

# YOUR REFERRAL

## PATIENT DETAILS

**Gordon Wayne Watts**

Preferred Name :

DOB: **05/16/1966**

Insurance Provider : **HCHCP**

Address: **2046 PLEASANT ACRE DR,  
PLANT CITY, FL 33566-7511**

Group Number :

Contact: **863-688-9880**

Subscriber No : **0000008465**


## Who Are You Seeing



**Kenneth E Rogers**

Chiropractic

,  
7728 Palm River Road, Tampa,  
FL33619

 : 813-630-3600

[See Driving Directions](#)

## When Are You Being Seen

### Referral Details

Start Date

08/29/2023

End Date

12/30/2023

Authorization ID:232411656

11 Visits

Referral  
From

**Brett Frazier, M.D.**

Family Practice | ID Number:591741303 |  
NPI:1891925061

PLANT CITY FAMILY CARE

Address: 801 E. Baker Street,  
340B00129100SCPlant City, FL, 33563-3652  
Contact: 813-349-7600

## REASON FOR REFERRAL

In House Chiropractor, Dr. Rogers

## DIAGNOSIS

M54.50 - Lumbar Pain

## NOTES

Hernandez Garcia-MA, Leticia 08/31/2023 08:16:34 AM >Referral Mailed To Patient And Faxed To Specialist/Facility. Take Insurance Card, Photo ID And This Referral With You To Your Appointment. Please Call To Schedule Your Appointment.

## ↔ YOUR PAST REFERRALS

<input type="checkbox"/>	Date	Details	Start Date	Valid Until
<input type="checkbox"/>	09/11/2023	Addys Garcia Delgado referred you to MARK HOLMES for Please evaluate patient for full mouth extractions , large decays , fracture teeth non restorable , patient choose extraction teeth 1,2,3,4,5,6,7,8,9,10,11,12,13,14,15,16,18,20,21,22,23,24,25 you   Appointment Date: Patient will call to make appointment.	09/11/2023	10/11/2023
<input type="checkbox"/>	09/01/2023	Nathaly Antigua Suarez referred you to DIAGNOSTIC IMAGING CENTER SOUTH FLORIDA BAPTIST HOSPITAL for PET/CT scan with FDG injection   Appointment scheduled on 10/2/2023 at 12:00pm.	09/11/2023	12/31/2023
<input type="checkbox"/>	09/01/2023	Nathaly Antigua Suarez referred you to DIAGNOSTIC IMAGING CENTER SOUTH FLORIDA BAPTIST HOSPITAL for DEXA scan	09/01/2023	09/01/2024
<input type="checkbox"/>	08/28/2023	Brett Frazier referred you to Kenneth Rogers for in house chiropractor, Dr. Rogers	08/29/2023	12/30/2023
<input type="checkbox"/>	07/13/2023	Anna Simeoni referred you to MARK HOLMES for Please evaluate #17 for extraction. Patient: Dr. Holmes Office will contact you when the referral is approved by HCHCP.	07/13/2023	01/09/2024
<input type="checkbox"/>	06/21/2023	Samer Darwich referred you to (PLANT CITY) AFRIDI,SALIM K. for follow up prostate cancer	06/21/2023	10/30/2023
<input type="checkbox"/>	06/19/2023	Anna Simeoni referred you to MARK HOLMES for Please evaluate #29 for extraction. Patient: Dr. Holmes Office will contact you when the referral is approved by HCHCP.	06/19/2023	12/16/2023
<input type="checkbox"/>	05/09/2023	Robin Burns-Thigpen referred you to (PLANT CITY) AFRIDI,SALIM K. for please followup thanks.	05/10/2023	08/31/2023
<input type="checkbox"/>	12/06/2022	Addys Garcia Delgado referred you to MARK HOLMES for Appointment Date: Patient will call to make appointment.   Please evaluate extraction teeth 19,30 large occlusal wearing patient prefer extraction . Thank you	12/06/2022	06/04/2023
<input type="checkbox"/>	10/07/2022	Robin Burns-Thigpen referred you to MARK TABOR for please eval and tx thanks. seen by TGH	10/07/2022	01/31/2023



## ↔ YOUR PAST REFERRALS

<input type="checkbox"/>	Date	Details	Start Date	Valid Until
<input type="checkbox"/>	12/20/2021	Robin Burns-Thigpen referred you to (PLANT CITY) AFRIDI,SALIM K. for please followup thanks.	12/20/2021	06/17/2022
<input type="checkbox"/>	06/11/2021	Robin Burns-Thigpen referred you to (PLANT CITY) AFRIDI,SALIM K. for please eval and tx. thanks.	06/11/2021	12/07/2021
<input type="checkbox"/>	06/09/2021	Robin Burns-Thigpen referred you to TEOFIL B. KULYK for please eval and tx. thanks.	06/09/2021	10/31/2021
<input type="checkbox"/>	06/09/2021	Robin Burns-Thigpen referred you to YAWER (PLANT CITY) NENSEY for screening colonoscopy	06/09/2021	10/31/2021
<input type="checkbox"/>	01/14/2020	Robin Burns-Thigpen referred you to HAROON ILYAS for please eval and tx. thanks.	01/14/2020	05/31/2020





# YOUR LAB / DIAGNOSTIC REPORTS

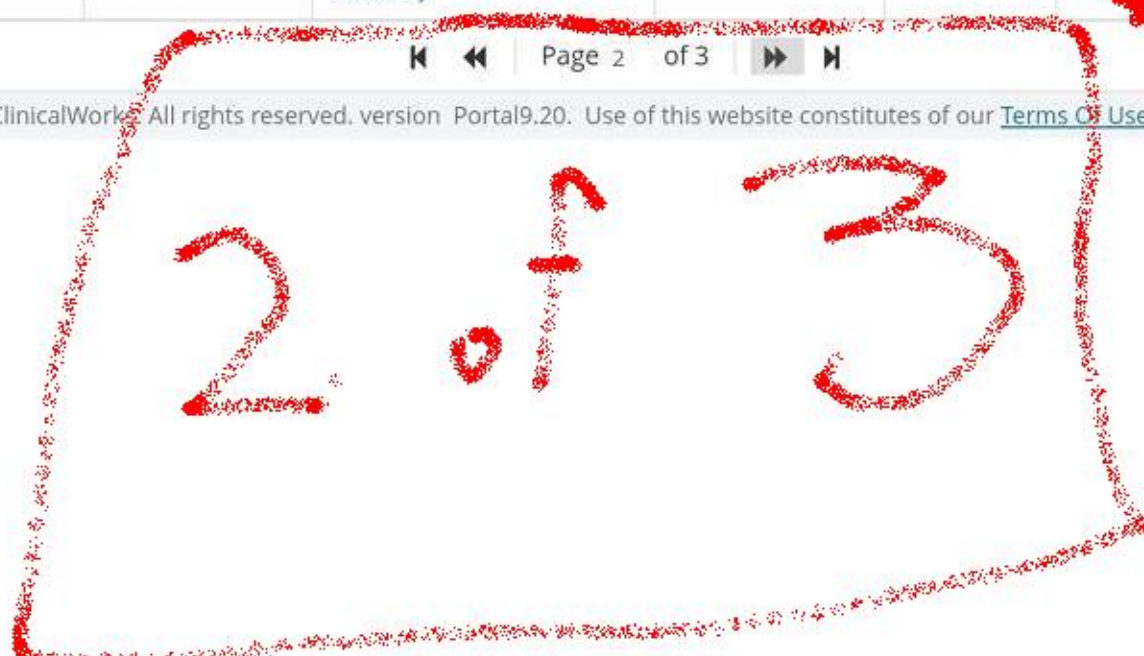
**Please note:** The list below may contain the test results that are yet to be reviewed by your provider.

Result Date	Order Date	Name	Reason	Result	Notes
<u>10/03/2023</u>	10/02/2023	PET CT IMAGING SKULL BASE TO THIGH	✓		✓
<u>09/28/2023</u>	09/08/2023	DEXA HIP AND SPINE	✓	+osteoporos	
<u>08/29/2023</u>	08/28/2023	L/S Spine, AP & Lat. (IN-HOUSE)	✓		Camejo, Janet 08/28/2023 09:31:38 AM > X-Ray Done
06/21/2023	06/21/2023	B-12 (1000 mcg/mL) IM - Give now x1		Administered	Rolon-MA, Arodi 06/21/2023 09:27:44 AM > done
05/10/2023	05/09/2023	CBC with diff			
05/10/2023	05/09/2023	Prostatic Specific Antigen, Total (PSA)			
05/10/2023	05/09/2023	TSH, 3RD GENERATION W/REFLEX TO FT4			
05/10/2023	05/09/2023	Complete Metabolic Panel (14) (CMP)			
05/10/2023	05/09/2023	Prostatic Specific Antigen (FREE AND TOTAL)			
09/13/2021	09/09/2021	CBC With Differential/Platelet			

