

Patient: Elaine [REDACTED]
Patient #: 27670
Patient DOB: 7/31/1951 (Female)

Ordered: 12/15/2014 4:31 PM by Adria L Edenfield, PA-C
Collected: 6/18/2015 7:46 AM
Reported: 6/19/2015 2:00 AM
Reviewed:

Diagnosis: UNSPECIFIED ACQUIRED HYPOTHYROIDISM (244.9)
Order Name: TSH W/REFLEX TO FT4
Status: Final

Site: QUEST
Requisition: 134296
Accession: TM242176L

Test Name	Result	Units	Normal Range	Status
TSH W/REFLEX TO FT4	3.00	mIU/L	0.40-4.50	Final

Test Performed at:
QUEST DIAGNOSTICS-TAMPA
4225 E. FOWLER AVE
TAMPA, FL 33617-2026

GLEN L HORTIN, MD, PHD

Patient: Elaine [REDACTED]
Patient #: 27670
Patient DOB: 7/31/1951 (Female)

Ordered: 12/15/2014 4:22 PM by Adria L Edenfield, PA-C
Collected: 6/18/2015 7:46 AM
Reported: 6/19/2015 2:00 AM
Reviewed:

Diagnosis: ABNORMAL GLUCOSE NEC (790.29)
Order Name: HEMOGLOBIN GLYCLATED (HGB A1C) (83036)
Status: Final

Site: QUEST
Requisition: 134296
Accession: TM242176L

Test Name	Result	Units	Normal Range	Status
HEMOGLOBIN A1c	6.7 (Abn: H)		<5.7	Final

UNITS: % of total Hgb
According to 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-2013. Diabetes Care. 2013;36:s11-s66

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 diabetes mellitus.

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

REPORT COMMENT:
FASTING
FASTING: YES

Test Performed at:
Monday, June 22, 2015

GLOBULIN	2.4		1.9-3.7	Reviewed
UNITS: g/dL (calc)				
ALBUMIN/GLOBULIN RATIO	2.0	(calc)	1.0-2.5	Reviewed
BILIRUBIN, TOTAL	0.5	mg/dL	0.2-1.2	Reviewed
ALKALINE PHOSPHATASE	98	U/L	33-130	Reviewed
AST	18	U/L	10-35	Reviewed
ALT	20	U/L	6-29	Reviewed

Test Performed at:
 QUEST DIAGNOSTICS-TAMPA
 4225 E. FOWLER AVE
 TAMPA, FL 33617-2026 GLEN L HORTIN, MD, PHD

Patient: Elaine [REDACTED] **Ordered:** 2/24/2016 8:25 AM by Etleva Nasi, MD
Patient #: 27670 **Collected:** 2/24/2016 8:25 AM
Patient DOB: 7/31/1951 (Female) **Reported:** 2/25/2016 1:00 AM
Reviewed: 2/28/2016 8:23 PM by Etleva Nasi, MD

Diagnosis: **Site:** QUEST
Order Name: HEMOGLOBIN A1c **Requisition:**
Status: Reviewed **Accession:** TM322928W

Test Name	Result	Units	Normal Range	Status
HEMOGLOBIN A1c	5.8 (Abn: H)		<5.7	Reviewed

UNITS: % of total Hgb
 According to 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-2013. Diabetes Care. 2013;36:s11-s66

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 an increased risk of diabetes.

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

REPORT COMMENT:
 FASTING:YBS

Test Performed at:
 QUEST DIAGNOSTICS-TAMPA
 4225 E. FOWLER AVE
 TAMPA, FL 33617-2026 GLEN L HORTIN, MD, PHD

*Current Meds:
 Metformin - OFF
 (formerly 500mg/day)*