

Patient: SINGH, RITA

Lab No: 2022-GF8490688



Age: 52 years Gender: F

Reference #:

Date of Birth: May 05 1970

Patient ID: 2022GF8490688

HC #: 2841222678

Referring Site ID:

Patient's Phone: (519) 465-1282

Date of Service: Sep 06 2022 09:37

Address: 100 International Blvd.  
Toronto, Ontario  
Canada M9W 6J6

Ordered by: SAMBROOK DR. ROBYN

Reported on: Sep 06 2022 18:31

Telephone: (877) 849-3637  
Toll Free: (877) 849-3637  
Fax: (905) 795-9891

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**Urinalysis**

#5407

**Urinalysis Chemical**

Collection Date		06-SEP-2022		
Collection Time		09:37		
Appearance		CLOUDY	Clear	
Colour		DARK YELLOW	Yellow	
Specific Gravity		1.025		
pH		7.5	5.0 - 8.0	
Protein	HI	0.3	Negative	g/L
Glucose		NEGATIVE	Negative	mmol/L
Ketones		NEGATIVE	Negative	mmol/L
Blood		NEGATIVE	Negative	RBC/uL
Nitrite		NEGATIVE	Negative	
Leukocytes		NEGATIVE	Negative	WBC/uL

Please see <https://tests.lifelabs.com/Urinalysis/URINALYSIS-CHEMICAL.aspx?s=1> for alternative reporting units.

**General Chemistry**

Glucose Fasting	HI	7.1	3.6 - 6.0	mmol/L
		Fasting Glucose greater than or equal to 7.0 mmol/L after an 8 hr fast can be used as a provisional diagnosis of diabetes mellitus. If asymptomatic, a repeat confirmation test using Fasting Glucose, HbA1c, or 75g OGTT must be done.		
Hemoglobin A1C/Total Hemoglobin	HI	7.1	<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		138	135-145	mmol/L
Potassium		3.5	3.5-5.2	mmol/L

Lab - 5407: KENNEDY, 6560 Kennedy Road, Mississauga, Ontario.

**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**

Creatinine		73	50-100	umol/L
Glomerular Filtration Rate (eGFR)		82		

An eGFR from 60-89 ml/min/1.73 m2 is consistent 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		16		Hours
Triglyceride		6.62		mmol/L
		Note: LDL calculation and HDL result may be invalid as triglyceride exceeds 4.52 mmol/L.		
Cholesterol		6.68		mmol/L
HDL Cholesterol		1.01		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		5.67		mmol/L
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Non HDL-Cholesterol is not affected by the fasting status of the patient.

LDL Cholesterol (Calculated)		LDL-Cholesterol calculation is invalid at triglycerides > 4.52 mmol/L.		
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Cholesterol/HDL Cholesterol	<b>HI</b>	<b>6.6</b>		
Lipid Target Values		Cholesterol/HDL-C is an indicator of high CVD risk at Cholesterol/HDL-C ratio >6.0 Lipid Target Values should be based on patient 10 year CVD risk assessment.		

! High or Intermediate CVD risk

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**Lipids**

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

**Random Urine Chemistry**

**Albumin Creatinine Ratio Urine**

Albumin (Urine)		51		mg/L
Creatinine (Urine)	HI	28.1	2.5-20.0	mmol/L
Albumin/Creatinine		1.8	< 2.0	mg/mmol

**Thyroid Function**

Thyroid Stimulating Hormone [TSH]		1.52	0.32-4.00	mIU/L
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