# YOUR LAB / DIAGNOSTIC REPORTS

**Please note:** The list below may contain the test results that are yet to be reviewed by your provider.

Result Date	Order Date	Name	Reason	Result	Notes
09/13/2021	09/09/2021	Magnesium, Serum			
09/13/2021	09/09/2021	Complete Metabolic Panel (14) (CMP)			
09/13/2021	09/09/2021	Vitamin D, 1,25 Dihydroxy (CALCITROL)			
06/10/2021	06/09/2021	CBC With Differential/Platelet	Received -Quest Diagnostics		
06/10/2021	06/09/2021	Prostatic Specific Antigen, Total (PSA)	Received -Quest Diagnostics		Burns-Thigpen,Robin 06/11/2021 11:49:56 AM > refer to URology
06/10/2021	06/09/2021	Urinalysis, Complete includes microscopic, w/rflx Culture (3020)	Received -Quest Diagnostics		
06/10/2021	06/09/2021	TSH, 3RD GENERATION W/REFLEX TO FT4	Received -Quest Diagnostics		
06/10/2021	06/09/2021	LIPID PANEL, Reflex DIRECT LDL	Received -Quest Diagnostics		
06/10/2021	06/09/2021	Complete Metabolic Panel (14) (CMP)	Received -Quest Diagnostics		
01/16/2020	01/16/2020	Retinal Scan (IN-HOUSE)			





## YOUR LAB / DIAGNOSTIC REPORTS

**Please note:** The list below may contain the test results that are yet to be reviewed by your provider.

Result Date	Order Date	Name	Reason	Result	Notes
01/14/2020	01/14/2020	EKG, Electrocardiogram (IN-HOUSE)			Sapp,Ariel 01/14/2020 02:45:28 PM > EKG DONE
12/11/2019	12/10/2019	Complete Metabolic Panel (14) (CMP)	Received -Quest Diagnostics		
12/11/2019	12/10/2019	CBC With Differential/Platelet	Received -Quest Diagnostics		
12/11/2019	12/10/2019	TSH, 3RD GENERATION W/REFLEX TO FT4	Received -Quest Diagnostics		
12/11/2019	12/10/2019	LIPID PANEL, Reflex DIRECT LDL	Received -Quest Diagnostics		

3 of 3 ✓



Watts, Gordon Wayne, M, 05/16/1966

863-688-9880

NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

813-349-7600

FINAL RESULT

Accession ID: <b>TM143068A</b>	Lab Ref ID: <b>5Q1A7888077</b>	
Order Date: <b>05/09/2023</b>	Received: <b>05/10/2023 05:30:10</b>	Specimen Received: <b>05/09/2023 21:38:00</b>
Collection Date: <b>05/09/2023 10:18:00</b>	Report: <b>05/10/2023 05:16:00</b>	
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>	

CBC with diff

NAME	VALUE	REFERENCE RANGE	LAB
F WHITE BLOOD CELL COUNT	4.9	3.8-10.8 (Thousand/uL)	TP
F RED BLOOD CELL COUNT	4.79	4.20-5.80 (Million/uL)	TP
F HEMOGLOBIN	15.4	13.2-17.1 (g/dL)	TP
F HEMATOCRIT	43.9	38.5-50.0 (%)	TP
F MCV	91.6	80.0-100.0 (fL)	TP
F MCH	32.2	27.0-33.0 (pg)	TP
F MCHC	35.1	32.0-36.0 (g/dL)	TP
F RDW	11.9	11.0-15.0 (%)	TP
F PLATELET COUNT	283	140-400 (Thousand/uL)	TP
F MPV	10.8	7.5-12.5 (fL)	TP
F ABSOLUTE NEUTROPHILS	2626	1500-7800 (cells/uL)	TP
F ABSOLUTE LYMPHOCYTES	1323	850-3900 (cells/uL)	TP
F ABSOLUTE MONOCYTES	466	200-950 (cells/uL)	TP
F ABSOLUTE EOSINOPHILS	417	15-500 (cells/uL)	TP
F ABSOLUTE BASOPHILS	69	0-200 (cells/uL)	TP
F NEUTROPHILS	53.6	(%)	TP
F LYMPHOCYTES	27.0	(%)	TP
F MONOCYTES	9.5	(%)	TP
F EOSINOPHILS	8.5	(%)	TP
F BASOPHILS	1.4	(%)	TP

Received Date: 202305092138
0
0 0 0
PERFORMING LAB: TP, Quest Diagnostics-Tampa 4225 E Fowler Ave, Tampa

FL

33617-2026 Weston H Rothrock MD

Result:

Accession ID:

TM143068A

Notes:

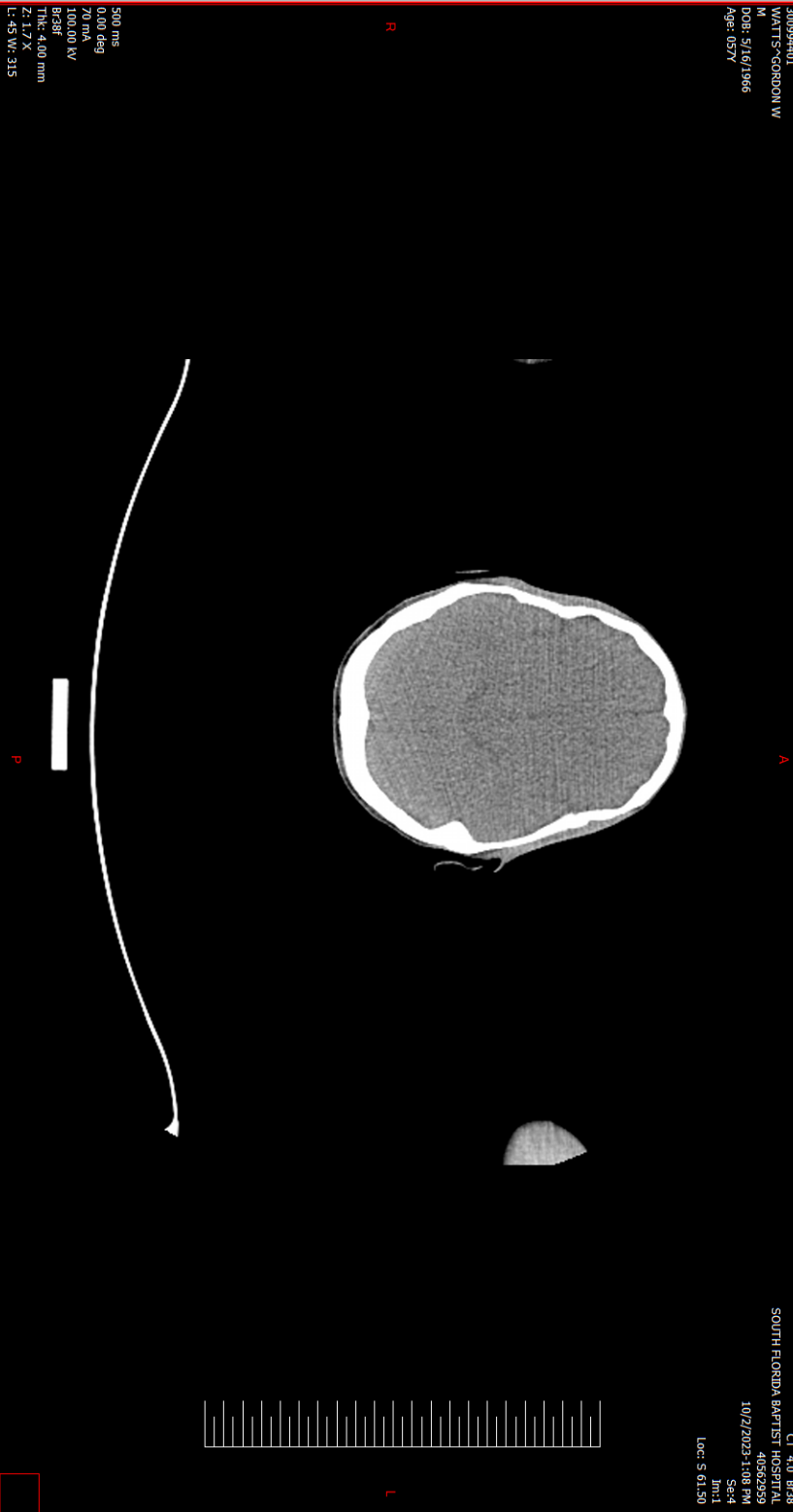


Export Print Pan Windowing Annotations Zoom Original Negative Orientation Series Images Comparative Mode Groups Prev Series Next Series

One Ref Lines Magnifier Image Info MPR Mode Current Series

WATTS-GORDON W - PET CT IMAGING SK...

