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CLINICAL REPORT

Comments:

Fasting: NOT PROVIDED

*******OUT OF RANGE SUMMARY*******

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|--|--------|-------------|-----------|-------|-----------------|----------|
| % FREE PSA | | 16 L | 25% - 99% | % | 16 | 07/10/18 |
| Interpret only if Total PSA is between 4.0 - 10.0 ng/mL. Clinical correlations also required. fPSA% <10% = CANCER RISK >49% fPSA% >25% = CANCER RISK <10% | | | | | | |

****** HEMATOLOGY ******

CBC

| Test/Result | Abnormal | Reference | Units | Previous Result | Date |
|-------------|----------|--------------|---------------------|-----------------|----------|
| WBC | 6.4 | 4.2 - 11.8 | 10 ³ /uL | 6.2 | 07/10/18 |
| RBC | 4.60 | 4.4 - 5.8 | 10 ⁶ /uL | 4.97 | 07/10/18 |
| HEMOGLOBIN | 14.5 | 13.1 - 17.1 | g/dL | 15.4 | 07/10/18 |
| HEMATOCRIT | 44 | 40 - 50.4 | % | 48 | 07/10/18 |
| MCV | 95 | 80.8 - 97.4 | fL | 97 | 07/10/18 |
| MCH | 31.4 | 26.6 - 33.0 | pg | 30.9 | 07/10/18 |
| MCHC | 33.1 | 32 - 34.9 | g/dL | 32.0 | 07/10/18 |
| RDW | 13.7 | 11.8 - 15.5 | % | 14.1 | 07/10/18 |
| PLATELET | 223 | 147 - 365 | 10 ³ /uL | 256 | 07/10/18 |
| MPV | 9.48 | 6.00 - 12.00 | fL | 9.39 | 07/10/18 |

AUTOMATED DIFFERENTIAL

| Test/Result | Abnormal | Reference | Units | Previous Result | Date |
|---------------|----------|-------------|---------------------|-----------------|----------|
| SEGMENTED % | 60.9 | 43.7 - 73.5 | % | 67.5 | 07/10/18 |
| SEGMENTED # | 3.9 | 1.9 - 7.5 | 10 ³ /uL | 4.2 | 07/10/18 |
| LYMPHOCYTES % | 32.12 | 17.9 - 45.1 | % | 27.97 | 07/10/18 |
| LYMPHOCYTES # | 2.1 | 1 - 4 | 10 ³ /uL | 1.7 | 07/10/18 |
| MONOCYTES % | 5.7 | 3.8 - 10 | % | 3.8 | 07/10/18 |
| MONOCYTES # | 0.4 | 0.2 - 0.9 | 10 ³ /uL | 0.2 | 07/10/18 |
| EOSINOPHILS % | 0.94 | 0.0 - 6.1 | % | 0.31 | 07/10/18 |
| EOSINOPHILS # | 0.06 | 0.0 - 0.5 | 10 ³ /uL | 0.02 | 07/10/18 |
| BASOPHILS % | 0.36 | 0.0 - 0.9 | % | 0.46 | 07/10/18 |
| BASOPHILS # | 0.02 | 0.0 - 0.1 | 10 ³ /uL | 0.03 | 07/10/18 |

******CHEMISTRY******

COMPREHENSIVE METABOLIC

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|----------------|--------|----------|-----------|--------|-----------------|----------|
| SODIUM | 142 | | 136 - 145 | mmol/L | 139 | 07/10/18 |
| POTASSIUM | 4.5 | | 3.5 - 5.1 | mmol/L | 3.7 | 07/10/18 |
| CHLORIDE | 105 | | 98 - 107 | mmol/L | 99 | 07/10/18 |
| CARBON DIOXIDE | 26.0 | | 17 - 32 | mEq/L | 24.0 | 07/10/18 |

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CLINICAL REPORT

Comments:

Fasting: NOT PROVIDED

****CHEMISTRY**** (Continued)

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|-----------------------|--------|----------|------------|--------|-----------------|-----------|
| GLUCOSE | 83 | | 70 - 99 | mg/dL | 79 | 07/10/18 |
| BUN | 20 | | 7 - 25 | mg/dL | 16 | 07/10/18 |
| CREATININE SERUM | 0.89 | | 0.7 - 1.3 | mg/dL | 0.99 | 07/10/18 |
| BUN/CREATININE RATIO | 22 | | 8 - 28 | Ratio | 16 | 07/10/18 |
| BILIRUBIN, Total | 0.3 | | 0.2 - 1.0 | mg/dL | 0.7 | 07/10/18 |
| CALCIUM | 9.0 | | 8.6 - 10.5 | mg/dL | 9.5 | 07/10/18 |
| PROTEIN TOTAL | 7.2 | | 6.6 - 8.2 | g/dL | 7.9 | 07/10/18 |
| ALBUMIN | 4.5 | | 3.5 - 5.7 | g/dL | 4.8 | 07/10/18 |
| ALK. PHOSPHATASE | 55 | | 34 - 104 | U/L | 65 | 07/10/18 |
| ALT (SGPT) | 35 | | 7 - 52 | U/L | 27 | 07/10/18 |
| AST (SGOT) | 28 | | 11 - 39 | U/L | 31 | 07/10/18 |
| GLOBULIN | 2.7 | | 1.8 - 4.0 | g/dL | 3.1 | 07/10/18 |
| A/G RATIO | 1.7 | | 0.8 - 2.7 | Ratio | 1.5 | 07/10/18 |
| GLOMERULAR FILT. RATE | 99 | | >60 | mL/min | 88 | 07/10/18* |

If African-American result is: >60
For African-American patients, the GFR should be adjusted.
Please multiply the reported value by 1.21

****THYROID****

| Test Result | Abnormal | Reference | Units | Previous Result | Date |
|-------------|----------|-----------|-------------|-----------------|------|
| FREE T4 | 0.82 | | 0.61 - 1.12 | ng/dL | |

Patients with high serum biotin levels will have falsely elevated results.

****HORMONES****

| Test Result | Abnormal | Reference | Units | Previous Result | Date |
|---|----------|-----------|--------------|-----------------|-------------------|
| DHEA-SULFATE | 211.0 | | 34.5 - 568.9 | ug/dL | 216.7 07/10/18 |
| ESTRADIOL | 26.9 | | 39.8 | pg/mL | 22.6 07/23/18 |
| <p>REFERENCE RANGE:</p> <p>FEMALES:</p> <p>MENSTRUATING FEMALE (by day in cycle relative to LH peak)</p> <p>FOLLICULAR PHASE 19.5 - 144.2</p> <p>MIDCYCLE 63.9 - 356.7</p> <p>LUTEAL 55.8 - 214.2</p> <p>POSTMENOPAUSAL 0.00 - 32.2 (untreated)</p> <p>MALES: 0.00 - 39.8</p> | | | | | |
| PROGESTERONE | <0.20 | | | ng/mL | 0.31 07/10/18 |
| <p>Reference Range:</p> <p>Males 0.27 - 0.90</p> <p>Normal Females</p> | | | | | |

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CLINICAL REPORT

Comments:

