

PATIENT INFORMATION:

Graham Scanlon

Phone (H): (833) 753-1851

DOB: 05/22/1999

Gender: Male Age: 25

Patient ID: 36531480

STATUS: Final

Source: Quest
 Time Reported: 11/25/2024 11:57 PM UTC
 Received: 11/26/2024 12:03 AM UTC
 Accession Number: IZ810715B
 Lab Ref #: 796437

ORDERING PHYSICIAN:

**Joshua A Emdur,
D.O.**

600 Congress Avenue
 Floor 14
 Austin, TX, 78701

Test	In Range	Out Of Range	Reference Range	Lab
GGT Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
GGT	11		3-70 U/L	KS
METHYLMALONIC ACID Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
METHYLMALONIC ACID	89		55-335 nmol/L	AMD

Serum methylmalonic acid (MMA) levels are used to diagnose and monitor several rare inborn errors of metabolism, including methylmalonic aciduria. The enzymatic conversion of MMA to succinic acid requires vitamin B12 (adenosyl-cobalamin) as a cofactor. Serum MMA levels are also used for assessing functional vitamin B12 deficiency. Vitamin B12 is essential for fetal neurodevelopment, particularly early in pregnancy. Undiagnosed maternal vitamin B12 deficiency may be associated with adverse fetal/neonatal outcomes, such as neural tube defects and intrauterine growth restriction.

Quest Diagnostics utilized Multi-Modal Decomposition (MMD) analysis to establish first and second trimester-specific MMA reference intervals in pregnancy, as given below:

MMA, First trimester (<13 wks gestation): 58-167 nmol/L
 MMA, Second trimester (13-23 wks gestation): 63-241 nmol/L

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

LEPTIN Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
LEPTIN	1.0		ng/mL	EZ

Reference Ranges for Leptin:

Adult Lean Subjects (18-71 years) with BMI range of 18-25:

Males: 0.3-13.4 ng/mL
 Females: 4.7-23.7 ng/mL

Adult Subjects (19-60 years) with BMI range



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Test	In Range	Out Of Range	Reference Range	Lab
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of 25-30:

Males: 1.8-19.9 ng/mL
 Females: 8.0-38.9 ng/mL

Pediatric Reference Ranges for Leptin:

5-9.9 years: 0.6-16.8 ng/mL
 10-13.9 years: 1.4-16.5 ng/mL
 14-17.9 years: 0.6-24.9 ng/mL

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ANA SCREEN, IFA, W/REFL TITER AND PATTERN Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

ANA SCREEN, IFA	NEGATIVE	NEGATIVE	KS
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ANA IFA is a first line screen for detecting the presence of up to approximately 150 autoantibodies in various autoimmune diseases. A negative ANA IFA result suggests an ANA-associated autoimmune disease is not present at this time, but is not definitive. If there is high clinical suspicion for Sjogren's syndrome, testing for anti-SS-A/Ro antibody should be considered. Anti-Jo-1 antibody should be considered for clinically suspected inflammatory myopathies.

AC-0: Negative

International Consensus on ANA Patterns
 (<https://doi.org/10.1515/ccim-2018-0052>)

For additional information, please refer to
<http://education.QuestDiagnostics.com/faq/FAQ177>
 (This link is being provided for informational/educational purposes only.)

RHEUMATOID FACTOR Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

RHEUMATOID FACTOR	<10	<14 IU/mL	KS
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THYROID PEROXIDASE AND THYROGLOBULIN ANTIBODIES Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

THYROGLOBULIN ANTIBODIES	174 H	< or = 1 IU/mL	CB
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Test	In Range	Out Of Range	Reference Range	Lab
THYROID PEROXIDASE ANTIBODIES	7		<9 IU/mL	CB

HOMOCYSTEINE Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

HOMOCYSTEINE	13.1 H	<11.4 umol/L	KS
Homocysteine is increased by functional deficiency of folate or vitamin B12. Testing for methylmalonic acid differentiates between these deficiencies. Other causes of increased homocysteine include renal failure, folate antagonists such as methotrexate and phenytoin, and exposure to nitrous oxide. Selhub J, et al., Ann Intern Med. 1999;131(5):331-9.			

