

Auburn Montgomery Student Health Services

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

Laboratory Results

Patient Name: CYNTHIA BAKER

Order Date: 01/20/2023

MRN: 5272

DOB: 01/04/1965

Phone: (256) 880-2537

Gender: FEMALE

Placer Order ID: 00859597

Physician: BARTON

Filler Order ID: AL109024A

Physician ID: 1215285879

Specimen Date: 01/20/2023 4:41 PM

Fasting:

Result Date: 01/21/2023 8:08 AM

Disposition:

Specimen Source: SOURCE, UNSPECIFIED

LIPID PANEL				7600	STATUS: FINAL	
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<u>Test Name</u>	<u>Abnormal</u>	<u>Result Value</u>	<u>Unit of Measure</u>	<u>Ref Range</u>	<u>Status</u>	<u>Producer ID</u>
CHOLESTEROL, TOTAL	H	216	mg/dL	<200	F	AT
HDL CHOLESTEROL		61	mg/dL	> OR = 50	F	AT
TRIGLYCERIDES	H	228	mg/dL	<150	F	AT

If a non-fasting specimen was collected, consider repeat triglyceride testing on a fasting specimen if clinically indicated.
Jacobson et al. J. of Clin. Lipidol. 2015;9:129-169.

LDL-CHOLESTEROL	H	120	mg/dL (calc)		F	AT
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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		3.5	(calc)	<5.0	F	AT
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NON HDL CHOLESTEROL	H	155	mg/dL (calc)	<130	F	AT
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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 option.

Lab

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

YOUNG ANDREW

Comments:

Confidential