Report	
3 PET AC	242
4 CT 4.0 BR38	242
5 PET NAC	PT
8 PET Dose Report	PT
502 Patient Protocol	CT
603 Fused Tra	CT
604 Fused Sag	CT
605 Fused Cor	CT
606 CINE MIP	PT
	32



300944401  
 WATTS-GORDON W  
 M DOB: 5/16/1966  
 Age: 09Y7

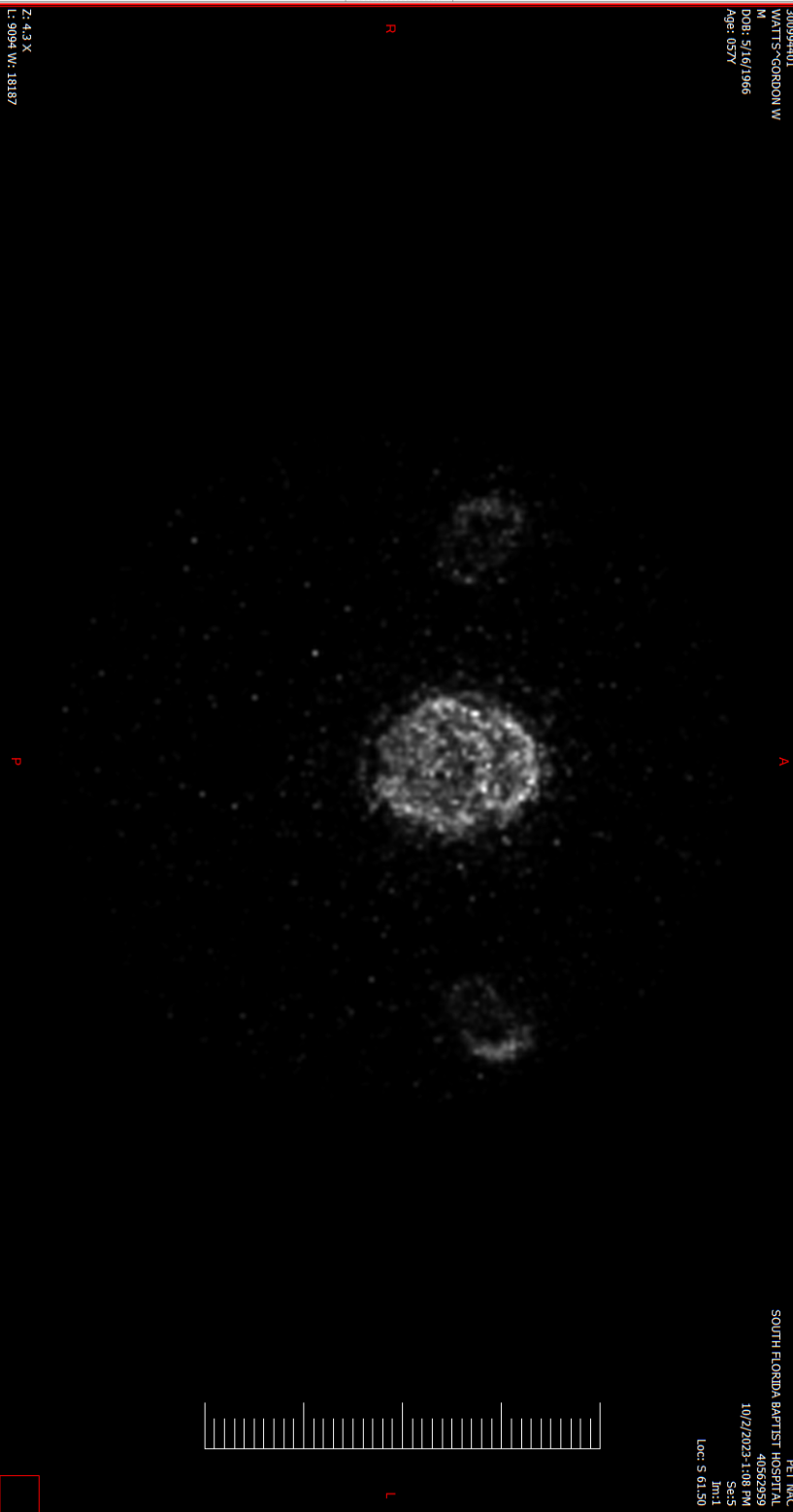
CT 4.0 BR38  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 40582939  
 10/2/2023 1:06 PM  
 Set 4  
 Sct 1  
 Loc: S 61.50

500 ms  
 0.00 deg  
 70 mA  
 100.00 kV  
 BR38F  
 Ttk: 4.00 mm  
 Z: 1.7 X  
 L: 45 W: 315

Export Print Pan Windowing Annotations Zoom Original Negative Orientation Series Images Comparative Mode Groups Prev Series Next Series  
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WATTS-GORDON W - PET CT IMAGING SK...

Report	
3 PET AC	PT
242	
4 CT 4.0 B:38	CT
242	
5 PET MLC	PT
242	
8 PET Dose Report	PT
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502 Patient Protocol	CT
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603 Fused Tra	CT
241	
604 Fused Sag	CT
111	
605 Fused Cor	CT
76	
606 Cine MIP	PT
32	



Export Print Pan Windowing Annotations Zoom Original Negative Orientation Series Images Comparative Mode Groups Prev Series Next Series  
 Ref Lines Magnifier Image Info MPR Mode Current Series

WATTS-GORDON W - PET CT IMAGING SK...

Report

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8 PET Dose Report
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502 Patient Protocol
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603 Fused Tra
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241
604 Fused Sg
CT
111
605 Fused Cor
CT
76
606 Cine MIP
PT
32

300994401  
 WATTS-GORDON W  
 MDOB: 5/16/1966  
 Age: 09Y7

Z: 1.7 X  
 LI: 2048 W: 512

### PET Dose Report

Radioisotope	Fluorodeoxyglucose
Radioisotope	F-18
Radionuclide Half Life(s)	6593.2
Inj. Start Date(DD-MM-YYYY)	02-10-2023
Inj. Stop Date(DD-MM-YYYY)	12-15-17
Inj. Start Time(HH:MM:SS)	02-10-2023
Inj. Stop Time(HH:MM:SS)	12-15-17
Study Name	PET*SKULLBASE_MIDTHIGH (adult)

Parameter	SI units	English units
Injected Dose	428.46 MBq	11.58 mCi
Weight	64.43 Kg	120.00 lbs
Height	1.73 m	5.67 ft
Blood Glucose	6.67 mmol/L	120.00 mg/dL
Effective Dose	8.14 mSv	814.07 mrem

Export Print Pan Windowing Annotations  
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 Prev Series Next Series  
 Current Series

WATTS-GORDON W - PET CT IMAGING SK...

Report	
3 PET AC	PT
242	
4 CT 4.0 Bx38	CT
242	
5 PET NAC	PT
242	
8 PET Dose Report	PT
2	
502 Patient Protocol	CT
1	
603 Fused Tra	CT
241	
604 Fused Ssg	CT
111	
605 Fused Cor	CT
76	
606 Cine MIP	PT
32	

300994401  
 WATTS-GORDON W  
 MDOB: 5/16/1966  
 Age: 09Y7

02-Oct-2023 12:53

XXDEF

Ward:  
 Physician:  
 Operator:

Total mas 2977 Total DLP 229 mGycm

Scan	KV	mas / ref	CTDIvol*	DLP	TI	cSL
			mGy	mGycm	s	mm
Patient Position H-SP	1	100	36 mA	0.05 L	4.8	5.9
Topogram	2	100	53 / 128	2.29 L	224.0	0.5
PET						1.2

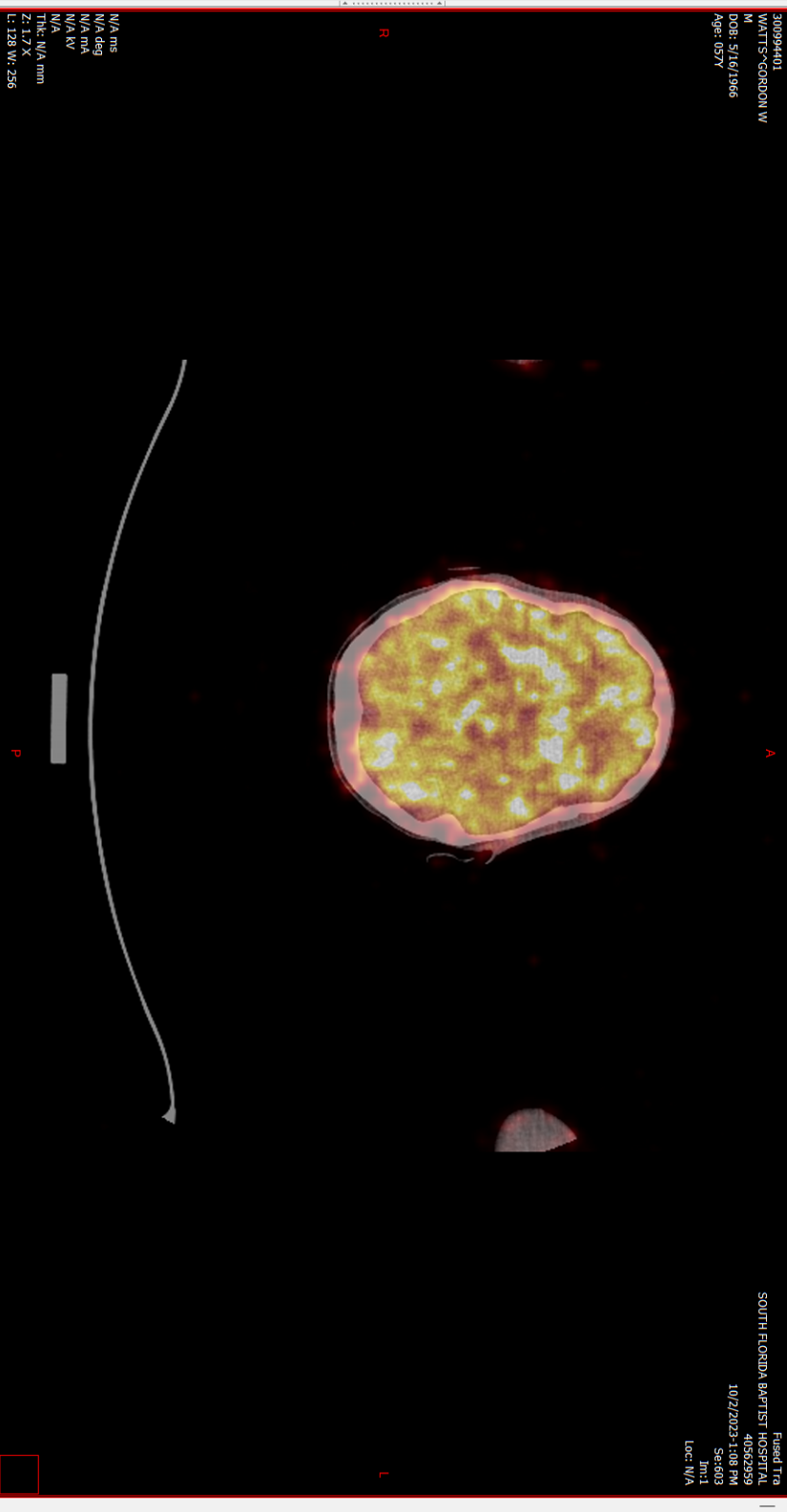
\* L = 32cm, S = 16cm

Patient Protocol  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 10/2/2023 N/A  
 56:50Z  
 Int 1  
 Loc: N/A