DHEA SULFATE Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

DHEA SULFATE	210	74-617 mcg/dL	KS
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FSH Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

FSH	6.5	1.4-12.8 mIU/mL	KS
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LH Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

LH	6.8	1.5-9.3 mIU/mL	KS
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PROLACTIN Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

PROLACTIN	5.5	2.0-18.0 ng/mL	KS
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ESTRADIOL Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

ESTRADIOL	26	< OR = 39 pg/mL	KS
Reference range established on post-pubertal patient population. No pre-pubertal reference range established using this assay. For any patients for whom low Estradiol levels are anticipated (e.g. males, pre-pubertal children and hypogonadal/post-menopausal females), the Quest Diagnostics Nichols Institute Estradiol, Ultrasensitive, LC/MS/MS assay is recommended (order code 30289).			

Please note: patients being treated with the drug fulvestrant (Faslodex(R)) have demonstrated significant interference in immunoassay methods for estradiol measurement. The cross reactivity could lead to falsely elevated estradiol test results leading to an inappropriate clinical assessment of estrogen status. Quest Diagnostics order code 30289-Estradiol, Ultrasensitive LC/MS/MS demonstrates negligible cross reactivity with fulvestrant.

SEX HORMONE BINDING GLOBULIN Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

SEX HORMONE BINDING	56 H	10-50 nmol/L	KS
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Test	In Range	Out Of Range	Reference Range	Lab
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GLOBULIN

PSA (FREE AND TOTAL) Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

PSA, TOTAL	0.5	< OR = 4.0 ng/mL	CB
PSA, FREE	0.2	ng/mL	CB
PSA, % FREE	40	>25 % (calc)	CB

PSA(ng/mL)	Free PSA(%)	Estimated(x) Probability of Cancer(as%)
0-2.5	(*)	Approx. 1
2.6-4.0(1)	0-27(2)	24(3)
4.1-10(4)	0-10	56
	11-15	28
	16-20	20
	21-25	16
	>or =26	8
>10(+)	N/A	>50

References:(1)Catalona et al.:Urology 60: 469-474 (2002)
 (2)Catalona et al.:J.Urol 168: 922-925 (2002)
 Free PSA(%) Sensitivity(%) Specificity(%)
 < or = 25 85 19
 < or = 30 93 9
 (3)Catalona et al.:JAMA 277: 1452-1455 (1997)
 (4)Catalona et al.:JAMA 279: 1542-1547 (1998)

(x)These estimates vary with age, ethnicity, family history and DRE results.
 (*)The diagnostic usefulness of % Free PSA has not been established in patients with total PSA below 2.6 ng/mL
 (+)In men with PSA above 10 ng/mL, prostate cancer risk is determined by total PSA alone.

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

PSA was performed using the Beckman Coulter Immunoassay 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.



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Test	In Range	Out Of Range	Reference Range	Lab
AMYLASE Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
AMYLASE	35		21-101 U/L	KS
LIPASE Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
LIPASE	32		7-60 U/L	KS
ZINC Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
ZINC	75		60-130 mcg/dL	CB

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

LEAD (VENOUS) Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
LEAD (VENOUS)	<1.0		<3.5 mcg/dL	CB
See Note 1				

Note 1

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

TESTOSTERONE, FREE (DIALYSIS) AND TOTAL,MS Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC				
TESTOSTERONE, TOTAL, MS	812		250-1100 ng/dL	Z3E

For additional information, please refer to <https://education.questdiagnostics.com/faq/FAQ165>
 (This link is being provided for informational/educational purposes only.)
 (Note)

This test was developed and its analytical performance characteristics have been determined by medfusion. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

TESTOSTERONE, FREE (Note)	82.9		35.0-155.0 pg/mL	Z3E
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This test was developed and its analytical performance



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 Austin, TX, 78701

Test	In Range	Out Of Range	Reference Range	Lab
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characteristics have been determined by medfusion. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

MDF
 med fusion
 2501 South State Highway 121, Suite 1100
 Lewisville TX 75067
 972-966-7300
 Ithiel James L. Frame, MD, PhD

Enhanced PDF Report IZ810715B-1 Collected: 11/18/2024 03:14 PM UTC Received: 11/18/2024 03:18 PM UTC

Enhanced PDF Report IZ810715B-1 **Enhanced PDF Report IZ810715B-1.pdf [See Appendix 1 for details]**

KS	Quest Diagnostics-Lenexa. 10101 Renner Blvd, Lenexa, KS 66219-9752	Dir: Thuy-Lieu T Vo MD
AMD	Quest Diagnostics/Nichols Chantilly-Chantilly VA. 14225 Newbrook Dr, Chantilly, VA 20151-2228	Dir: Patrick W Mason M.D.,PhD
EZ	Quest Diagnostics/Nichols SJC-San Juan Capistrano,. 33608 Ortega Hwy, San Juan Capistrano, CA 92675-2042	Dir: Irina Maramica MD,PhD,MBA
CB	Quest Diagnostics-Wood Dale. 1355 Mittel Blvd, Wood Dale, IL 60191-1024	Dir: Anthony V Thomas
Z3E	MedFusion-MedFusion. 2501 South State Highway 121, Suite 1100, Lewisville, TX 75067-8188	Dir: Ithiel James L Frame MD,PhD

