

Patient Report



Specimen ID: 301-992-9005-0
Control ID:

Acct #: 90000999
LabCorp Test Master
Test Account
5450 Millstream Road
MCLEANSVILLE NC 27301

Phone: (336) 436-8645 Rte: 00

SAMPLE REPORT, 322000



Patient Details

DOB: 11/13/1959
Age(y/m/d): 062/11/15
Gender: M
Patient ID:

Specimen Details

Date collected: 10/28/2022 0000 Local
Date received: 10/28/2022
Date entered: 10/28/2022
Date reported: 10/31/2022 0000 ET

Physician Details

Ordering:
Referring:
ID:
NPI:

General Comments & Additional Information

Clinical Info: NORMAL REPORT

Ordered Items

Comp. Metabolic Panel (14)

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Comp. Metabolic Panel (14)					
Glucose	70		mg/dL	70-99	01
BUN	15		mg/dL	8-27	01
Creatinine	0.76		mg/dL	0.76-1.27	01
eGFR	102		mL/min/1.73	>59	
BUN/Creatinine Ratio	20			10-24	
Sodium	134		mmol/L	134-144	01
Potassium	3.5		mmol/L	3.5-5.2	01
Chloride	96		mmol/L	96-106	01
Carbon Dioxide, Total	20		mmol/L	20-29	01
Calcium	8.7		mg/dL	8.6-10.2	01
Protein, Total	6.0		g/dL	6.0-8.5	01
Albumin	3.8		g/dL	3.8-4.8	01
Globulin, Total	2.2		g/dL	1.5-4.5	
A/G Ratio	1.7			1.2-2.2	
Bilirubin, Total	0.1		mg/dL	0.0-1.2	01
Alkaline Phosphatase	44		IU/L	44-121	01
AST (SGOT)	15		IU/L	0-40	01
ALT (SGPT)	12		IU/L	0-44	01

01 BN Labcorp Burlington
1447 York Court, Burlington, NC 27215-3361

Dir: Sanjai Nagendra, MD

For inquiries, the physician may contact **Branch: 800-222-7566 Lab: 800-762-4344**

Patient Report



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5450 Millstream Road
MCLEANSVILLE NC 27301

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SAMPLE REPORT, 322000

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Physician Details

Ordering:
Referring:
ID:
NPI:

General Comments & Additional Information

Clinical Info: ABNORMAL REPORT

Ordered Items

Comp. Metabolic Panel (14); Litholink CKD Program

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Comp. Metabolic Panel (14)					
Glucose	88		mg/dL	70-99	01
BUN	15		mg/dL	8-27	01
Creatinine	1.50	High	mg/dL	0.76-1.27	01
eGFR	52	Low	mL/min/1.73	>59	
BUN/Creatinine Ratio	10			10-24	
Sodium	150	High	mmol/L	134-144	01
Potassium	3.8		mmol/L	3.5-5.2	01
Chloride	100		mmol/L	96-106	01
Carbon Dioxide, Total	25		mmol/L	20-29	01
Calcium	9.0		mg/dL	8.6-10.2	01
Protein, Total	7.5		g/dL	6.0-8.5	01
Albumin	4.9	High	g/dL	3.8-4.8	01
Globulin, Total	2.6		g/dL	1.5-4.5	
A/G Ratio	1.9			1.2-2.2	
Bilirubin, Total	1.2		mg/dL	0.0-1.2	01
Alkaline Phosphatase	66		IU/L	44-121	01
AST (SGOT)	25		IU/L	0-40	01
ALT (SGPT)	33		IU/L	0-44	01

Litholink CKD Program

Interpretation Note 02

CHRONIC KIDNEY DISEASE:

EGFR, BLOOD PRESSURE, AND PROTEINURIA ASSESSMENT

We presume eGFR has been less than 60 mL/min/1.73mE2 on at least two occasions spaced at least 3 months apart. Current eGFR is 52 mL/min/1.73mE2 corresponding to CKD stage 3a.

Potassium is within goal, 3.8 mmol/L.

EGFR, BLOOD PRESSURE, AND PROTEINURIA TREATMENT SUGGESTIONS

Guidelines recommend a target blood pressure of 120/80 mmHg or less to reduce cardiovascular risk and CKD progression.