Fasting: NOT PROVIDED

******HORMONES**** (Continued)**

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|--|--------------|------------|-------------|--------|-----------------|----------|
| follicular phase | 0.33 - 1.20 | | | | | |
| luteal phase | 0.72 - 17.80 | | | | | |
| mid luteal phase | 6.00 - 24.00 | | | | | |
| Postmenopausal phase | 0 - 1.00 | | | | | |
| Pregnant Females | | | | | | |
| first trimester | 9.3 - 33.2 | | | | | |
| second trimester | 29.5 - 50.0 | | | | | |
| third trimester | 83.1 - 160.0 | | | | | |
| TESTOSTERONETOTAL | 238.02 | | 198 - 679 | ng/dL | 408.97 | 07/10/18 |
| NO RANGES ESTABLISHED FOR MALES BELOW 18 AND OVER 66 YEARS OLD | | | | | | |
| NO RANGES ESTABLISHED FOR FEMALES BELOW 21 AND OVER 73 YEARS OLD | | | | | | |
| PLEASE NOTE: THE UNITS FOR TOTAL TESTOSTERONE WAS CHANGED TO ng/dL | | | | | | |
| TESTO FREE CALCULATED | 63.00 | | | % | 88.00 | 07/10/18 |
| REFERENCE RANGE: | | | | | | |
| Males 20-50 years | | 24.3-110.2 | % | | | |
| Females 20-46 years | | 0.65-10.93 | % | | | |
| Post-menopausal females 47-91 years | | 0.23-6.80 | % | | | |
| FAI (Free Androgen Index(%))= FTI (Free Testosterone Index calculated) | | | | | | |
| NO RANGES ESTABLISHED FOR MALES BELOW 20 AND OVER 50 YEARS OLD. | | | | | | |
| NO RANGES ESTABLISHED FOR FEMALES BELOW 20 AND OVER 46 YEARS OLD. | | | | | | |
| SEX HORMONE BINDING GLOB | 13.2 | | 13.2 - 89.6 | nmol/L | 16.1 | 07/10/18 |
| REFERENCE RANGE : | | | | | | |
| Males 20-50 years | | 13.3-89.5 | nmol/L | | | |
| Females 20-46 years | | 18.2-135.5 | nmol/L | | | |
| Post-menopausal females 47-91 years | | 16.8-125.2 | nmol/L | | | |
| NO RANGES ESTABLISHED FOR MALES BELOW 20 AND OVER 50 YEARS OLD. | | | | | | |
| NO RANGES ESTABLISHED FOR FEMALES BELOW 20 AND OVER 91 YEARS OLD. | | | | | | |

******HORMONES******

| Test/Result | Abnormal | Reference | Units | Previous Result | Date |
|--|----------|-----------|-------|-----------------|----------|
| PREGNENOLONE | 18.3 | 13 - 208 | ng/dL | 56.6 | 07/10/18 |
| This test was developed and its characteristics determined by Accu Reference Medical Lab. This test has not been cleared by the FDA. It is used for clinical purposes, it is not meant to be used as the only diagnostic method. | | | | | |

PROSTATE HEALTH

| Test/Result | Abnormal | Reference | Units | Previous Result | Date |
|--|----------|-----------|-------|-----------------|----------|
| PSA | 1.73 | 0.0 - 4.0 | ng/mL | 2.50 | 07/10/18 |
| PSA Hybritech better defines the 4.0 - 10.0 ng/mL gray zone effective (Continued on Next Page) | | | | | |



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CLINICAL REPORT

Comments:

Fasting: NOT PROVIDED

PROSTATE HEALTH (Continued)