Range Flags Legend: H - Above high normal;



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Report Status: Final
SCANLON, GRAHAM

Patient Information	Specimen Information	Client Information
SCANLON, GRAHAM DOB: 05/22/1999 AGE: 25 Gender: M Phone: 833.753.1851 Patient ID: 36531480 Health ID: 8573035735562064	Specimen: IZ810715B Requisition: 0030633 Lab Ref #: 796437 Collected: 11/18/2024 / 09:14 CST Received: 11/19/2024 / 00:31 CST Reported: 11/25/2024 / 17:57 CST	Client #: 73917267 MAIL992 EMDUR, JOSHUA FUNCTION HEALTH INC 600 CONGRESS AVE FL 14 AUSTIN, TX 78701-3263

Test Name	In Range	Out Of Range	Reference Range	Lab
HOMOCYSTEINE		13.1 H	<11.4 umol/L	KS
Homocysteine is increased by functional deficiency of folate or vitamin B12. Testing for methylmalonic acid differentiates between these deficiencies. Other causes of increased homocysteine include renal failure, folate antagonists such as methotrexate and phenytoin, and exposure to nitrous oxide. Selhub J, et al., Ann Intern Med. 1999;131(5):331-9.				
GGT	11		3-70 U/L	KS
AMYLASE	35		21-101 U/L	KS
LIPASE	32		7-60 U/L	KS
THYROID PEROXIDASE AND THYROGLOBULIN ANTIBODIES				
THYROGLOBULIN ANTIBODIES		174 H	< or = 1 IU/mL	CB
THYROID PEROXIDASE ANTIBODIES	7		<9 IU/mL	CB
METHYLMALONIC ACID	89		55-335 nmol/L	AMD

Serum methylmalonic acid (MMA) levels are used to diagnose and monitor several rare inborn errors of metabolism, including methylmalonic aciduria. The enzymatic conversion of MMA to succinic acid requires vitamin B12 (adenosyl-cobalamin) as a cofactor. Serum MMA levels are also used for assessing functional vitamin B12 deficiency. Vitamin B12 is essential for fetal neurodevelopment, particularly early in pregnancy. Undiagnosed maternal vitamin B12 deficiency may be associated with adverse fetal/neonatal outcomes, such as neural tube defects and intrauterine growth restriction.

Quest Diagnostics utilized Multi-Modal Decomposition (MMD) analysis to establish first and second trimester-specific MMA reference intervals in pregnancy, as given below:

MMA, First trimester (<13 wks gestation): 58-167 nmol/L
 MMA, Second trimester (13-23 wks gestation): 63-241 nmol/L

This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.

LEPTIN	1.0	ng/mL	EZ
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Reference Ranges for Leptin:

Adult Lean Subjects (18-71 years) with BMI range of 18-25:

Males: 0.3-13.4 ng/mL
 Females: 4.7-23.7 ng/mL



Report Status: Final
SCANLON, GRAHAM

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SCANLON, GRAHAM DOB: 05/22/1999 AGE: 25 Gender: M Patient ID: 36531480 Health ID: 8573035735562064	Specimen: IZ810715B Collected: 11/18/2024 / 09:14 CST Received: 11/19/2024 / 00:31 CST Reported: 11/25/2024 / 17:57 CST	Client #: 73917267 EMDUR, JOSHUA

Test Name	In Range	Out Of Range	Reference Range	Lab
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Adult Subjects (19-60 years) with BMI range of 25-30:

Males: 1.8-19.9 ng/mL
Females: 8.0-38.9 ng/mL

Pediatric Reference Ranges for Leptin:

5-9.9 years: 0.6-16.8 ng/mL
10-13.9 years: 1.4-16.5 ng/mL
14-17.9 years: 0.6-24.9 ng/mL

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RHEUMATOID FACTOR	<10	<14 IU/mL	KS
DHEA SULFATE	210	74-617 mcg/dL	KS
FSH	6.5	1.4-12.8 mIU/mL	KS
LH	6.8	1.5-9.3 mIU/mL	KS
PROLACTIN	5.5	2.0-18.0 ng/mL	KS
ESTRADIOL	26	< OR = 39 pg/mL	KS

Reference range established on post-pubertal patient population. No pre-pubertal reference range established using this assay. For any patients for whom low Estradiol levels are anticipated (e.g. males, pre-pubertal children and hypogonadal/post-menopausal females), the Quest Diagnostics Nichols Institute Estradiol, Ultrasensitive, LCMSMS assay is recommended (order code 30289).

