Nordic Laboratories

Hormone Evaluation
Version: 3 5 0 552

Test nr.	**XXXX XX XX XXX B**	***Collected***	03/31/14 06:30		
Patient Name	Sample Report			***Doctor Name***	Nordic Laboratories
Patient nr.				***Practitioner Address***	Nygade 6, 3.sal
DOB	7/28/1982	***Sex***	Male		1164 Copenhagen
Received	04/07/2014	***Tested***	04/09/2014		Denmark

Test Name	Result		Units	Range
Insulin (blood spot)	3.7		mIU/mL	1-15 (optimal 2-6)
hsCRP (blood spot)	0.1		mg/L	< 3
Hemoglobin A1c	4.3		%	< 6%
Triglycerides (blood spot)	115		mg/dL	< 150 mg/dL
Cholesterol (blood spot)	207	H	mg/dL	<200 mg/dL
HDL	51		mg/dL	40 mg/dL or higher
LDL Cholesterol	133	H		<130 mg/dL (optimal <100)
VLDL	23			<30 mg/dL

Therapies

None Indicated

ZRT Laboratory CLIA Lic# 38D0960950

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Lab Comments

Fasting insulin is within normal range, however, this does not rule out insulin resistance and predisposition to diabetes if fasting glucose is elevated and symptoms/signs of insulin resistance are problematic (e.g. obesity, excessive weight gain in the waist, elevated triglycerides and HbA1C, blood sugar dysregulation, etc.)

High Sensitivity C-Reactive Protein (hs-CRP) is within normal range (< 3 mg/L). Elevated hs-CRP is a marker of inflammation and contributor to pro-inflammatory and pro-thrombotic elements of cardiovascular disease risk.

Hemoglobin A1c (HbA1c) is within normal optimal range (3.5-5.5%). HbA1c is a measure of red blood cell hemoglobin glycation. Because red blood cells have about a 120 day life span, a high HbA1c reflects mean hyperglycemia (elevated glucose) for the previous 3 months. In people without diabetes, a normal HbA1c value is somewhere between 3.5% and 5.5%. The American Diabetic Association recommends that HbA1c is normal if it is between 4% and 6%. People with diabetes have higher HbA1c values because their bodies have difficulty managing their blood sugar levels (hyperglycemia). A healthy goal for most people with diabetes is to keep HbA1c under 7% (or the goal set for you by your doctor). With persistently high levels of HbA1c, there is increased risk of developing problems such as eye disease, kidney disease, nerve damage, heart disease, and stroke.

Triglycerides are within normal range, suggesting that insulin resistance/metabolic syndrome is unlikely. Triglycerides are a type of fat in the bloodstream that is taken up by tissues and used as a primary energy source. Triglycerides are derived from fats consumed in food and synthesized in the body from carbohydrates (sugars). Triglycerides are stored by tissues and released into the bloodstream in response to hormonal signals. Elevated triglycerides (hypertriglyceridemia) above 200 mg/dL indicate insulin resistance/metabolic syndrome and is associated with increased risk for heart disease and stroke.

Cholesterol is within a range (200-240 mg/dL) considered by most health educators as moderate risk for cardiovascular disease. Cholesterol should be evaluated in parallel with other lipid risk factors, which include triglycerides, LDL and HDL cholesterol. The current NCEP-ATP III recommendations for LDL cholesterol are <100 optimal, 100-129 near optimal, and 130 and above becomes the high range. The ADA and American College of Cardiology Foundation's consensus statement recommended a cutoff of 100 mg/dL for LDL in patients at high risk who have 2 or more additional risk factors for CVD. For additional information see http://en.wikipedia.org/wiki/Cholesterol

HDL cholesterol is within the ranges most health experts consider as low risk for cardiovascular disease. However, HDL-cholesterol should be evaluated in parallel with LDL and triglycerides, which also are risk factors.

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