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TESTS	RESULT	FLAG	UNITS	REFERENCE	INTERVAL	LAB
Assessment of albuminuria (urine albumin:creatinine ratio or urine protein:creatinine ratio preferred) is recommended at least annually in CKD patients for staging and disease prognosis.						
EGFR, BLOOD PRESSURE, AND PROTEINURIA FOLLOW-UP						
-						
fasting Renal Panel within 12 months; Spot Urine Panel is recommended by guidelines, at least yearly;						
BONE and MINERAL ASSESSMENT						
Calcium is within goal, 9.0 mg/dL. Carbon Dioxide is within goal, 25 mmol/L. Guidelines recommend the measurement of 25-hydroxy vitamin D in patients with CKD.						
BONE and MINERAL TREATMENT SUGGESTIONS						
-						
Interpretations require simultaneous measurements of serum calcium and phosphorus.						
BONE and MINERAL FOLLOW-UP						
-						
fasting PTH with Renal Panel and 25-Hydroxy Vitamin D are recommended by guidelines, at least yearly;						
LIPIDS ASSESSMENT						
Most recent order does not include a fasting Lipid Panel.						
LIPIDS FOLLOW-UP						
-						
fasting Lipid Panel is recommended by guidelines, at least yearly;						
ANEMIA ASSESSMENT						
Most recent order does not include a CBC Panel or iron studies.						
ANEMIA FOLLOW-UP						
-						
CBC is recommended by guidelines, at least yearly;						

DISCLAIMER						
These assessments and treatment suggestions are provided as a convenience in support of the physician-patient relationship and are not intended to replace the physician's clinical judgment. They are derived from national guidelines in addition to other evidence and expert opinion. The clinician should consider this information within the context of clinical opinion and the individual patient. SEE GUIDANCE FOR CHRONIC KIDNEY DISEASE PROGRAM: Kidney Disease Improving Global Outcomes (KDIGO) clinical practice guidelines are at http://kdigo.org/home/guidelines/ . National Kidney Foundation Kidney Disease Outcomes Quality Initiative (KDOQI (TM)), with its limitations and disclaimers, are at www.kidney.org/professionals/KDOQI . This program is intended for patients who have been diagnosed with stages 3, 4, or pre-dialysis 5 CKD. It is not intended for children, pregnant patients, or transplant patients.						

PDF

02

Patient Report



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01	BN	Labcorp Burlington 1447 York Court, Burlington, NC 27215-3361	Dir: Sanjai Nagendra, MD
02	LITIL	Litholink Corporation 150 Spring Lake Dr Ste A, Itasca, IL 60143-2091	Dir: Pawan Vohra, PhD

For inquiries, the physician may contact **Branch: 800-222-7566 Lab: 800-762-4344**

Accessions: 30199290060

DISCLAIMER: These assessments and treatment suggestions are provided as a convenience in support of the physician-patient relationship and are not intended to replace the physician's clinical judgment. They are derived from national guidelines in addition to other evidence and expert opinion. The clinician should consider this information within the context of clinical opinion and the individual patient.

SEE GUIDANCE FOR CHRONIC KIDNEY DISEASE PROGRAM: Kidney Disease Improving Global Outcomes (KDIGO) clinical practice guidelines are at <http://kdigo.org/home/guidelines/>. National Kidney Foundation Kidney Disease Outcomes Quality Initiative (KDOQI (TM)), with its limitations and disclaimers, are at www.kidney.org/professionals/KDOQI. This program is intended for patients who have been diagnosed with stages 3, 4, or pre-dialysis 5 CKD. It is not intended for children, pregnant patients, or transplant patients.

Note: Please refer to your LabCorp Report for all results as well as any test-specific and specimen-specific comments.

Chronic Kidney Disease

Analysis & Treatment Suggestions

GENDER DIABETES CURRENT eGFR MOST RECENT CKD STAGE

M ? 52 3a

Prognosis of CKD by GFR And Albuminuria Categories

GFR Categories: (ml/min/1.73m ²)		A1	A2	A3
G1	>=90 NORMAL OR HIGH			
G2	60-89 MILDLY DECREASED			
G3a	45-59 MILDLY TO MODERATELY DECREASED			
G3b	30-44 MODERATELY TO SEVERELY DECREASED			
G4	15-29 SEVERELY DECREASED			
G5	<15 KIDNEY FAILURE			