Please note: patients being treated with the drug fulvestrant (Faslodex(R)) have demonstrated significant interference in immunoassay methods for estradiol measurement. The cross reactivity could lead to falsely elevated estradiol test results leading to an inappropriate clinical assessment of estrogen status. Quest Diagnostics order code 30289-Estradiol, Ultrasensitive LC/MS/MS demonstrates negligible cross reactivity with fulvestrant.

SEX HORMONE BINDING GLOBULIN	56 H	10-50 nmol/L	KS
PSA (FREE AND TOTAL)			CB
PSA, TOTAL	0.5	< OR = 4.0 ng/mL	
PSA, FREE	0.2	ng/mL	
PSA, % FREE	40	>25 % (calc)	

PSA(ng/mL)	Free PSA(%)	Estimated(x) Probability of Cancer(as%)
0-2.5	(*)	Approx. 1
2.6-4.0(1)	0-27(2)	24(3)
4.1-10(4)	0-10	56
	11-15	28
	16-20	20



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SCANLON, GRAHAM

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Test Name	In Range	Out Of Range	Reference Range	Lab
	21-25	16		
	>or =26	8		
>10(+)	N/A	>50		

References: (1)Catalona et al.:Urology 60: 469-474 (2002)
(2)Catalona et al.:J.Urol 168: 922-925 (2002)
Free PSA(%) Sensitivity(%) Specificity(%)
< or = 25 85 19
< or = 30 93 9
(3)Catalona et al.:JAMA 277: 1452-1455 (1997)
(4)Catalona et al.:JAMA 279: 1542-1547 (1998)

- (x)These estimates vary with age, ethnicity, family history and DRE results.
(*)The diagnostic usefulness of % Free PSA has not been established in patients with total PSA below 2.6 ng/mL
(+)In men with PSA above 10 ng/mL, prostate cancer risk is determined by total PSA alone.

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

PSA was performed using the Beckman Coulter Immunoassay 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.

LEAD (VENOUS)	<1.0	<3.5 mcg/dL	CB
See Endnote 1			

ZINC	75	60-130 mcg/dL	CB
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TESTOSTERONE, FREE (DIALYSIS) AND TOTAL, MS			Z3E
TESTOSTERONE, TOTAL, MS	812	250-1100 ng/dL	

For additional information, please refer to
<https://education.questdiagnostics.com/faq/FAQ165>
(This link is being provided for informational/educational purposes only.)
(Note)

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TESTOSTERONE, FREE (Note) This test was developed and its analytical performance characteristics have been determined by medfusion. It has not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes.	82.9	35.0-155.0 pg/mL
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med fusion
2501 South State Highway 121,Suite 1100
Lewisville TX 75067
972-966-7300
Ithiel James L. Frame, MD, PhD

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SCANLON, GRAHAM DOB: 05/22/1999 AGE: 25 Gender: M Patient ID: 36531480 Health ID: 8573035735562064	Specimen: IZ810715B Collected: 11/18/2024 / 09:14 CST Received: 11/19/2024 / 00:31 CST Reported: 11/25/2024 / 17:57 CST	Client #: 73917267 EMDUR, JOSHUA

Immunology

Test Name	Result	Reference Range	Lab
ANA SCREEN, IFA, W/REFL TITER AND PATTERN			KS
ANA SCREEN, IFA	NEGATIVE	NEGATIVE	
ANA IFA is a first line screen for detecting the presence of up to approximately 150 autoantibodies in various autoimmune diseases. A negative ANA IFA result suggests an ANA-associated autoimmune disease is not present at this time, but is not definitive. If there is high clinical suspicion for Sjogren's syndrome, testing for anti-SS-A/Ro antibody should be considered. Anti-Jo-1 antibody should be considered for clinically suspected inflammatory myopathies. AC-0: Negative International Consensus on ANA Patterns (https://doi.org/10.1515/ccIm-2018-0052) For additional information, please refer to http://education.QuestDiagnostics.com/faq/FAQ177 (This link is being provided for informational/ educational purposes only.) Physician Comments:			

PERFORMING SITE:

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