosterone

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
▲ Testosterone ^{D, 02}	53 High	17 12/31/2024	ng/dL	4-50

TSH

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
TSH ^{D, 02}	2.310	1.390 06/02/2025	uIU/mL	0.450-4.500

Vitamin D, 25-Hydroxy

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Vitamin D, 25-Hydroxy ^{D, 02}	45.7	56.2	12/21/2024	ng/mL	30.0-100.0
<p>Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).</p> <p>1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.</p> <p>2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7):1911-30.</p>					

Triiodothyronine (T3)

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Triiodothyronine (T3) ^{D, 02}	82	70	03/31/2025	ng/dL	71-180

Thyroid Antibodies

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Thyroid Peroxidase (TPO) Ab ^{D, 02}	<9	12	03/08/2025	IU/mL	0-34
Thyroglobulin Antibody ^{C, 02}	<1.0	<1.0	03/08/2025	IU/mL	0.0-0.9
<p>Thyroglobulin Antibody measured by Beckman Coulter Methodology</p> <p>It should be noted that the presence of thyroglobulin antibodies may not be pathogenic nor diagnostic, especially at very low levels. The assay manufacturer has found that four percent of individuals without evidence of thyroid disease or autoimmunity will have positive TgAb levels up to 4 IU/mL.</p>					

Magnesium

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Magnesium ^{D, 02}	2.0			mg/dL	1.6-2.3

Glucose, Plasma

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Glucose, Plasma ^{D, 02}	87	95	12/31/2024	mg/dL	70-99
Please Note:				100 - 125	
Prediabetes				>125	
Diabetes					

Triiodothyronine (T3), Free

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Triiodothyronine (T3), Free ^{D, 02}	2.7	2.4	03/31/2025	pg/mL	2.0-4.4

Date Collected: 08/02/2025

Selenium, Serum/Plasma

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Selenium, Serum/Plasma ^{A, E, 01}	166		ug/L	93-198

Disclaimer
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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Comments
A: This test was developed and its performance characteristics determined by Labcorp. It has not been cleared or approved by the Food and Drug Administration.

Test Report Date
B: 08/06/2025
C: 08/05/2025
D: 08/03/2025
E: 08/04/2025

Performing Labs
01: BN - Labcorp Burlington, 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD
02: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: - - Lab: 800-631-5250

<div>Patient Details</div> <div>Song, Julee</div> <div>600 12TH ST APT 803, PALISADES PARK, NJ, 07650</div> <div>Phone: 551-804-6028</div> <div>Date of Birth: 05/18/1982</div> <div>Age: 43</div> <div>Sex: Female</div> <div>Patient ID:</div> <div>Alternate Patient ID:</div>	<div>Physician Details</div> <div>S DAVID</div> <div>Sami David MD</div> <div>1045 5th Ave Ste 1A, NEW YORK, NY, 10028</div> <div>Phone: 212-831-0430</div> <div>Account Number: 31018072</div> <div>Physician ID:</div> <div>NPI: 1003973587</div>	<div>Specimen Details</div> <div>Specimen ID: 214-436-8346-0</div> <div>Control ID: 10606324784</div> <div>Alternate Control Number:</div> <div>Date Collected: 08/02/2025 0955 Local</div> <div>Date Received: 08/02/2025 0000 ET</div> <div>Date Entered: 08/02/2025 1210 ET</div> <div>Date Reported: 08/06/2025 1405 ET</div>
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Date Collected: 08/11/2025

Date Received: 08/11/2025

Date Reported: 08/15/2025

Fasting: No

Ordered Items: Genital Culture, Routine

Date Collected: 08/11/2025

Genital Culture, Routine

Test	Current Result and Flag	Units	Reference Interval
Genital Culture, Routine ^{A, 01}	Final report		
Result 1 ^{B, 01}	Routine genital flora.		

