MyQuest™

BLACKFORD,MICHAEL B

DOB: 07/16/1964
Sex: M
Phone: (314) 402-7086
Patient ID: E130820300

Age: 62
Fasting: Y

Specimen: ZK674049C
Requisition: 0148040
Lab Reference ID: G762220884BLOOD
Report Status: FINAL / SEE REPORT

Collected: 09/01/2026 09:56
Received: 09/01/2026 09:57
Reported: 09/02/2026 03:07

Client #: 33006785
BUSCH,JULIE
MERCY CLINIC PRIM CRE KIRKWOOD
1001 S KIRKWOOD RD STE 300
KIRKWOOD, MO 63122-7250
Phone: (314) 525-4225
Fax: (314) 525-4229

FASTING:YES

⚠ COMPREHENSIVE METABOLIC PANEL

Analyte	Value	
⚠ GLUCOSE Fasting reference interval For someone without known diabetes, a glucose value between 100 and 125 mg/dL is consistent with prediabetes and should be confirmed with a follow-up test.	102 H	Reference Range: 65-99 mg/dL
UREA NITROGEN (BUN)	17	Reference Range: 7-25 mg/dL
CREATININE	1.20	Reference Range: 0.70-1.35 mg/dL
EGFR	68	Reference Range: > OR = 60 mL/min/1.73m2
BUN/CREATININE RATIO Not Reported: BUN and Creatinine are within reference range.	SEE NOTE:	Reference Range: 6-22 (calc)
SODIUM	138	Reference Range: 135-146 mmol/L
POTASSIUM	4.3	Reference Range: 3.5-5.3 mmol/L
CHLORIDE	102	Reference Range: 98-110 mmol/L
CARBON DIOXIDE	26	Reference Range: 20-32 mmol/L
CALCIUM	9.3	Reference Range: 8.6-10.3 mg/dL
PROTEIN, TOTAL	6.7	Reference Range: 6.1-8.1 g/dL
ALBUMIN	4.6	Reference Range: 3.6-5.1 g/dL
GLOBULIN	2.1	Reference Range: 1.9-3.7 g/dL (calc)
ALBUMIN/GLOBULIN RATIO	2.2	Reference Range: 1.0-2.5 (calc)
BILIRUBIN, TOTAL	0.6	Reference Range: 0.2-1.2 mg/dL
ALKALINE PHOSPHATASE	59	Reference Range: 35-144 U/L
AST	19	Reference Range: 10-35 U/L
ALT	9	Reference Range: 9-46 U/L

⚠ HEPATITIS B SURFACE AB IMMUNITY, QN

Analyte	Value	
⚠ HEPATITIS B SURFACE AB IMMUNITY, QN Patient does not have immunity to hepatitis B virus. For additional information, please refer to http://education.questdiagnostics.com/faq/FAQ105 (This link is being provided for informational/ educational purposes only).	<5 L	Reference Range: > OR = 10 mIU/mL

PSA, TOTAL

Analyte	Value	
PSA, TOTAL	**0.51**	Reference Range: < OR = 4.00 ng/mL

The total PSA value from this assay system is standardized against the WHO standard. The test result will be approximately 20% lower when compared to the equimolar-standardized total PSA (Beckman Coulter). Comparison of serial PSA results should be interpreted with this fact in mind.

This test was performed using the Siemens chemiluminescent method. Values obtained from different assay methods cannot be used interchangeably. PSA levels, regardless of value, should not be interpreted as absolute evidence of the presence or absence of disease.

HEMOGLOBIN A1c WITH eAG

Analyte	Value	
HEMOGLOBIN A1c	**5.5**	Reference Range: <5.7 %

For the purpose of screening for the presence of diabetes:

<5.7%	Consistent with the absence of diabetes
5.7-6.4%	Consistent with increased risk for diabetes (prediabetes)
> or =6.5%	Consistent with diabetes

This assay result is consistent with a decreased risk of diabetes.

Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes in children.