Export Print Pan Windowing Annotations Zoom Original Negative Orientation Series Images Comparative Mode Groups Prev Series Next Series  
 Magnifier Image Info MPR Mode Current Series

WATTS-GORDON W - PET CT IMAGING SK...

Report	
3 PET AC	PT
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4 CT 4.0 B38	CT
242	
5 PET MLC	PT
242	
8 PET Dose Report	PT
2	
502 Patient Protocol	CT
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603 Fused Tra	CT
241	
604 Fused Ssg	CT
111	
605 Fused Cor	CT
76	
606 Cine MIP	PT
32	



300994401  
 WATTS-GORDON W  
 MDOB: 5/16/1966  
 Age: 097Y

Fused Tra  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 40582959  
 10/2/2023 1:08 PM  
 Seq:003  
 SMI 1  
 Loc: N/A

N/A ms  
 N/A deg  
 N/A mh  
 N/A kv  
 N/A  
 Ttk: N/A mm  
 Z: 1.7 X  
 L: 128 W: 256



Export Print Pan Windowing Annotations  
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WATTS-GORDON W - PET CT IMAGING SK...

Report	
3 PET AC	PT
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4 CT 4.0 B38	CT
242	
5 PET NAC	PT
242	
8 PET Dose Report	PT
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502 Patient Protocol	CT
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603 Fused Tra	CT
241	
604 Fused Sag	CT
111	
605 Fused Cor	CT
76	
606 CINE MIP	PT
32	



300994401  
 WATTS-GORDON W  
 DOB: 5/16/1966  
 Age: 097Y

Fused Sag  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 4058299  
 10/2/2023 1:08 PM  
 Seq:04  
 Int:1  
 Loc: N/A

N/A ms  
 N/A deg  
 N/A ma  
 N/A kv  
 N/A  
 Ttk: N/A mm  
 Z: 1.7 X  
 L: 128 W: 256

Export Print Pan Windowing Annotations AI Zoom Original Negative Orientation Series Images Comparative Mode Groups Prev Series Next Series

WATTS-GORDON W - PET CT HINING SK...

Report	
3 PET AC	PT
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4 CT 4.0 Bx38	CT
242	
5 PET NAC	PT
242	
8 PET Ouse Report	PT
2	
502 Patient Protocol	CT
1	
603 Fused Tra	CT
241	
604 Fused Spg	CT
111	
605 Fused Cor	CT
76	
606 Cine MIP	PT
32	

300994401  
 WATTS-GORDON W  
 M  
 DOB: 5/16/1966  
 Age: 057Y

R S

Fused Cor  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 10/2/2023 1:08 PM  
 Sec:005  
 Int:1  
 Loc: WA

N/A ms  
 N/A deg  
 N/A ma  
 N/A kv  
 N/A  
 Ttk: N/A mm  
 Z: 1.7 X  
 L: 128 W: 256

Export Print Pan Windowing Annotations  
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 MPR Mode  
 Current Series  
 Original Negative Orientation Series Images Comparative Mode Groups  
 Prev Series Next Series

WATTS-GORDON W - PET CT IMAGING SK...

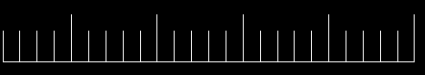
Report	
3 PET AC	PT
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5 PET NAC	PT
242	
8 PET Dose Report	PT
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502 Patient Protocol	CT
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603 Fused Tra	CT
241	
604 Fused Sag	CT
111	
605 Fused Cor	CT
76	
606 Cine MIP	PT
32	



Z: 1.8 X  
L: 14494 W: 26987

30094401  
 WATTS-GORDON W  
 MDOB: 5/16/1966  
 Age: 097Y

CINE MIP  
 SOUTH FLORIDA BAPTIST HOSPITAL  
 40582959  
 10/2/2023 1:08 PM  
 Set:006  
 Ann:1  
 Loc: A 101-16





Watts, Gordon Wayne, M, 05/16/1966

PLANT CITY FAMILY CARE

☐ 863-688-9880

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

Accession ID: **40419308**

Lab Ref ID:

Order Date: **09/08/2023**

Collection Date: **09:43:00**

Requesting Physician: **Antigua Suarez, Nathaly**

Ordering Physician: **Antigua Suarez, Nathaly**

## DEXA HIP AND SPINE

NAME

VALUE

See Below For Report

Patient: WATTS, GORDON W      DOB: 05/16/1966      Gender: M

CPP: 300994401

MRN: 3000128350

Account: 106011652033

Patient Status:

Admit Date: 09/08/2023

Location: BayCare Outpatient Imaging

Bloomingtondale

Room and Bed:

Requesting: Nathaly Antigua Suarez

Attending: Nathaly Antigua Suarez

Primary Care Provider: Robin Tiffany Burns-Thigpen

ACC: 40419308      Test Name: DEXA HIP AND

SPINE

Completed: 09/08/2023 09:43

DEXA HIP AND SPINE

INDICATION: Other specified disorders of bone density and structure, unspecified site.

COMPARISON: None.

VENDOR: Hologic.

FINDINGS:

Lumbar spine levels L1-L4:

Current study: Bone mineral density (BMD): 0.798 gm/cm<sup>2</sup>, T-score: -2.7.

Left femoral neck:

Current study: Bone mineral density (BMD): 0.571 gm/cm<sup>2</sup>, T-score: -2.6.

Total left hip:

Current study: Bone mineral density (BMD): 0.692 gm/cm<sup>2</sup>, T-score: -2.3.

IMPRESSION: Osteoporosis.

The United States Preventive Services Task Force (USPSTF) recommends using FRAX to calculate risk with subsequent testing of the following groups:

- All women 65 and older
- Women 50-64 with 10 year risk of fracture of 9.3% or more.

FRAX Do not calculate if: Hip scan is not performed, T score standards for spine total, hip total, femoral neck at or above -1.0, or if any T score is at or below -2.5.

In the United States, the National Osteoporosis Foundation Guidelines recommend treatment of postmenopausal women and men 50 years of age or older with the following:

- A fragility fracture of the hip or vertebra
- T-score of less than -2.5 at the femoral neck or spine (Osteoporosis)
- T-score -1.0 to -2.4 at the femoral neck or spine AND a 10 year probability of:
  - Hip fracture greater than or equal to 3%
  - OR
  - Major fracture greater than or equal to 20% as calculated from the US-adapted FRAX WHO Fracture Risk Assessment Tool algorithm.

WHO T-score classification:

normal: > or = -1.0

osteopenia: < -1.0 to > -2.5

osteoporosis: < or = -2.5

NOTES:

1. Changes in BMD of less than 3% are in range of error and may not be significant.
2. Always use DEXA testing in conjunction with clinical findings and patient history to determine optimal patient management.
3. T-score standards are based on reference values for white females, age 20-29 based on the NHANES III database and may be less accurate for other groups of patients.
4. DEXA values may be less accurate in patients with degenerative changes, scoliosis, compression deformities etc.

Electronically signed by Christopher Lazo on 9/12/2023 12:32 PM

Thank you for this referral.

