

Patient: F ██████████, JAMES ██████████

Age: 60 years Sex: M
Date of Birth: Aug 22 1953
PHN: 9139050164 BC
Patient's Phone: ██████████

Ordered by: VILONEL Dr. ETIENNE
Reported to: VILONEL Dr. ETIENNE, WATANABE Dr. HIROKO
Test Flag Result

Lab No: 14-139169061
Patient ID:
Referring Site ID: 135025

Collected on: Jun 18 2014 09:39

Reported on: Jun 20 2014 10:20



Reported by: LifeLabs



Telephone: 604-431-7206
Toll Free: 1-800-431-7206
Fax: 604-412-4445

Printed on: 2014-08-06 11:48
Page 1 of 2

Reference Range - Units

General Comments

General Information

This Standing Order will expire on 07-AUG-2015. If this Standing Order is still required, please provide your patient with a new laboratory requisition prior to this date.

Hematology

WBC	4.4	4.0-10.0	giga/L
RBC	4.51	4.20-5.40	tera/L
Hemoglobin	153	133-165	g/L
Hematocrit	0.44	0.38-0.50	
MCV	98	82-98	fl
MCH	A 33.9	27.5-33.5	pg
MCHC	348	305-365	g/L
RDW	14.2	11.5-14.5	%
Platelet Count	150	150-400	giga/L

Differential

Neutrophils	2.2	2.0-7.5	giga/L
Lymphocytes	1.2	1.0-4.0	giga/L
Monocytes	0.7	0.1-0.8	giga/L
Eosinophils	0.3	0.0-0.7	giga/L
Basophils	0.0	0.0-0.2	giga/L
Granulocytes Immature	0.0	<0.2	giga/L

General Chemistry

Glucose Fasting	5.0	3.3-5.5	mmol/L
-----------------	-----	---------	--------

Hemoglobin A1C

Hemoglobin A1C	5.8	4.5-6.0	%
----------------	------------	---------	---

The CDA recommends measuring Hemoglobin A1C every three months in all diabetics.

Age	Target
Adults >18 years	<7 %
< 6 years	<8.5 %
6 - 12 years	<8 %
13 - 18 years	<= 7 %

Urea	6.8	2.5-9.0	mmol/L
Creatinine	72	70-120	umol/L
Estimated GFR	97	>=60	mL/min

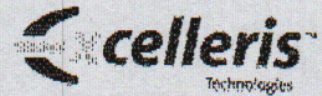
For further information see <http://www.bcguidelines.ca/gpac/pdf/ckd.pdf>

FINAL RESULTS

This report contains confidential information intended for view by authorized person(s) only, and should be shredded before discarding.
Note to physicians: This report has been printed by the patient - the contents should be confirmed by accessing Excelleris or source laboratory reports.
Note to patients: Please contact your physician if you have any questions regarding the results on this report.

Patient: F ██████████, JAMES ██████████

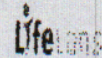
Lab No: 14-139078027
 Patient ID:
 Referring Site ID: 135025



Age: 60 years Sex: M
 Date of Birth: Aug 22, 1953
 PHN: 9139050164 BC
 Patient's Phone: ██████████

Collected on: Mar 19 2014 08:14

Reported by: LifeLabs



Telephone: 604-431-7208
 Toll Free: 1-800-431-7206
 Fax: 604-412-4445

Ordered by: VILONEL Dr. ETINNE
 Copy To: WATANABE Dr. HIROKO
 Test

Reported on: Mar 19 2014 13:50

Printed on: 2014-03-22 11:59
 Page 2 of 3

Reference Range - Units

General Chemistry

Hemoglobin A1C

Hemoglobin A1C

Flag Result

5.6 4.5-6.0 %

The CDA recommends measuring Hemoglobin A1C every three months in all diabetics.

Age Target
 Adults >18 years <7 %
 < 6 years <8.5 %
 6 - 12 years <8 %
 13 - 18 years <= 7 %

Urea 7.3 2.5-9.0 mmol/L
 Creatinine 74 70-120 umol/L
 Estimated GFR 94 >=60 mL/min

For further information see
<http://www.bcguidelines.ca/gpac/pdf/ckd.pdf>

Calcium 2.35 2.10-2.55 mmol/L
 ALT 35 <60 U/L
 AST A 43 <35 U/L

Current Meds:
 Metformin - OFF
 (was 500 mg/day)
 Victoza - OFF
 (was 2 units/day)

Lipids

Cholesterol 4.06 2.00-5.19 mmol/L
 Fasting?: YES

LDL Cholesterol 1.85 1.50-3.39 mmol/L
 The LDL-C target for moderate and high risk individuals is less than 2.0 mmol/L or a reduction of 50% or more. For low risk individuals, the LDL-C target is a reduction of 50% or more. See Can. J. Cardiol. 2009 25(10):567-569.

HDL Cholesterol 1.76 >0.90 mmol/L
 Chol/HDL (Risk Ratio) 2.31 <4.9
 Triglycerides 0.99 0.45-2.29 mmol/L

Random Urine Chemistry

Urine Creatinine

Urine Creatinine 14.2 mmol/L

Urine (Micro)albumin

ACR (Microalbumin/Creatinine Ratio) A 4.6 <2.0 mg/mmol
 Microalbuminuria: Equivocal: 2.0-20.0 mg/mmol
 Abnormal: >20.0 mg/mmol

Thyroid Function

TSH 1.4 0.27-4.2 mU/L

FINAL RESULTS

This report contains confidential information intended for view by authorized person(s) only, and should be shredded before discarding.

Note to physicians: This report has been printed by the patient - the contents should be confirmed by accessing Excelleris or source laboratory reports.

Note to patients: Please contact your physician if you have any questions regarding the results on this report.