Persistent Albuminuria Categories

A1 = NORMAL TO MILDLY INCREASED; ACR <30 ug/mg; PCR <=200 mg/g

A2 = MODERATELY INCREASED; ACR 30-300 ug/mg; PCR 201-500 mg/g

A3 = SEVERELY INCREASED; ACR >300 ug/mg; PCR >500 mg/g

= LOW RISK

= MODERATELY INCREASED RISK

= HIGH RISK

= VERY HIGH RISK

● = PATIENT'S RESULT

Kidney Disease: Improving Global Outcomes (KDIGO) CKD Work Group. KDIGO 2012 Clinical Practice Guideline for the Evaluation and Management of Chronic Kidney Disease. *Kidney inter., Suppl.* 2013; 3: 1-150.

eGFR, Blood Pressure, and Proteinuria

We presume eGFR has been less than 60 mL/min/1.73mE2 on at least two occasions spaced at least 3 months apart. Current eGFR is 52 mL/min/1.73mE2 corresponding to CKD stage 3a. Potassium is within goal, 3.8 mmol/L.

Bone & Mineral

Calcium is within goal, 9.0 mg/dL. Carbon Dioxide is within goal, 25 mmol/L. Guidelines recommend the measurement of 25-hydroxy vitamin D in patients with CKD.

Lipids

Most recent order does not include a fasting Lipid Panel.

Anemia

Most recent order does not include a CBC Panel or iron studies.

Treatment Suggestions

Guidelines recommend a target blood pressure of 120/80 mmHg or less to reduce cardiovascular risk and CKD progression. Assessment of albuminuria (urine albumin:creatinine ratio or urine protein:creatinine ratio preferred) is recommended at least annually in CKD patients for staging and disease prognosis.

Treatment Suggestions

Interpretations require simultaneous measurements of serum calcium and phosphorus.

Follow-Up Suggestions for CKD

Recommended by guidelines, at least yearly

- Spot Urine Panel
- Fasting PTH with Renal Panel
- 25-Hydroxy Vitamin D
- Fasting Lipid Panel
- CBC

12 months

- Fasting Renal Panel

Your Test Results





WITHIN GOAL



BORDERLINE



OUT OF GOAL

Test	Your Results	Comments
 Kidney Health		
eGFR estimates how well your kidneys are filtering blood. The higher the number, the better your kidneys are working.	52 Ref Range: >59 mL/min/1.73mE2	YOUR RESULT COULD MEAN YOU HAVE STAGE 3a CHRONIC KIDNEY DISEASE (CKD). There are 5 stages of CKD. See below for more information.
POTASSIUM helps keep your heart and muscles working properly. High or low levels can be dangerous.	 3.8 Ref. Range: 3.5 to 5.2 mmol/L	YOUR POTASSIUM IS NORMAL. To keep it in the normal range, make sure you avoid foods high in potassium. For more information, visit www.kidney.org/atoz/content/potassium.cfm .

YOUR eGFR IS 52, YOU ARE IN STAGE 3a CKD. THINGS YOU NEED TO KNOW:

- CKD means your kidneys show decreased function which may be caused by aging, diabetes, high blood pressure, or many other diseases. CKD can lead to heart disease.
- Even if you feel fine, you may be at risk for problems such as high blood pressure, high cholesterol, anemia, and bone disease. Your doctor should test you for these problems.
- Avoid taking NSAIDs (e.g. ibuprofen, Advil®, Motrin®, Aleve®) as these may worsen your kidney function.
- To learn more, visit the National Kidney Foundation's website: www.kidney.org/kidneydisease.

DISCLAIMER: You should discuss this information with your physician. Labcorp does not have a doctor-patient relationship with you, nor does it have access to a complete medical history or physical examination conducted by a physician that would be necessary for a complete diagnosis and comprehensive treatment plan. Neither you nor your physician should rely solely on this guidance. Bolded result descriptions in "Comments" consider either the reference range or target range for the test result. Reference range refers to the Labcorp reference interval. Target range refers to the guideline-suggested goal. REFERENCES: National Kidney Foundation Kidney Disease Outcomes Quality Initiative (KDOQI) at www.Kidney.org and Kidney Disease Improving Global Outcomes (KDIGO) at <http://kdigo.org>. Adapted from: https://www.niddk.nih.gov/-/media/Files/Health-Information/Health-Professionals/Kidney-Disease/Your_Kidney_Test_Results_EN.pdf.