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Test Report Date
A: Prelim: 08/13/2025; Final: 08/15/2025
B: Prelim: 08/13/2025 & 08/14/2025; Final: 08/15/2025

Performing Labs
01: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: - - Lab: 800-631-5250

Patient Details Song, Julee 600 12TH ST, PALISADES PARK, NJ, 07650 Phone: Date of Birth: 05/18/1982 Age: 43 Sex: Female Patient ID: Alternate Patient ID:	Physician Details S DAVID Sami David MD 1045 5th Ave Ste 1A, NEW YORK, NY, 10028 Phone: 212-831-0430 Account Number: 31018072 Physician ID: DAVID,S NPI: 1003973587	Specimen Details Specimen ID: 223-210-5014-0 Control ID: J9N31018072 Alternate Control Number: Date Collected: 08/11/2025 0905 Local Date Received: 08/11/2025 0000 ET Date Entered: 08/11/2025 1837 ET Date Reported: 08/15/2025 1405 ET
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Date Collected: 09/12/2025

Date Received: 09/12/2025

Date Reported: 09/12/2025

Fasting: Yes

Ordered Items: Luteinizing Hormone(LH); Estradiol; Glucose, Plasma; Progesterone; STAT; Venipuncture

Date Collected: 09/12/2025

Luteinizing Hormone(LH)

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
LH ^{A, 01}	38.9	9.6 03/08/2025	mIU/mL	
		Adult Female	Range	
		Follicular phase	2.4 - 12.6	
		Ovulation phase	14.0 - 95.6	
		Luteal phase	1.0 - 11.4	
		Postmenopausal	7.7 - 58.5	

Estradiol

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Estradiol ^{A, 01}	428.0	242.0 11/25/2024	pg/mL	
		Adult Female	Range	
		Follicular phase	12.5 - 166.0	
		Ovulation phase	85.8 - 498.0	
		Luteal phase	43.8 - 211.0	
		Postmenopausal	<6.0 - 54.7	
		Pregnancy		
		1st trimester	215.0 - >4300.0	
	Roche ECLIA methodology			

Glucose, Plasma

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Glucose, Plasma ^{A, 01}	90	87 08/02/2025	mg/dL	70-99
		Please Note:		
		Prediabetes	100 - 125	
		Diabetes	>125	

Progesterone

Test	Current Result and Flag	Previous Result and Date	Units	Reference Interval
Progesterone ^{A, 01}	0.8	41.2 07/02/2025	ng/mL	
		Follicular phase	0.1 - 0.9	
		Luteal phase	1.8 - 23.9	
		Ovulation phase	0.1 - 12.0	
		Pregnant		
		First trimester	11.0 - 44.3	
		Second trimester	25.4 - 83.3	
		Third trimester	58.7 - 214.0	
		Postmenopausal	0.0 - 0.1	

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Date Collected: 09/12/2025

Date Received: 09/12/2025

Date Reported: 09/13/2025

Fasting: Yes

Ordered Items: Insulin; Ferritin

Date Collected: 09/12/2025

Insulin

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Insulin ^{A, 01}	6.9	10.7	12/31/2024	uIU/mL	2.6-24.9

Ferritin

Test	Current Result and Flag	Previous Result and Date		Units	Reference Interval
Ferritin ^{A, 01}	42			ng/mL	15-150

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Icon Legend
▲ Out of Reference Range ■ Critical or Alert

Test Report Date
A: 09/13/2025

Performing Labs
01: RN - Labcorp Raritan, 69 First Avenue, Raritan, NJ 08869-1800 Dir: Liza Jodry, MD
For inquiries, the physician may contact Branch: - - Lab: 800-631-5250

<div>Patient Details</div> <div>Song, Julee</div> <div>600 12TH ST APT 803, PALISADES PARK, NJ, 07650</div> <div>Phone: 551-804-6028</div> <div>Date of Birth: 05/18/1982</div> <div>Age: 43</div> <div>Sex: Female</div> <div>Patient ID:</div> <div>Alternate Patient ID:</div>	<div>Physician Details</div> <div>S DAVID</div> <div>Sami David MD</div> <div>1045 5th Ave Ste 1A, NEW YORK, NY, 10028</div> <div>Phone: 212-831-0430</div> <div>Account Number: 31018072</div> <div>Physician ID:</div> <div>NPI: 1003973587</div>	<div>Specimen Details</div> <div>Specimen ID: 255-436-1704-0</div> <div>Control ID: 10603958424</div> <div>Alternate Control Number:</div> <div>Date Collected: 09/12/2025 0714 Local</div> <div>Date Received: 09/12/2025 0000 ET</div> <div>Date Entered: 09/12/2025 1440 ET</div> <div>Date Reported: 09/13/2025 0805 ET</div>
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