According to American Diabetes Association (ADA) guidelines, hemoglobin A1c <7.0% represents optimal control in non-pregnant diabetic patients. Different metrics may apply to specific patient populations. Standards of Medical Care in Diabetes(ADA).

eAG (mg/dL)	**111**	mg/dL
eAG (mmol/L)	**6.2**	mmol/L

Performing Sites

KS Quest Diagnostics-Lenexa, 10101 Renner Blvd, Lenexa, KS 66219-9752 Laboratory Director: Thuy-Lieu T Vo MD

Key

Priority Out of Range Out of Range

These results have been sent to the person who ordered the tests. Your receipt of these results should not be viewed as medical advice and is not meant to replace discussion with your doctor or other healthcare professional.

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BLACKFORD,MICHAEL B

DOB: 07/16/1964
Sex: M
Phone: (314) 402-7086
Patient ID: E130820300

Age: 62
Fasting: Y

Specimen: ZK674048C
Requisition: 0123891
Lab Reference ID: G172337832BLOOD
Report Status: FINAL

Collected: 09/01/2026 09:56
Received: 09/01/2026 09:57
Reported: 09/03/2026 17:46

Client #: 33006785
BUSCH,JULIE
MERCY CLINIC PRIM CRE KIRKWOOD
1001 S KIRKWOOD RD STE 300
KIRKWOOD, MO 63122-7250
Phone: (314) 525-4225
Fax: (314) 525-4229

FASTING:YES

⚠ LIPID PANEL, STANDARD

Analyte	Value	
⚠ CHOLESTEROL, TOTAL	295 H	Reference Range: <200 mg/dL
HDL CHOLESTEROL	67	Reference Range: > OR = 40 mg/dL
TRIGLYCERIDES	68	Reference Range: <150 mg/dL
⚠ LDL-CHOLESTEROL	211 H	mg/dL (calc)

LDL-C levels > or = 190 mg/dL may indicate familial hypercholesterolemia (FH). Clinical assessment and measurement of blood lipid levels should be considered for all first degree relatives of patients with an FH diagnosis. LDL Cholesterol (LDL-C) levels > or = 300 mg/dL may indicate homozygous familial hypercholesterolemia (HoFH). Untreated, these extremely high LDL-C levels can result in premature CV events and mortality. Patients should be identified early and provided appropriate interventions to reduce the cumulative LDL-C burden from birth.

For questions about testing for familial hypercholesterolemia, please call Quest Genomics Client Services at 1.866.GENE.INFO.

Jacobson T, et al. J National Lipid Association Recommendations for Patient-Centered Management of Dyslipidemia: Part 1 Journal of Clinical Lipidology 2015;9(2), 129-169.
Cuchel, M. et al. (2014). Homozygous familial hypercholesterolaemia: new insights and guidance for clinicians to improve detection and clinical management. European Heart Journal, 35(32), 2146-2157.
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/HDLC RATIO	4.4	Reference Range: <5.0 (calc)
⚠ NON HDL CHOLESTEROL	228 H	Reference Range: <130 mg/dL (calc)

Non-HDL level > or = 220 is very high and may indicate genetic familial hypercholesterolemia (FH). Clinical assessment and measurement of blood lipid levels should be considered for all first-degree relatives of patients with an FH diagnosis.

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.

C-REACTIVE PROTEIN

Analyte	Value	
C-REACTIVE PROTEIN	**<3.0**	Reference Range: <8.0 mg/L

TSH W/REFLEX TO FT4

Analyte	Value	
TSH W/REFLEX TO FT4	**4.11**	Reference Range: 0.40-4.50 mIU/L

MEASLES AB (IGG), IMMUNE STATUS

Analyte	Value	
MEASLES AB (IGG), IMMUNE STATUS	**48.10**	AU/mL

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AU/mL            Interpretation
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<13.50           Not consistent with immunity
13.50-16.49      Equivocal
>16.49           Consistent with immunity

The presence of measles IgG suggests immunization or
past or current infection with measles virus.

For additional information, please refer to
http://education.QuestDiagnostics.com/faq/FAQ162
(This link is being provided for informational/
educational purposes only.)
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