Interpreted By: Christopher Ryan Lazo, RADIOLOGIST

Transcribed By: IA 09/12/2023

Electronically Signed By: Christopher Ryan Lazo, RADIOLOGIST 09/12/2023 12:35:00 pm

BayCare Outpatient Imaging Bloomingdale 2470 Bloomingdale Ave Valrico, FL 33596 (813)586-8500

---

Result: +osteoporosis

Accession ID:

40419308

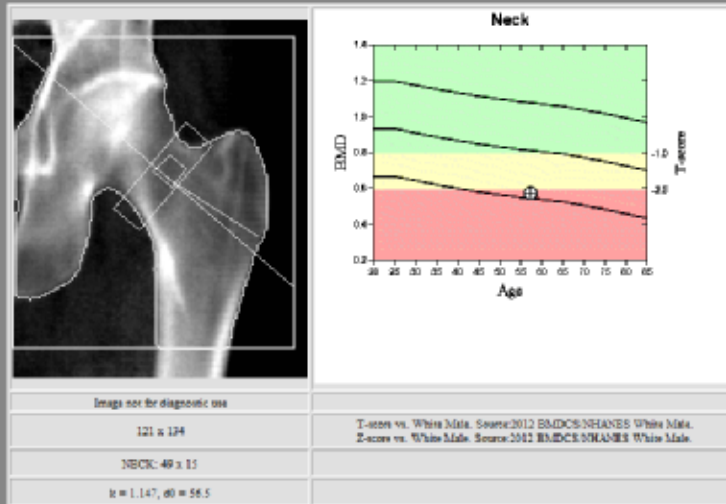
Notes:

# Baycare Outpatient Imaging Bloomingdale

2470 Bloomingdale Ave  
Valrico, FL 33596

## Patient Information:

Name:	WATTS, GORDON W
Patient ID:	300994401
Identifier 2:	
Postal Code:	
Sex:	Male
Ethnicity:	White
Height:	68.0 in
Weight:	120.0 lb
DOB:	05/16/1966
Age:	57
Menopause Age:	
Referring Physician:	Suarez, Nathaly Antigua



## Scan Information:

Scan Date:	September 08, 2023 - A09082305
Scan Type:	x Left Hip
Analysis Date:	09/08/2023 08:49
Analysis Protocol:	Hip
Report Date:	09/08/2023 08:49
Institution:	Baycare Outpatient Imaging Bloomingdale
Operator:	
Model:	Horizon W (S/N301988M)
Comment:	
Software version:	13.6.1.2

## Results Summary:

Region	Area[cm <sup>2</sup> ]	BMC[g]	BMD[g/cm <sup>3</sup> ]	T-score	PR (Peak Reference)	Z-score	AM (Age Matched)
Neck	5.79	3.31	0.571	-2.6	61	-1.7	71
Total	40.56	28.06	0.692	-2.3	67	-1.8	71

Total BMD CV 1.0%, ACF = 1.025, BCF = 1.001, TH = 3.863

WHO Classification: Osteoporosis

## 10-year Fracture Risk

FRAX not reported because:  
Some T-score for Spine Total or Hip Total or Femoral Neck at or below -2.5  
Prior hip or vertebral fracture

## Comment:

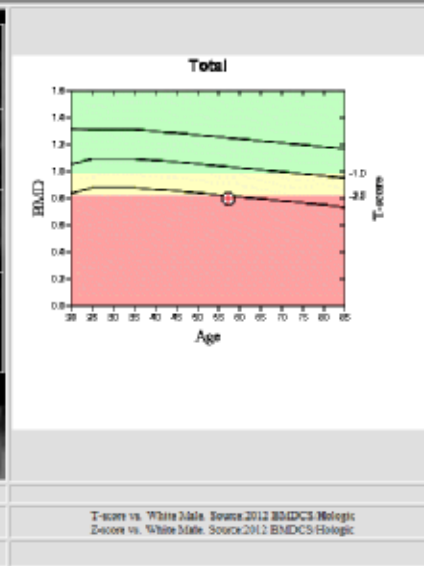
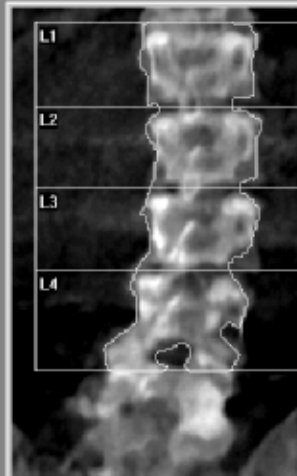
**HOLOGIC**<sup>®</sup>

# Baycare Outpatient Imaging Bloomingdale

2470 Bloomingdale Ave  
Valrico, FL 33596

## Patient Information:

Name:	WATTS, GORDON W
Patient ID:	300994401
Identifier 2:	
Postal Code:	
Sex:	Male
Ethnicity:	White
Height:	68.0 in
Weight:	120.0 lb
DOB:	05/16/1966
Age:	57
Menopause Age:	
Referring Physician:	Suarez, Nathaly Antigua



## Scan Information:

Scan Date:	September 08, 2023 - A09082304
Scan Type:	x Lumbar Spine
Analysis Date:	09/08/2023 08:47
Analysis Protocol:	Spine
Report Date:	09/08/2023 08:49
Institution:	Baycare Outpatient Imaging Bloomingdale
Operator:	
Model:	Horizon W (S/N301988M)
Comment:	
Software version:	13.6.1.2

## Results Summary:

Region	Area [cm <sup>2</sup> ]	BMC [g]	BMD [g/cm <sup>2</sup> ]	T-score	PR (Peak Reference)	Z-score	AM (Age Matched)
L1	16.65	13.77	0.827	-2.2	77	-1.7	81
L2	15.33	11.85	0.773	-2.9	71	-2.4	75
L3	15.57	12.40	0.796	-2.8	72	-2.2	76
L4	20.10	15.95	0.794	-2.7	73	-2.1	77
<b>Total</b>	<b>67.66</b>	<b>53.98</b>	<b>0.798</b>	<b>-2.7</b>	<b>73</b>	<b>-2.1</b>	<b>77</b>

Total BMD CV 1.0%, ACF = 1.025, BCF = 1.001, TH = 6.463

Fracture Risk: High; WHO Classification: Osteoporosis

## Comment:

**HOLOGIC®**

# Baycare Outpatient Imaging Bloomingdale

2470 Bloomingdale Ave  
Valrico, FL 33596

## Patient Information:

Name:	WATTS, GORDON W
Patient ID:	300994401
Identifier 2:	
Postal Code:	
Sex:	Male
Ethnicity:	White
Height:	68.0 in
Weight:	120.0 lb
DOB:	05/16/1966
Age:	57
Menopause Age:	
Referring Physician:	Suarez, Nathaly Antigua

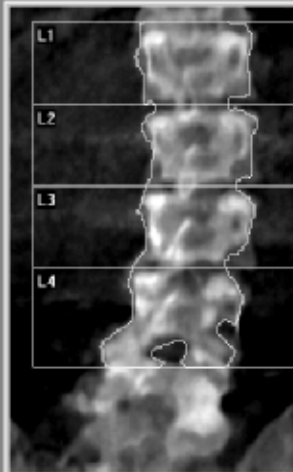
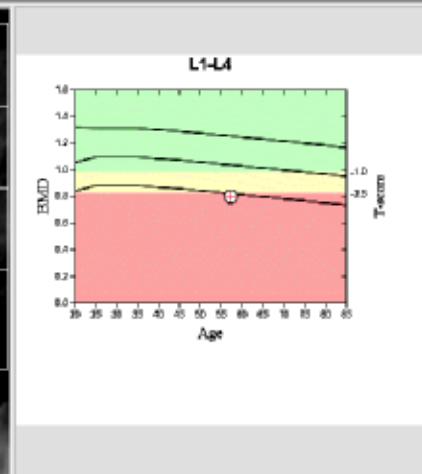


Image not for diagnostic use

116 x 150

k = 1.133, 40 = 43.2



T-score vs. White Male, Source 2012 BMDCS Hologic  
Z-score vs. White Male, Source 2012 BMDCS Hologic

## Scan Information:

Scan Date:	September 08, 2023 - A09082304
Scan Type:	x Lumbar Spine
Analysis Date:	09/08/2023 08:47
Analysis Protocol:	Spine
Report Date:	09/08/2023 08:49
Institution:	Baycare Outpatient Imaging Bloomingdale
Operator:	
Model:	Horizon W (S/N301988M)
Comment:	
Software version:	13.6.1.2

## Results Summary:

Region	Area[cm <sup>2</sup> ]	BMC[g]	BMD[g/cm <sup>3</sup> ]	T-score	PR (Peak Reference)	Z-score	AM (Age Matched)
L1	16.65	13.77	0.827	-2.2	77	-1.7	81
L2	15.33	11.85	0.773	-2.9	71	-2.4	75
L3	15.57	12.40	0.796	-2.8	72	-2.2	76
L4	20.10	15.95	0.794	-2.7	73	-2.1	77
L1-L2	31.99	25.62	0.801	-2.3	76	-1.8	81
L1,L3	32.23	26.17	0.812	-2.2	77	-1.7	81
L1,L4	36.75	29.72	0.809	-2.5	75	-2.0	79
L2-L3	30.90	24.26	0.785	-2.8	71	-2.3	76
L2,L4	35.43	27.81	0.785	-3.1	70	-2.5	74
L3-L4	35.67	28.35	0.795	-3.0	71	-2.4	75
L1-L3	47.56	38.02	0.800	-2.5	75	-1.9	79
L1-L2,L4	52.08	41.57	0.798	-2.6	73	-2.1	78
L1,L3-L4	52.32	42.12	0.805	-2.6	74	-2.0	78
L2-L4	51.00	40.21	0.788	-3.0	71	-2.4	75
L1-L4	67.66	53.98	0.798	-2.7	73	-2.1	77

Total BMD CV 1.0%, ACF = 1.025, BCF = 1.001, TH = 6.463

Fracture Risk: High, WHO Classification: Osteoporosis

## Comment:

**HOLOGIC**<sup>®</sup>

Baycare Outpatient Imaging Bloomingdale  
2470 Bloomingdale Ave, Valrico, FL 33596

PATIENT HISTORY QUESTIONNAIRE

Name:	WATTS, GORDON W	Today's Date:	09/08/2023
Patient ID:	300994401	Sex:	<input type="radio"/> F <input checked="" type="radio"/> M
Current Height: (in)	68.0	Date of Birth :	05/16/1966
Weight: (lb)	120.0	Referring Physician:	Suarez, Nathaly Antigua
Menopause Age:		Ethnicity:	White

