

Patient: **PETERSON, CHRISTINA LESLEY**

Lab No: **2022-206450423**



Age: 43 years Gender: F

Reference #:

Date of Birth: Jul 07 1978

Patient ID: 2022206450423

HC #: **2187797390**

Referring Site ID:

Patient's Phone: (905) 691-5971

Date of Service: Feb 14 2022 08:43

Reported on: Feb 18 2022 14:35

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

Telephone: (877) 849-3637

Toll Free: (877) 849-3637

Fax: (905) 795-9891

Ordered by: SAPIR DR. D.

Copy To: MARTINIUK DR. K.L.C.

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Hematology

#5407

WBC		5.7	4.0 - 11.0	x E9/L
RBC		4.27	4.00 - 5.10	x E12/L
Hemoglobin		132	120 - 160	g/L
Hematocrit		0.380	0.350 - 0.450	L/L
MCV		89	80 - 100	fL
MCH		30.9	27.5 - 33.0	pg
MCHC		347	305 - 360	g/L
RDW		11.9	11.5 - 14.5	%
Platelet Count		251	150 - 400	x E9/L

Differential

Neutrophils		3.1	2.0 - 7.5	x E9/L
Lymphocytes		2.0	1.0 - 3.5	x E9/L
Monocytes		0.4	0.2 - 1.0	x E9/L
Eosinophils		0.1	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

Pathologist Review

Blood film exam not performed. CBC quantitative values do not meet blood film exam criteria and/or lack of CBC instrument flags indicate that blood cell morphology is within normal limits.

Erythrocyte Sedimentation Rate

2 2 - 30 mm/hr

Coagulation Studies

INR		1.0	0.9 - 1.2	
Prothrombin Time				
International Normalized Ratio Therapeutic Range				

Prophylaxis and treatment of				
Thromboembolism 2.0 - 3.0				
Patient with mechanical				
prosthetic heart valve 2.5 - 3.5				

Lab -9941: HAMILTON REFERENCE, 247 Barton St., East, Hamilton, Ontario.

Lab -5687: LifeLabs, 100 International Blvd., Toronto, Ontario.

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

FINAL RESULTS

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Urinalysis

Urinalysis Chemical

Collection Date		14-FEB-2022		
Collection Time		08:43		
Appearance		CLEAR	Clear	
		New method implemented in October 2021. Reporting categories updated, reference intervals remain the same.		
Colour		YELLOW	Yellow	
Specific Gravity		<=1.005		
		Low specific gravity indicates dilute urine. Suggest repeat testing with first morning urine if clinically indicated.		
pH		7.5	5.0 - 8.0	
Protein		NEGATIVE	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 Random	5.2	3.6 - 7.7	mmol/L
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.

Potassium	4.1	3.5-5.2	mmol/L
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Test	Flag	Result	Reference Range - Units	Lab Lic. #
General Chemistry				
Bicarbonate		23	20-30 mmol/L	
Urea		5.6	2.2-7.0 mmol/L	
Creatinine		90	50-100 umol/L	
Glomerular Filtration Rate (eGFR)		68		
<p>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.</p> <p>For patients of African descent, the reported eGFR must be multiplied by 1.15.</p> <p>Effective May 4 2015, eGFR is calculated using the CKD-EPI 2009 equation.</p> <p>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.</p>				
Calcium		2.44	2.15-2.60 mmol/L	
Phosphate	LO	0.76	0.80-1.45 mmol/L	
Urate		165	150-390 umol/L	
<p>Female Reference Intervals (umol/L)</p> <p>>or= 13yrs 150-390</p> <p>Postmenopausal 210-450</p>				
Bilirubin Total		11	<20 umol/L	
Alkaline Phosphatase		78	35-120 U/L	
Alanine Aminotransferase		29	<36 U/L	
Magnesium		0.88	0.70-1.00 mmol/L	

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Lipids

Hours After Meal		4	Hours	
Triglyceride		0.42	mmol/L	
Cholesterol		4.05	mmol/L	
HDL Cholesterol		2.02	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		2.03	mmol/L	
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Non HDL-Cholesterol is not affected by the fasting status of the patient.

LDL Cholesterol (Calculated)		1.84	mmol/L	
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LDL-C calculation is decreased if fasting < or = 10 hours. Consider the Non HDL-C value as an alternate lipid target if monitoring treatment in intermediate or high risk patients.

Cholesterol/HDL Cholesterol Lipid Target Values		2.0		
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Lipid Target Values should be based on patient 10 year CVD risk assessment.

! 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

-----!
! Low CVD risk

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

Random Urine Chemistry

Albumin Creatinine Ratio Urine

Albumin (Urine)		<5	mg/L	
Creatinine (Urine)	LO	1.3	2.5-20.0 mmol/L	
Albumin/Creatinine		Unable to calculate Albumin/Creatinine Ratio as the concentration of the Albumin is less than the lower limit of the analytical range of the method.		

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Random Urine Chemistry

Immunofixation Urine

Protein (Urine)		<0.10	<0.15	g/L
Immunofixation (Urine)		Free Kappa and Free Lambda light chains (Bence-Jones Protein) not detected.		