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|------------|---|------------|-------------|---------------|-----------------|----------|
| | 04/06/2016. Methodology: Paramagnetic Particle Chemiluminescent Immunoassay- Beckman Diagnostics. Values obtained with different PSA assay methods cannot be used interchangeably. Do not interpret serum PSA as absolute evidence of the presence of malignant disease. PSA levels should be used concurrently with other diagnostic and clinical patient information. | | | | | |
| PSA FREE | 0.280 | | 0.00 - 2.30 | ng/mL | 0.400 | 07/10/18 |
| | FREE PSA ASSAY IS ONLY VALID WHEN THE TOTAL PSA RANGE IS BETWEEN 4-10ng/mL. FREE PSA RESULTS SHOULD BE USED IN CONJUNCTION WITH OTHER DIAGNOSTIC PROCEDURES AVAILABLE FROM THE CLINICAL EVALUATION. Methodology: Paramagnetic Particle Chemiluminescent Immunoassay? Beckman Diagnostics. Values obtained with different Free PSA assay methods cannot be used interchangeably. Do not interpret serum Free PSA as absolute evidence of the presence of malignant disease. Free PSA levels should be used concurrently with other diagnostic and clinical patient information. | | | | | |
| % FREE PSA | | 16L | 25% - 99% | % | 16 | 07/10/18 |
| | Interpret only if Total PSA is between 4.0 - 10.0 ng/mL. Clinical correlations also required. fPSA% <10% = CANCER RISK >49% fPSA% >25% = CANCER RISK <10% | | | | | |
| p2PSA | 7.67 | | | pg/mL | 9.77 | 07/10/18 |
| PHI | 36.03 | | | | 38.62 | 07/10/18 |
| | Probability of Prostate Cancer on Biopsy for Beckman Coulter. PHI in Patients with PSA between 4 and 10ng/mL with normal DRE. | | | | | |
| | Beckman Coulter phi Range Probability of Cancer 95% Confidence Interval (Hybritech Calibration) | | | | | |
| | 0 - 26.9 | 9.8% | | 5.2% - 15.4% | | |
| | 27.0 - 35.9 | 16.8% | | 11.3% - 22.2% | | |
| | 36.0 - 54.9 | 33.3% | | 26.8% - 39.9% | | |
| | 55.0+ | 50.1% | | 39.8% - 61.0% | | |

****VITAMINS****

| Test/Result | Abnormal | Reference | Units | Previous Result | Date |
|-------------|--|-----------|------------|-----------------|------|
| VITAMIN B12 | 644 | | 180 - 914 | pg/mL | |
| | INDETERMINATE | | 145 - 180 | pg/mL | |
| | DEFICIENT | | <= 145 | pg/ml | |
| | THIS ASSAY IS NOT VALIDATED FOR TESTING NEONATAL OR MYELOPROLIFERATIVE SYNDROME SPECIMENS. | | | | |
| FOLATE | >23.90 | | 5.9 - 24.8 | ng/mL | |

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CLINICAL REPORT

Comments:

Fasting: NOT PROVIDED

****METALS & MINERALS****

| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|---|--------|----------|-----------|-------|-----------------|------|
| reported: 10/26/18 02:14 | | | | | | |
| COPPER | | | | | | |
| Copper, Serum/Plasma | 82 | | 70 - 140 | ug/dL | | |
| <p>INTERPRETIVE INFORMATION: Copper, Serum or Plasma Serumcopper maybe elevated with infection, inflammation, stress, and copper supplementation. In females, elevated copper may also be caused by oral contraceptives and pregnancy (concentrations may be elevated up to 3 times normal during the third trimester). Serumcopper may be reduced by use of corticosteroids and zinc and by malnutrition or malabsorption. See Compliance Statement B at www.aruplab.com/cs Performed by ARUP Laboratories, 500 Chipeta Way, SLC, UT 84108 800-522-2787 www.aruplab.com, Julio Delgado, MD, Lab. Director</p> | | | | | | |

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| Test | Result | Abnormal | Reference | Units | Previous Result | Date |
|--------------------------|--------|----------|-----------|-------|-----------------|------|
| reported: 10/26/18 08:23 | | | | | | |
| Magnesium, RBC | 6.0 | | 4.2 - 6.8 | mg/dL | | |

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END OF REPORT

*1) Unless otherwise noted, Tests Performed at :
ARUP Laboratories, UT, 84 www.aruplab.com
Director : Julio Delgado, MD

*2) Unless otherwise noted, Tests Performed at :
LabCorp Burlington, Burlington, NC 272153361
Director : William F Hancock, MD 8007624344

*THE FOLLOWING PREVIOUS TEST RESULTS WERE ACCOMPANIED BY FREE TEXT AND/OR CANNED

COMMENTS: : 88 (07/10/18)

GLOMERULAR FILTRATION RATE Result is: >60