1. Have you had a previous hip or vertebral fracture?  Yes  No
2. Have you had any fractures during your adult life which did not result from significant trauma (e.g., auto accident)?  Yes  No
3. Did either of your parents ever have a hip fracture?  Yes  No
4. Do you smoke?  Yes  No
5. Have you ever taken Glucocorticoids?  Yes  No
6. Do you have rheumatoid arthritis?  Yes  No
7. Do you have secondary osteoporosis?  Yes  No
8. Do you drink 3 or more alcoholic drinks per day?  Yes  No
9. Are you being treated for osteoporosis?  Yes  No

10. Have you ever taken any of the following medications:

- |   |  |
|---|--|
| <input type="checkbox"/> Actonel (i.e. risedronate)                   | <input type="checkbox"/> Boniva (i.e. ibandronate)           |
| <input type="checkbox"/> Evista (i.e. raloxifene)                     | <input type="checkbox"/> Forteo (i.e. parathyroid hormone)   |
| <input type="checkbox"/> Fosamax (i.e. alendronate)                   | <input type="checkbox"/> HRT (i.e. estrogen/hormone therapy) |
| <input type="checkbox"/> Miacalcin (i.e. calcitonin)                  | <input type="checkbox"/> Protelos (i.e. strontium ranelate)  |
| <input type="checkbox"/> Reclast (i.e. zoledronate)                   | <input type="checkbox"/> Prolia (i.e. denosumab)             |
| <input checked="" type="checkbox"/> Vitamin D                         | <input checked="" type="checkbox"/> Calcium                  |
| <input type="checkbox"/> Other - Please specify: <input type="text"/> |  |

11. Do you have any of the following medical conditions:

- |   |  |
|---|--|
| <input type="checkbox"/> Anorexia or Bulimia                          | <input type="checkbox"/> Any Seizure Disorders       |
| <input type="checkbox"/> Asthma or Emphysema                          | <input checked="" type="checkbox"/> Cancer           |
| <input type="checkbox"/> End stage renal disease                      | <input type="checkbox"/> Inflammatory bowel diseases |
| <input type="checkbox"/> Hyperparathyroidism                          | <input type="checkbox"/> Hysterectomy                |
| <input type="checkbox"/> Other - Please specify: <input type="text"/> |  |

12. What was your maximum height (inches)?
13. Do you perform weight bearing exercise regularly?  Yes  No
14. Do you regularly consume dairy products?  Yes  No
15. Do you drink caffeinated beverages?  Yes  No

If female:

16. At what age did your period start?
17. Are you premenopausal?  Yes  No
18. How many full term pregnancies have you had?
19. Have you ever missed your period for more than 6 months in a row (not including pregnancy or menopause)?  Yes  No

Address:  
801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

Tel:  
813-349-7600

Fax:  
888-815-3533

**RESULT**

Patient  
Gordon Wayne Watts

DOB  
05/16/1966

Address  
2046 PLEASANT ACRE DR, ,  
PLANT CITY, FL 33566-7511

Phone  
863-688-9880

Ordered Date  
08/28/2023

Test Name  
L/S Spine, AP & Lat. (IN-HOUSE)

Assessments  
Lumbar pain

Name	Value	Reference Range
L/S Spine, AP and Lateral		

---

Result

Notes  
Camejo, Janet 08/28/2023 09:31:38 AM > X-Ray Done

Received Date  
08/29/2023

---

EXL: 1470.74

C:

80.00 KV

100 msec

40 mAs

GT:

IL: U

WP: AP

PS: 0.13 0.13 mm

L-Spine AP

L.Spine



WATTS, GORDON WAYNE  
5/16/1966  
577279  
M

EXI: 687.80  
C:  
90.00 KV  
200 msec  
80 mAs

GT:  
IL: U  
VP: LAT  
PS: 0.13 0.13 mm  
L-Spine LAT  
L-Spine



Address:  
801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

Tel:  
813-349-7600

Fax:  
888-815-3533

**RESULT**

Patient  
Gordon Wayne Watts

DOB  
05/16/1966

Address  
2046 PLEASANT ACRE DR, ,  
PLANT CITY, FL 33566-7511

Phone  
863-688-9880

Ordered Date  
06/21/2023

Test Name  
B-12 (1000 mcg/mL) IM - Give now  
x1

Assessments  
Chronic fatigue

Name	Value	Reference Range
------	-------	-----------------

Result  
Administered

Notes  
Rolon-MA, Arodi 06/21/2023 09:27:44 AM > done

Received Date  
06/21/2023



Watts, Gordon Wayne, M, 05/16/1966

863-688-9880

NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

813-349-7600

FINAL RESULT

Accession ID: <b>TM143068A</b>	Lab Ref ID: <b>5Q1A7888077</b>	
Order Date: <b>05/09/2023</b>	Received: <b>05/10/2023 05:30:10</b>	Specimen Received: <b>05/09/2023 21:38:00</b>
Collection Date: <b>05/09/2023 10:18:00</b>	Report: <b>05/10/2023 05:16:00</b>	
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>	

CBC with diff

NAME	VALUE	REFERENCE RANGE	LAB
F WHITE BLOOD CELL COUNT	4.9	3.8-10.8 (Thousand/uL)	TP
F RED BLOOD CELL COUNT	4.79	4.20-5.80 (Million/uL)	TP
F HEMOGLOBIN	15.4	13.2-17.1 (g/dL)	TP
F HEMATOCRIT	43.9	38.5-50.0 (%)	TP
F MCV	91.6	80.0-100.0 (fL)	TP
F MCH	32.2	27.0-33.0 (pg)	TP
F MCHC	35.1	32.0-36.0 (g/dL)	TP
F RDW	11.9	11.0-15.0 (%)	TP
F PLATELET COUNT	283	140-400 (Thousand/uL)	TP
F MPV	10.8	7.5-12.5 (fL)	TP
F ABSOLUTE NEUTROPHILS	2626	1500-7800 (cells/uL)	TP
F ABSOLUTE LYMPHOCYTES	1323	850-3900 (cells/uL)	TP
F ABSOLUTE MONOCYTES	466	200-950 (cells/uL)	TP
F ABSOLUTE EOSINOPHILS	417	15-500 (cells/uL)	TP
F ABSOLUTE BASOPHILS	69	0-200 (cells/uL)	TP
F NEUTROPHILS	53.6	(%)	TP
F LYMPHOCYTES	27.0	(%)	TP
F MONOCYTES	9.5	(%)	TP
F EOSINOPHILS	8.5	(%)	TP
F BASOPHILS	1.4	(%)	TP

Received Date: 202305092138
0
0 0 0
PERFORMING LAB: TP, Quest Diagnostics-Tampa 4225 E Fowler Ave, Tampa

FL

33617-2026 Weston H Rothrock MD

Result:

Accession ID:

TM143068A

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

## NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

### FINAL RESULT

Accession ID: **TM143068A**

Lab Ref ID: **5Q1A7888077**

Order Date: **05/09/2023**

Received: **05/10/2023 05:30:11**

Specimen Received: **05/09/2023 21:38:00**

Collection Date: **05/09/2023 10:18:00**

Report: **05/10/2023 05:16:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## Prostatic Specific Antigen, Total (PSA)

NAME	VALUE	REFERENCE RANGE	LAB
<b>F PSA, TOTAL</b>	<b>5.98 H</b>	<b>&lt; OR = 4.00 (ng/mL)</b>	<b>TP</b>
	<ul style="list-style-type: none"> <li>- The total PSA value from this assay system is</li> <li>- standardized against the WHO standard. The test</li> <li>- result will be approximately 20% lower when compared</li> <li>- to the equimolar-standardized total PSA (Beckman</li> <li>- Coulter). Comparison of serial PSA results should be</li> <li>- interpreted with this fact in mind.</li> <li>-</li> <li>- This test was performed using the Siemens</li> <li>- chemiluminescent method. Values obtained from</li> <li>- different assay methods cannot be used</li> <li>- interchangeably. PSA levels, regardless of</li> <li>- value, should not be interpreted as absolute</li> <li>- evidence of the presence or absence of disease.</li> </ul>		

Received Date: 202305092138

0

0 0 0

PERFORMING LAB: TP, Quest Diagnostics-Tampa

4225 E Fowler Ave, Tampa

FL

33617-2026 Weston H Rothrock MD

**Result:**

**Accession ID:**

TM143068A

**Notes:**



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

### NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

### FINAL RESULT

Accession ID: **TM143068A**

Lab Ref ID: **5Q1A7888077**

Order Date: **05/09/2023**

Received: **05/10/2023 05:30:10**

Specimen Received: **05/09/2023 21:38:00**

Collection Date: **05/09/2023 10:18:00**

Report: **05/10/2023 05:16:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## TSH, 3RD GENERATION W/REFLEX TO FT4

	NAME	VALUE	REFERENCE RANGE	LAB
F	TSH W/REFLEX TO FT4	1.12	0.40-4.50 (mIU/L)	TP

Received Date: 202305092138

0

0 0 0

PERFORMING LAB: TP, Quest Diagnostics-Tampa

4225 E Fowler Ave, Tampa

FL

33617-2026 Weston H Rothrock MD

Result:

Accession ID:

TM143068A

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM143068A</b>	Lab Ref ID: <b>5Q1A7888077</b>	
Order Date: <b>05/09/2023</b>	Received: <b>05/10/2023 05:30:09</b>	Specimen Received: <b>05/09/2023 21:38:00</b>
Collection Date: <b>05/09/2023 10:18:00</b>	Report: <b>05/10/2023 05:16:00</b>	
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>	

## Complete Metabolic Panel (14) (CMP)

NAME	VALUE	REFERENCE RANGE	LAB
F GLUCOSE	91	65-99 (mg/dL)	TP
	-		
	- Fasting		
	reference interval		
	-		
F <b>UREA NITROGEN (BUN)</b>	<b>5</b> L	<b>7-25 (mg/dL)</b>	<b>TP</b>
F CREATININE	0.87	0.70-1.30 (mg/dL)	TP
F EGFR	101	> OR = 60 (mL/min/1.73m2)	TP
	- The eGFR is based on the CKD-EPI 2021 equation. To calculate the new eGFR from a previous Creatinine or Cystatin C result, go to <a href="https://www.kidney.org/professionals/kdoqi/gfr%5Fcalculator">https://www.kidney.org/professionals/kdoqi/gfr%5Fcalculator</a>		
F BUN/CREATININE RATIO	6	6-22 ((calc))	TP
F SODIUM	141	135-146 (mmol/L)	TP
F POTASSIUM	4.3	3.5-5.3 (mmol/L)	TP
F CHLORIDE	104	98-110 (mmol/L)	TP
F CARBON DIOXIDE	27	20-32 (mmol/L)	TP
F CALCIUM	9.9	8.6-10.3 (mg/dL)	TP
F PROTEIN, TOTAL	7.4	6.1-8.1 (g/dL)	TP
F ALBUMIN	4.6	3.6-5.1 (g/dL)	TP
F GLOBULIN	2.8	1.9-3.7 (g/dL (calc))	TP
F ALBUMIN/GLOBULIN RATIO	1.6	1.0-2.5 ((calc))	TP
F BILIRUBIN, TOTAL	0.4	0.2-1.2 (mg/dL)	TP
F <b>ALKALINE PHOSPHATASE</b>	<b>145</b> H	<b>35-144 (U/L)</b>	<b>TP</b>

	NAME	VALUE	REFERENCE RANGE	LAB
F	AST	17	10-35 (U/L)	TP
F	ALT	10	9-46 (U/L)	TP

Received Date: 202305092138

0
0 0 0
PERFORMING LAB: TP, Quest Diagnostics-Tampa 4225 E Fowler Ave, Tampa FL 33617-2026 Weston H Rothrock MD

Result:

Accession ID:

TM143068A

Notes:



Watts, Gordon Wayne, M, 05/16/1966

863-688-9880

NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

813-349-7600

FINAL RESULT

Accession ID: <b>TM143069A</b>	Lab Ref ID: <b>5Q2F7888077</b>	
Order Date: <b>05/09/2023</b>	Received: <b>05/10/2023 11:30:05</b>	Specimen Received: <b>05/09/2023 21:39:00</b>
Collection Date: <b>05/09/2023 10:18:00</b>	Report: <b>05/10/2023 11:26:00</b>	
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>	

### Prostatic Specific Antigen (FREE AND TOTAL)

NAME	VALUE	REFERENCE RANGE	LAB
F <b>PSA, TOTAL</b>	<b>6.5</b> H	<b>&lt; OR = 4.0 (ng/mL)</b>	<b>TP</b>
F PSA, FREE	0.7	(ng/mL)	TP
F <b>PSA, % FREE</b>	<b>11</b> L	<b>&gt;25 (% (calc))</b>	<b>TP</b>

-  
- 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

NAME

VALUE

REFERENCE RANGE

LAB

- 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.  
-

Received Date: 202305092139

0

PERFORMING LAB: TP, Quest Diagnostics-Tampa  
4225 E Fowler Ave, Tampa  
FL  
33617-2026 Weston H Rothrock MD

Result:

Accession ID:

TM143069A

Notes:



Watts, Gordon Wayne, M, 05/16/1966

863-688-9880

NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

813-349-7600

FINAL RESULT

Accession ID: TM434602D

Lab Ref ID: 1A6535694

Order Date: 09/09/2021

Received: 09/13/2021 11:47:05

Collection Date: 09/09/2021 08:39:00

Report: 09/13/2021 11:43:00

Requesting Physician: Burns-Thigpen, Robin

Ordering Physician: Burns-Thigpen, Robin

CBC With Differential/Platelet

Table with 5 columns: NAME, VALUE, REFERENCE RANGE, LAB. Rows include: WHITE BLOOD CELL COUNT (5.4), RED BLOOD CELL COUNT (4.71), HEMOGLOBIN (15.1), HEMATOCRIT (44.5), MCV (94.5), MCH (32.1), MCHC (33.9), RDW (12.0), PLATELET COUNT (248), MPV (11.0), ABSOLUTE NEUTROPHILS (2403), ABSOLUTE LYMPHOCYTES (1577), ABSOLUTE MONOCYTES (502), ABSOLUTE EOSINOPHILS (837 H), ABSOLUTE BASOPHILS (81), NEUTROPHILS (44.5%), LYMPHOCYTES (29.2%), MONOCYTES (9.3%), EOSINOPHILS (15.5%), BASOPHILS (1.5%).

Received Date: 202109092240

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM434602D

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: **TM434602D**

Lab Ref ID: **1A6535694**

Order Date: **09/09/2021**

Received: **09/13/2021 11:47:05**

Collection Date: **09/09/2021 08:39:00**

Report: **09/13/2021 11:43:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## Magnesium, Serum

	NAME	VALUE	REFERENCE RANGE	LAB
F	MAGNESIUM	<b>2.3</b>	1.5-2.5 (mg/dL)	TP

Received Date: 202109092240

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM434602D

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM434602D</b>	Lab Ref ID: <b>1A6535694</b>
Order Date: <b>09/09/2021</b>	Received: <b>09/13/2021 11:47:04</b>
Collection Date: <b>09/09/2021 08:39:00</b>	Report: <b>09/13/2021 11:43:00</b>
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>

## Complete Metabolic Panel (14) (CMP)

NAME	VALUE	REFERENCE RANGE	LAB
<b>F</b> <b>GLUCOSE</b>	<b>112</b> H	<b>65-99 (mg/dL)</b>	<b>TP</b>
	-		
	- Fasting reference interval		
	-		
	- For someone without known diabetes, a glucose value		
	- between 100 and 125 mg/dL is consistent with		
	- prediabetes and should be confirmed with a		
	- follow-up test.		
	-		
F UREA NITROGEN (BUN)	7	7-25 (mg/dL)	TP
F CREATININE	1.04	0.70-1.33 (mg/dL)	TP
	- For patients >49 years of age, the reference limit		
	- for Creatinine is approximately 13% higher for people		
	- identified as African-American.		
	-		
F eGFR NON-AFR. AMERICAN	80	> OR = 60 (mL/min/1.73m2)	TP
F eGFR AFRICAN AMERICAN	93	> OR = 60 (mL/min/1.73m2)	TP
F BUN/CREATININE RATIO	NOT APPLICABLE	6-22 ((calc))	TP
F SODIUM	141	135-146 (mmol/L)	TP
F POTASSIUM	4.2	3.5-5.3 (mmol/L)	TP
F CHLORIDE	104	98-110 (mmol/L)	TP
F CARBON DIOXIDE	31	20-32 (mmol/L)	TP

	NAME	VALUE	REFERENCE RANGE	LAB
F	CALCIUM	9.8	8.6-10.3 (mg/dL)	TP
F	PROTEIN, TOTAL	7.0	6.1-8.1 (g/dL)	TP
F	ALBUMIN	4.5	3.6-5.1 (g/dL)	TP
F	GLOBULIN	2.5	1.9-3.7 (g/dL (calc))	TP
F	ALBUMIN/GLOBULIN RATIO	1.8	1.0-2.5 ((calc))	TP
F	BILIRUBIN, TOTAL	0.6	0.2-1.2 (mg/dL)	TP
F	ALKALINE PHOSPHATASE	76	35-144 (U/L)	TP
F	AST	26	10-35 (U/L)	TP
F	ALT	26	9-46 (U/L)	TP

Received Date: 202109092240

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM434602D

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

## NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

### FINAL RESULT

Accession ID: **TM434602D**

Lab Ref ID: **1A6535694**

Order Date: **09/09/2021**

Received: **09/13/2021 11:47:04**

Collection Date: **09/09/2021 08:39:00**

Report: **09/13/2021 11:43:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## Vitamin D, 1,25 Dihydroxy (CALCITROL)

	NAME	VALUE	REFERENCE RANGE	LAB
F	VITAMIN D, 1,25 (OH) <sub>2</sub> , TOTAL	<b>53</b>	18-72 (pg/mL)	AMD
F	VITAMIN D3, 1,25 (OH) <sub>2</sub>	<b>53</b>	(pg/mL)	AMD
F	VITAMIN D2, 1,25 (OH) <sub>2</sub>	<b>&lt;8</b>	(pg/mL)	AMD

- Vitamin D3, 1,25(OH)<sub>2</sub> indicates both endogenous - production and supplementation. Vitamin D2, 1,25(OH)<sub>2</sub> - is an indicator of exogenous sources, such as diet or - supplementation. Interpretation and therapy are based - on measurement of Vitamin D,1,25(OH)<sub>2</sub>, Total.

