

Patient: **WIEGERT, CHRISTOPHER D**

Lab No: **2022-906180131**



Age: 39 years Gender: M

Reference #:

Date of Birth: Apr 28 1982

Patient ID: 2022906180131

HC #: **6525992530**

Referring Site ID:

Patient's Phone: (905) 933-9526

Date of Service: Jan 18 2022 08:19

Ordered by: DOST DR. OMER

Reported on: Jan 18 2022 16:54

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Test	Flag	Result	Reference Range - Units	Lab Lic. #
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**Hematology**

#5407

WBC		6.2	4.0 - 11.0	x E9/L
RBC		5.58	4.50 - 6.00	x E12/L
Hemoglobin		152	135 - 175	g/L
Hematocrit		0.471	0.400 - 0.500	L/L
MCV		84	80 - 100	fL
MCH	<b>LO</b>	<b>27.2</b>	27.5 - 33.0	pg
MCHC		323	305 - 360	g/L
RDW		12.1	11.5 - 14.5	%
Platelet Count		204	150 - 400	x E9/L

**Differential**

Neutrophils		3.2	2.0 - 7.5	x E9/L
Lymphocytes		2.3	1.0 - 3.5	x E9/L
Monocytes		0.4	0.2 - 1.0	x E9/L
Eosinophils		0.2	0.0 - 0.5	x E9/L
Basophils		0.0	0.0 - 0.2	x E9/L
Immature Granulocytes		0.0	0.0 - 0.1	x E9/L
Nucleated RBC		0		/100 WBC

**General Chemistry**

Hemoglobin A1C/Total Hemoglobin 5.3 <6.0 %

Diabetes Canada 2018 Guidelines:

-----  
 Screening and Diagnosis: < 5.5 % Normal  
 5.5% - 5.9 % At risk  
 6.0% - 6.4 % Prediabetes  
 >OR= 6.5 % Diabetes Mellitus  
 If HbA1c >OR= 6.5 % and asymptomatic, confirm  
 using Fasting Glucose, HbA1c or 75g OGTT.  
 -----

Monitoring: <OR= 7.0 %  
 Target in adults without comorbidities. Other  
 targets may be more appropriate in children,  
 elderly and patients with comorbidities.  
 -----

Results may not accurately reflect mean blood  
 glucose in patients with hemoglobin variants,  
 disorders associated with abnormal erythrocyte  
 turnover, severe renal and liver disorders.

Sodium		139	135-145	mmol/L
Potassium		4.2	3.5-5.2	mmol/L
Creatinine		93	67-117	umol/L
Glomerular Filtration Rate (eGFR)		89		

An eGFR from 60-89 ml/min/1.73 m2 is consistent

**FINAL RESULTS**

**IMPORTANT:**

This report contains confidential information intended for view by authorized person(s) only and should be disposed of securely (e.g. shredding) before discarding.

**Note to Health Care Providers:** This report has been printed by the patient.

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**General Chemistry**

with mildly decreased kidney function. However, in the absence of other evidence of kidney disease, eGFR values in this range do not fulfill the KDIGO criteria for chronic kidney disease. Interpret results in concert with ACR measurement.

For patients of African descent, the reported eGFR must be multiplied by 1.15.

Effective May 4 2015, eGFR is calculated using the CKD-EPI 2009 equation.

KDIGO 2012 guidelines highlight the importance of eGFR and urine albumin creatinine ratio (ACR) in screening, diagnosis and management of CKD. Results for eGFR should be interpreted in concert with ACR.

**Lipids**

Hours After Meal	15	Hours
Triglyceride	2.47	mmol/L
Cholesterol	5.75	mmol/L
HDL Cholesterol	1.16	mmol/L

New formulation (24/Sep/2018): In some patients with abnormal liver function, the HDL-c result may be different due to the presence of lipoproteins with abnormal lipid distribution.

Non HDL Cholesterol	4.59	mmol/L
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Non HDL-Cholesterol is not affected by the fasting status of the patient.

LDL Cholesterol	3.47	mmol/L
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Consider the non HDL-C value as an alternate lipid target if monitoring treatment in intermediate or high risk patients.

Cholesterol/HDL Cholesterol	5.0
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Lipid Target Values	Lipid Target Values should be based on patient 10 year CVD risk assessment.
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! High or Intermediate CVD risk

-----!-----  
Primary ! LDL-C < or = 2.0 mmol/L OR  
Tx target ! > or = 50% decrease in LDL-C  
!

Alternate ! Non HDL-C < or = 2.6 mmol/L OR  
Tx target ! ApoB < or = 0.8 g/L

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**Lipids**

-----!-----  
! Low CVD risk  
-----!-----  
Primary !> or = 50% decrease in LDL-C  
Tx target !  
-----

**Thyroid Function**

Thyroid Stimulating Hormone [TSH]		3.1	0.32-4.00	mIU/L
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