

Auburn Montgomery Student Health Services

7461 East Dr
Montgomery, AL 36117
(334) 244-3281

Laboratory Results

Patient Name: SCOTT PARSONS

Order Date: 02/02/2022

MRN: 1145

DOB: 02/05/1973

Phone: (334) 740-9584

Gender: MALE

Placer Order ID: 00752151

Physician: BARTON

Filler Order ID: AL122022P

Physician ID: 1215285879

Specimen Date: 02/02/2022 11:31 AM

Fasting:

Result Date: 02/03/2022 6:56 AM

Disposition:

Specimen Source: SOURCE, UNSPECIFIED

LIPID PANEL	7600	STATUS: FINAL
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Test Name	Abnormal	Result Value	Unit of Measure	Ref Range	Status	Producer ID
CHOLESTEROL, TOTAL	H	309	mg/dL	<200	F	AT
HDL CHOLESTEROL		51	mg/dL	> OR = 40	F	AT
TRIGLYCERIDES		103	mg/dL	<150	F	AT
LDL-CHOLESTEROL	H	235	mg/dL (calc)		F	AT
LDL-C levels > or = 190 mg/dL may indicate familial hypercholesterolemia (FH). Clinical assessment and measurement of blood lipid levels should be considered for all first degree relatives of patients with an FH diagnosis. For questions about testing for familial hypercholesterolemia, please call Quest Genomics Client Services at 1.866.GENE.INFO. Jacobson T, et al. J National Lipid Association Recommendations for Patient-Centered Management of Dyslipidemia: Part 1 Journal of Clinical Lipidology 2015;9(2), 129-169. Reference range: <100 . Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with > or = 2 CHD risk factors. . LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C. Martin SS et al. JAMA. 2013;310(19): 2061-2068 (http://education.QuestDiagnostics.com/faq/FAQ164)						
CHOL/HDL-C RATIO	H	6.1	(calc)	<5.0	F	AT
NON HDL CHOLESTEROL	H	258	mg/dL (calc)	<130	F	AT
Non-HDL level > or = 220 is very high and may indicate genetic familial hypercholesterolemia (FH). Clinical assessment and measurement of blood lipid levels should be considered for all first-degree relatives of patients with an FH diagnosis. . For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic						

Confidential

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option.

Lab

QUEST DIAGNOSTICS-ATLANTA(11D0255931) - AT
1777 MONTREAL CIRCLE TUCKER, GA 30084-6802

YOUNG ANDREW

Comments:

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