

2732 7th Avenue South
Birmingham, AL 35233
Tel: (205)-313-1240
FAX: (205)-313-1250



SOLSTAS[®]
LAB PARTNERS



Quest
Diagnostics

AUM NURSING CARE CENTER
7401 EAST DRIVE
MONTGOMERY, AL 36117

Patient Name TREWTS, MAEBEL			Accession F121206		
Sex/Species FEMALE	Date of Birth 09/05/1962	Age 52	Requisition 07/01/2015 09:00		
Patient Phone () () () () () ()	Patient ID # LEWISMAEBEL183	Med. Rec. # () () () () () ()	Collected 07/07/2015 08:40		
Reported 07/07/2015 08:40					

REQUEST	RESULT	UNITS	NORMALS	TEST LOC
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Reprinted on: 07/07/2015 08:40
CULTURE, ROUTINE (Final) SKB

Source: Leg, Right
HEAVY GROWTH METHICILLIN RESISTANT STAPH. AUREUS
NEGATIVE FOR INDUCIBLE CLINDAMYCIN RESISTANCE.

THERAPY COMMENTS: Oxacillin resistant staphylococci are resistant to all currently available beta-lactam antimicrobial agents including penicillin's, beta lactam/beta-lactamase inhibitor combinations, and cepheims with staphylococcal indications, including Cefazolin.

Antibiotic Susceptibility	
Organism	Antibiotic
	MRSA
	INT
AMOX/K CLAV	R
AMPICILLIN/SULBACTAM	R
CIPROFLOXACIN	S
CLINDAMYCIN	S
ERYTHROMYCIN	R
GENTAMICIN	S
LEVOFLOXACIN	S
OXACILLIN	R
TETRACYCLINE	S
TRIMETHOPRIM/SULFAMETHOXAZOLE	S
VANCOMYCIN	S

S = Susceptible I = Intermediate R = Resistant

CULTURE, ANAEROBIC (Preliminary) SKB

Source: Leg, Right
NO ANAEROBIC GROWTH

PARTIAL REPORT - FINAL TO FOLLOW

Testing Locations:

SKB QUEST DIAGNOSTICS - 1777 MONTREAL CIRCLE TUCKER, GA 30084

Medical Director: WILLIAM MILLER, M.D. CLIA #:11D0255931

2732 7th Avenue South
Birmingham, AL 35202
Tel: (205) 319 1240
FAX: (205) 319 1230



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Quest
Diagnostics

AUM NURSING CARE CENTER
7461 EAST DRIVE
MONTGOMERY, AL 36117

Patient Name LEWIS, MAEBEL			Requesting Physician: FUENTES, MARYLUZ	
Sex/Species: FEMALE	Date of Birth: 09/05/1962	Age: 52	Accession: F121206	
Patient Phone:	Patient ID #: LEWISMAEBEL183	Med. Rec. #:	Requisition: 07/01/2015 09:00	
			Reported: 07/07/2015 08:40	

REQUEST	RESULT	UNITS	NORMALS	TEST LOC
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Reprinted on: 07/07/2015 08:40

CULTURE, ROUTINE

(Final)

SKB

Source: Leg, Right

HEAVY GROWTH

METHICILLIN RESISTANT STAPH. AUREUS

NEGATIVE FOR INDUCIBLE CLINDAMYCIN RESISTANCE.

THERAPY COMMENTS: Oxacillin-resistant staphylococci are resistant to all currently available beta lactam antimicrobial agents including penicillin's, beta lactam/beta-lactamase inhibitor combinations, and cepheems with staphylococcal indications, including Cefazolin.