Thyroid Function

Thyroid Stimulating Hormone [TSH]	HI	4.15	0.32-4.00	mIU/L
Thyroxine Free [Free T4]		12	9-19	pmol/L

Serum Proteins

Total Protein		71	60-80	g/L	#5687
Albumin		46.5	36.0-51.0	g/L	
Alpha 1 Globulin		2.7	2.0-4.0	g/L	
Alpha 2 Globulin		5.9	5.0-9.0	g/L	
Beta 1 Globulin		3.3	3.0-6.0	g/L	
Beta 2 Globulin		2.5	2.0-5.0	g/L	
Gamma Globulin		10.1	6.0-16.0	g/L	
Serum protein electrophoresis does not suggest a monoclonal pattern.					
Immunofixation		No monoclonal band is detected in serum.			

Complement Testing

Complement C3		0.94	0.90-1.80	g/L	#5407
Complement C4		0.17	0.15-0.53	g/L	

Immunology

Nuclear Antibody		NEGATIVE	NEGATIVE		#5687
Negative at 1:80 titre. A negative ANA test rarely needs to be repeated unless there is a strong clinical suspicion of evolving disease or a clinical change suggesting diagnostic review.					
Test performed using indirect immunofluorescence antibody technique.					
Extractable Nuclear Antibody		NEGATIVE	Negative		
The ENA test screens for the presence of antibodies to SS-A, SS-B, RNP, Sm, Scl-70, and Jo-1.					
Tested by a multiplex flow immunoassay (BioPlex)					

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Immunology

#5687

method.
Due to a change in manufacturer raw material, there may be a decrease in Jo-1 positive results. If a negative Jo-1 result does not correlate with clinical picture, please consider following up with ANA testing, if not already ordered.

Neutrophil Cytoplasmic Antibody

Myeloperoxidase Ab

<0.2 <1.0 AI UNITS
Reference Range
=====

Negative <1.0 AI UNITS
Positive =>1.0 AI UNITS

Tested by a multiplex flow immunoassay (BioPlex) method.

Proteinase 3 Ab

<0.2 <1.0 AI UNITS
Reference Range
=====

Negative <1.0 AI UNITS
Positive =>1.0 AI UNITS

Tested by a multiplex flow immunoassay (BioPlex) method.

Rheumatoid Factor

<10 <14 IU/mL

#5407

Bone Markers

1, 25 Dihydroxyvitamin D

#5687

1, 25 Dihydroxyvitamin D

156 60 - 206 pmol/L
Paricalcitol is detected with equal specificity as native 1,25-dihydroxy vitamin D.

Parathyroid Hormone [PTH] Intact

4.1 1.6 - 6.9 pmol/L

25-Hydroxyvitamin D

95.5 75.0 - 250.0 nmol/L

#5407

New method as of 14 February 2022.

Serology Non-Viral

Hepatitis B Immunity

Hepatitis B Surface Ab [HBsAb]

>1000.0 Immune: >9.9 IU/L
A detected result is seen after naturally

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Serology Non-Viral
Hepatitis B Immunity

acquired Hepatitis B infection or after vaccination against Hepatitis B.

Anti-HBs can occasionally be present in the chronic carrier state. In all anti-HBs positive patients in whom natural infection is likely to have occurred, it is advisable to test for the presence of HBsAg at least one time to ensure that they are not chronic carriers.

Titres may decline below arbitrarily determined levels of antibody immunity or even become undetectable, but immunity may persist for life. New reagent formulation as of May 10, 2021 has reduced interference from high doses of biotin.

Hepatitis C

Hepatitis C Ab

NOT DETECTED

Anti-HCV may be detected within 2 to 6 months of viral infection. Acutely infected patients may be negative for Anti-HCV yet still transmit infection.

Referred Tests

**Glomerular Basement Membrane
Antibody**

#9941

Glomerular Basement Membrane Antibody

<0.2 < 1.0 AI

This is a semi-quantitative assay. Test results are not intended to be used for monitoring disease severity, and should be interpreted in conjunction with clinical findings and other laboratory results.

This test was referred to Hamilton Health Sciences Main Lab (Hamilton General)
237 Barton St E, Hamilton ON L8L 2X2

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Referred Tests

Phospholipid Antibody

#5687

Cardiolipin Ab IgG 2 GPL-U/mL

Negative 0 - 19 GPL-U/mL
Positive > 19 GPL-U/mL

Cardiolipin Ab IgM <2 MPL-U/mL

Negative 0 - 19 MPL-U/mL
Positive > 19 MPL-U/mL

Cardiolipin Ab Interpretation

--
Negative Study.

dRVVT Ratio

--
Not performed as dRVVT screen is negative.

RVVT Interpretation

--
Negative Study

LS PTT Interpretation

--
Negative Study

APA Interpretation

--
Antiphospholipid antibody studies are negative. These studies included the Anticardiolipin antibody (ACA) assay and assays for the detection of the Lupus anticoagulant (dRVVT assay, Lupus sensitive PTT assay).
This test was referred to University Health Network, Laboratory Medicine Program (TGH), 200 Elizabeth St. Toronto, ON M5G 2C4

For technical inquiries, healthcare providers may call the testing lab at 416-340-5227.

Urine Eosinophils

Eosinophils-Random Urine

No eosinophils present.

This test was referred to Dynacare, 115 Midair Court, Brampton, ON, L6T 5M3.

For technical inquiries, healthcare providers may call the testing lab at 905-790-3000.

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