Antibiotic Susceptibility

Organism	MRSA
Antibiotic	INT
AMOX/K CLAV	R
AMPICILLIN/SULBACTAM	R
CIPROFLOXACIN	S
CLINDAMYCIN	S
ERYTHROMYCIN	R
GENTAMICIN	S
LEVOFLOXACIN	S
OXACILLIN	R
TETRACYCLINE	S
TRIMETHOPRIM/SULFAMETHOXAZOLE	S
VANCOMYCIN	S

S = Susceptible I = Intermediate R = Resistant

CULTURE, ANAEROBIC

(Preliminary)

SKB

Source: Leg, Right

NO ANAEROBIC GROWTH

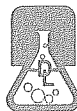
PARTIAL REPORT - FINAL TO FOLLOW

Testing Locations:

Quest Diagnostics - 11100 South Blvd, Birmingham, AL 35202
Medical Director: WILLIAM MILLER, M.D. CLIA #:11D0255931

DOCTORS LABORATORY, INC.

2906 JULIA DRIVE
VALDOSTA, GEORGIA 31602
PHONE 800-342-7552



Medicare No. 65016769LA
IP No. 28485-01
CLIA No. 11D0646134

PATIENT
LEWIS, MAYBELL
PHYSICIAN FUENTES

AUM NURSING CARE CENTER
7461 EAST DRIVE
MONTGOMERY, AL 36117

COLLECTED 07/14/2008 4:40 PM	RECEIVED 07/14/2008 5:57 PM	REPORT DATE 07/15/2008 6:00 AM
ROOM #	ACCOUNT NUMBER 436099	ORDER NUMBER K6527161
AGE 45 09/05/1962	SEX F	FASTING UNKNOWN
ROUTE 9501		PAGE 1

Pt Ph: MRN: PT ID#: REQ#:

TEST NAME	WITHIN RANGE	OUTSIDE RANGE	REFERENCE RANGE	UNITS
CBC				
WBC		12.20 (H)	4.0-11.7	THOU/CUMM
RBC		5.56 (H)	4.2-5.4	MILL/CUMM
HEMOGLOBIN		11.8 (L)	12.5-16.0	GMS
HEMATOCRIT	39.0		37.0-47.0	%
MCV		70.1 (L)	78-99	FL
MCH		21.2 (L)	27-31	PG
MCHC		30.2 (L)	32.0-36.0	G/DL
RDW		35.6 (H)	11.5-14.0	%
PLATELET COUNT		451 (H)	140-440	THOU/CUMM
NEUTROPHILS	52.5		40-75	%
LYMPHOCYTES	38.8		15-45	%
MONOCYTES	5.4		4.0-12.0	%
EOSINOPHILS	2.6		0-6	%
BASOPHILS	0.7		0-2	%
THYROID PROFILE 2				
T3 (% UPTAKE)		26.1 (L)	27-42	%
T4	9.4		4.5-12	MCG/DL
T7	2.5		1.0-3.8	INDEX
TSH	0.47		0.27-4.2	uIU/ML

*** FINAL REPORT ***

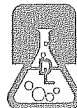
EXCEPT WHERE NOTED: TEST PERFORMED AT DOCTORS LABORATORY, VALDOSTA, GA
DIRECTOR: JACKSON L. GATES, M.D.

*avg 19 + 7 30
avg 25 + 25
25*

25-11-201

DOCTORS LABORATORY, INC.

2906 JULIA DRIVE
VALDOSTA, GEORGIA 31602
PHONE 800-342-7552



Medicare No. 65016769LA
CAP No. 28485-01
CLIA No. 11D0646134

PATIENT LEWIS, MAEBELL
PHYSICIAN FUENTES
AUM NURSING CARE CENTER
7461 EAST DRIVE
MONTGOMERY, AL 36117

COLLECTED 06/09/2008 3:15 PM	RECEIVED 06/10/2008 6:40 PM	REPORT DATE 06/11/2008 6:00 AM
ROOM #	ACCOUNT NUMBER 436099	ORDER NUMBER Q6420871
AGE 45 09/05/1962	SEX F FASTING UNKNOWN	ROUTE 9501 PAGE 1

Pt Ph: MRN: PT ID#: REQ#:

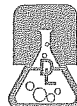
TEST NAME	WITHIN RANGE	OUTSIDE RANGE	REFERENCE RANGE	UNITS
IRON & IRON BINDING CAPACITY				
IRON, SERUM		11 (L)	30-160	MCG/DL
T.I.B.C.	369		285-445	MCG/DL
% SATURATION		3 (L)	10-40	%
UIBC	358		110-370	MCG/DL

*** FINAL REPORT ***

EXCEPT WHERE NOTED: TEST PERFORMED AT DOCTORS LABORATORY, VALDOSTA, GA
DIRECTOR: JACKSON L. GATES, M.D.

DOCTORS LABORATORY, INC.

2906 JULIA DRIVE
VALDOSTA, GEORGIA 31602
PHONE 800-342-7552



Medicare No. 65016769LA
JAP No. 28485-01
CLIA No. 11D0646134

PATIENT LEWIS, MAEBELL
PHYSICIAN FUENTES
AUM NURSING CARE CENTER
7461 EAST DRIVE
MONTGOMERY, AL 36117

COLLECTED		RECEIVED	REPORT DATE	
06/09/2008 3:15 PM		06/09/2008 5:49 PM	06/10/2008 6:00 AM	
ROOM #		ACCOUNT NUMBER	ORDER NUMBER	
		436099	K6497269	
AGE	SEX	FASTING	ROUTE	PAGE
45 09/05/1962	F	UNKNOWN	9501	1

Pt Ph: MRN: PT ID#: REQ#:

TEST NAME	WITHIN RANGE	OUTSIDE RANGE	REFERENCE RANGE	UNITS
CBC				
WBC	10.40		4.0-11.7	THOU/CUMM
RBC	4.55		4.2-5.4	MILL/CUMM
HEMOGLOBIN		7.6 (L)	12.5-16.0	GMS
HGB CHECKED				
HEMATOCRIT		25.7 (L)	37.0-47.0	%
MCV		56.4 (L)	78-99	FL
1+ MICROCYTOSIS				
1+ MACROCYTOSIS				
MCH		16.8 (L)	27-31	PG
MCHC		29.7 (L)	32.0-36.0	G/DL
RDW		20.7 (H)	11.5-14.0	%
PLATELET COUNT		556 (H)	140-440	THOU/CUMM
NEUTROPHILS	70.0		40-75	%
LYMPHOCYTES	24.0		15-45	%
MONOCYTES	6.0		4.0-12.0	%
EOSINOPHILS	0.0		0-6	%
BASOPHILS	0.0		0-2	%
COMPREHENSIVE METABOLIC PANEL				
CALCIUM	9.5		8.5-10.8	MG/DL
GLUCOSE	103		70-110	MG/DL
BUN		5 (L)	6-24	MG/DL
CREATININE	0.69		0.6-1.20	MG/DL
PROTEIN, TOTAL	7.5		6.4-8.3	GM/DL
ALBUMIN	4.3		3.4-4.8	GM/DL
BILIRUBIN, TOTAL	0.3		0-1.0	MG/DL
PHOSPHATASE, ALK.	68		30-120	UNITS/L
AST (SGOT)	17		0-37	UNITS/L
ALT (SGPT)	14		0-40	UNITS/L
SODIUM	141		135-148	MEQ/L
POTASSIUM	4.0		3.5-5.3	MEQ/L
CARBON DIOXIDE	23		22-30	MEQ/L
CHLORIDE	106		96-110	MEQ/L
GLOMERULAR FILTRATION RATE (CALC)				
GFR, BLACK	111		>60	
GFR, NON-BLACK	92		>60	

*** FINAL REPORT ***

EXCEPT WHERE NOTED: TEST PERFORMED AT DOCTORS LABORATORY, VALDOSTA, GA
DIRECTOR: JACKSON L. GATES, M.D.

DOCTORS LABORATORY INC.
DIRECTOR 2906 JULIA DRIVE, VALDOSTA GEORGIA 31604
JACKSON L. GATES, M.D. PHONE (229)244-4468

REPRINT

PATIENT: LEWIS, MAEBELL SEX, SP: F
PT PHONE: FASTING: COLLECTED: 06/09/2008-3:15 PM
ACCESSION: K6497269 AGE, DOB: 45, 09/05/1962 RECEIVED: 06/09/2008-5:49 PM
PT ID#: REQ#: REPORTED: 06/10/2008-6:00 AM
MED REC#: RM#: ROUTE/STOP: 9501 PAGE 1
PHYSICIAN: FUENTES
CLIENT: AUM NURSING CARE CENTER ACCOUNT NO. 436099
7461 EAST DRIVE
MONTGOMERY, AL 36117

TEST NAME	WITHIN RANGE	OUTSIDE RANGE	NORMAL RANGE	UNITS
CBC				
WBC	10.40		4.0-11.7	THOU/CUMM
RBC	4.55		4.2-5.4	MILL/CUMM
HEMOGLOBIN		7.6 (L)	12.5-16.0	GMS
HGB CHECKED				
HEMATOCRIT		25.7 (L)	37.0-47.0	%
MCV		56.4 (L)	78-99	FL
1+ MICROCYTOSIS				
1+ MACROCYTOSIS				
MCH		16.8 (L)	27-31	PG
MCHC		29.7 (L)	32.0-36.0	G/DL
RDW		20.7 (H)	11.5-14.0	%
PLATELET COUNT		556 (H)	140-440	THOU/CUMM
NEUTROPHILS	70.0		40-75	%
LYMPHOCYTES	24.0		15-45	%
MONOCYTES	6.0		4.0-12.0	%
EOSINOPHILS	0.0		0-6	%
BASOPHILS	0.0		0-2	%
COMPREHENSIVE METABOLIC PANEL				
CALCIUM	9.5		8.5-10.8	MG/DL
GLUCOSE	103		70-110	MG/DL
BUN		5 (L)	6-24	MG/DL
CREATININE	0.69		0.6-1.20	MG/DL
PROTEIN, TOTAL	7.5		6.4-8.3	GM/DL
ALBUMIN	4.3		3.4-4.8	GM/DL
BILIRUBIN, TOTAL	0.3		0-1.0	MG/DL
PHOSPHATASE, ALK.	68		30-120	UNITS/L
AST (SGOT)	17		0-37	UNITS/L
ALT (SGPT)	14		0-40	UNITS/L
SODIUM	141		135-148	MEQ/L
POTASSIUM	4.0		3.5-5.3	MEQ/L

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DOCTORS LABORATORY INC.
DIRECTOR 2906 JULIA DRIVE, VALDOSTA GEORGIA 31604 CONTINUED REPORT
JACKSON L. GATES, M.D. PHONE (229)244-4468 **REPRINT**

PATIENT: LEWIS, MAEBELL SEX, SP: F
PT PHONE: FASTING: COLLECTED: 06/09/2008-3:15 PM
ACCESSION: K6497269 AGE, DOB: 45, 09/05/1962 RECEIVED: 06/09/2008-5:49 PM
PT ID#: REQ#: REPORTED: 06/10/2008-6:00 AM
MED REC#: RM#: ROUTE/STOP: 9501 PAGE 2
PHYSICIAN: FUENTES
CLIENT: AUM NURSING CARE CENTER ACCOUNT NO. 436099
7461 EAST DRIVE
MONTGOMERY, AL 36117

TEST NAME	WITHIN RANGE	OUTSIDE RANGE	NORMAL RANGE	UNITS
CARBON DIOXIDE	23		22-30	MEQ/L
CHLORIDE	106		96-110	MEQ/L
GLOMERULAR FILTRATION RATE (CALC)				
GFR, BLACK	111		>60	
GFR, NON-BLACK	92		>60	

*** FINAL REPORT ***