-

-

- This test was developed and its analytical - performance characteristics have been determined - by Quest Diagnostics Nichols Institute, Chantilly, VA.

- It has not been cleared or approved by the FDA. This - assay has been validated pursuant to the CLIA

NAME

VALUE

REFERENCE RANGE

LAB

- regulations and is  
used for clinical  
purposes.

-

Received Date: 202109092240

PERFORMING LAB: AMD, Quest Diagnostics/Nichols Chantilly-Chantilly VA, 14225 Newbrook Dr, Chantilly, VA, 20151-2228 Patrick W Mason M.D.,PhD

Result:

Accession ID:

TM434602D

Notes:



Watts, Gordon Wayne, M, 05/16/1966

863-688-9880

NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

813-349-7600

FINAL RESULT

Accession ID: TM722658Y

Lab Ref ID: 1A6361670

Order Date: 06/09/2021

Received: 06/10/2021 03:12:00

Collection Date: 06/09/2021 11:10:00

Report: 06/10/2021 03:09:00

Requesting Physician: Burns-Thigpen, Robin

Ordering Physician: Burns-Thigpen, Robin

CBC With Differential/Platelet

Table with 4 columns: NAME, VALUE, REFERENCE RANGE, LAB. Rows include: WHITE BLOOD CELL COUNT (5.2), RED BLOOD CELL COUNT (4.95), HEMOGLOBIN (15.8), HEMATOCRIT (46.3), MCV (93.5), MCH (31.9), MCHC (34.1), RDW (11.9), PLATELET COUNT (297), MPV (10.4), ABSOLUTE NEUTROPHILS (3193), ABSOLUTE LYMPHOCYTES (1284), ABSOLUTE MONOCYTES (406), ABSOLUTE EOSINOPHILS (244), ABSOLUTE BASOPHILS (73), NEUTROPHILS (61.4%), LYMPHOCYTES (24.7%), MONOCYTES (7.8%), EOSINOPHILS (4.7%), BASOPHILS (1.4%).

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM722658Y

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

## NEW PLANT CITY FAMILY CARE

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

### FINAL RESULT

Accession ID: **TM722658Y**

Lab Ref ID: **1A6361670**

Order Date: **06/09/2021**

Received: **06/10/2021 03:12:01**

Collection Date: **06/09/2021 11:10:00**

Report: **06/10/2021 03:09:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## Prostatic Specific Antigen, Total (PSA)

NAME	VALUE	REFERENCE RANGE	LAB
<b>F PSA, TOTAL</b>	<b>6.2 H</b>	<b>&lt; OR = 4.0 (ng/mL)</b>	<b>TP</b>
	<ul style="list-style-type: none"> <li>- The total PSA value from this assay system is</li> <li>- standardized against the WHO standard. The test</li> <li>- result will be approximately 20% lower when compared</li> <li>- to the equimolar-standardized total PSA (Beckman (Beckman</li> <li>- Coulter). Comparison of serial PSA results should be</li> <li>- interpreted with this fact in mind.</li> <li>-</li> <li>- This test was performed using the Siemens</li> <li>- chemiluminescent method. Values obtained from</li> <li>- different assay methods cannot be used</li> <li>- interchangeably. PSA levels, regardless of</li> <li>- value, should not be interpreted as absolute</li> <li>- evidence of the presence or absence of disease.</li> </ul>		

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

---

**Result:**

**Accession ID:**

TM722658Y

**Notes:**

Burns-Thigpen,Robin 06/11/2021

11:49:56 AM > refer to URology



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: **TM722658Y** Lab Ref ID: **1A6361670**

Order Date: **06/09/2021** Received: **06/10/2021 03:12:00**  
Collection Date: **06/09/2021 11:10:00** Report: **06/10/2021 03:09:00**  
Requesting Physician: **Burns-Thigpen, Robin** Ordering Physician: **Burns-Thigpen, Robin**

## Urinalysis, Complete includes microscopic, w/rflx Culture (3020)

NAME	VALUE	REFERENCE RANGE	LAB
F COLOR	<b>YELLOW</b>	YELLOW	TP
F APPEARANCE	<b>CLEAR</b>	CLEAR	TP
F SPECIFIC GRAVITY	<b>1.005</b>	1.001-1.035	TP
F PH	<b>7.5</b>	5.0-8.0	TP
F GLUCOSE	<b>NEGATIVE</b>	NEGATIVE	TP
F BILIRUBIN	<b>NEGATIVE</b>	NEGATIVE	TP
F KETONES	<b>NEGATIVE</b>	NEGATIVE	TP
F OCCULT BLOOD	<b>NEGATIVE</b>	NEGATIVE	TP
F PROTEIN	<b>NEGATIVE</b>	NEGATIVE	TP
F NITRITE	<b>NEGATIVE</b>	NEGATIVE	TP
F LEUKOCYTE ESTERASE	<b>NEGATIVE</b>	NEGATIVE	TP
F WBC	<b>NONE SEEN</b>	< OR = 5 (/HPF)	TP
F RBC	<b>NONE SEEN</b>	< OR = 2 (/HPF)	TP
F SQUAMOUS EPITHELIAL CELLS	<b>NONE SEEN</b>	< OR = 5 (/HPF)	TP
F BACTERIA	<b>NONE SEEN</b>	NONE SEEN (/HPF)	TP
F HYALINE CAST	<b>NONE SEEN</b>	NONE SEEN (/LPF)	TP
F REFLEXIVE URINE CULTURE			TP

- NO CULTURE INDICATED

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result: Accession ID: TM722658Y

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: **TM722658Y**

Lab Ref ID: **1A6361670**

Order Date: **06/09/2021**

Received: **06/10/2021 03:12:00**

Collection Date: **06/09/2021 11:10:00**

Report: **06/10/2021 03:09:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## TSH, 3RD GENERATION W/REFLEX TO FT4

	NAME	VALUE	REFERENCE RANGE	LAB
F	TSH W/REFLEX TO FT4	<b>2.46</b>	0.40-4.50 (mIU/L)	TP

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM722658Y

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM722658Y</b>	Lab Ref ID: <b>1A6361670</b>
Order Date: <b>06/09/2021</b>	Received: <b>06/10/2021 03:12:00</b>
Collection Date: <b>06/09/2021 11:10:00</b>	Report: <b>06/10/2021 03:09:00</b>
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>

## LIPID PANEL, Reflex DIRECT LDL

NAME	VALUE	REFERENCE RANGE	LAB
F CHOLESTEROL, TOTAL	153	<200 (mg/dL)	TP
F HDL CHOLESTEROL	48	> OR = 40 (mg/dL)	TP
F TRIGLYCERIDES	102	<150 (mg/dL)	TP
F LDL-CHOLESTEROL	85	(mg/dL (calc))	TP
	<ul style="list-style-type: none"> <li>- Reference range: &lt;100</li> <li>-</li> <li>- Desirable range &lt;100 mg/dL for primary prevention;</li> <li>- &lt;70 mg/dL for patients with CHD or diabetic patients</li> <li>- with &gt; or = 2 CHD risk factors.</li> <li>-</li> <li>- LDL-C is now calculated using the Martin-Hopkins</li> <li>- calculation, which is a validated novel method providing</li> <li>- better accuracy than the Friedewald equation in the</li> <li>- estimation of LDL-C.</li> <li>- Martin SS et al. JAMA. 2013;310(19): 2061-2068</li> <li>-</li> <li>(<a href="http://education.QuestDiagnostics.com/faq/FAQ164">http://education.QuestDiagnostics.com/faq/FAQ164</a>)</li> </ul>		
F CHOL/HDLC RATIO	3.2	<5.0 ((calc))	TP
F NON HDL CHOLESTEROL	105	<130 (mg/dL (calc))	TP
	<ul style="list-style-type: none"> <li>- For patients with diabetes plus 1 major ASCVD risk</li> </ul>		

NAME

VALUE

REFERENCE RANGE

LAB

- factor, treating to a  
non-HDL-C goal of <100  
mg/dL  
- (LDL-C of <70 mg/dL)  
is considered a  
therapeutic  
- option.

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM722658Y

Notes:



Watts, Gordon Wayne, M, 05/16/1966

☐ 863-688-9880

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM722658Y</b>	Lab Ref ID: <b>1A6361670</b>
Order Date: <b>06/09/2021</b>	Received: <b>06/10/2021 03:12:00</b>
Collection Date: <b>06/09/2021 11:10:00</b>	Report: <b>06/10/2021 03:09:00</b>
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>

## Complete Metabolic Panel (14) (CMP)

NAME	VALUE	REFERENCE RANGE	LAB
F GLUCOSE	<b>80</b>	65-99 (mg/dL)	TP
	- - Fasting reference interval -		
F <b>UREA NITROGEN (BUN)</b>	<b>4</b> L	<b>7-25 (mg/dL)</b>	<b>TP</b>
F CREATININE	<b>1.02</b>	0.70-1.33 (mg/dL)	TP
	- For patients >49 years of age, the reference limit - for Creatinine is approximately 13% higher for people - identified as African- American. -		
F eGFR NON-AFR. AMERICAN	<b>82</b>	> OR = 60 (mL/min/1.73m2)	TP
F eGFR AFRICAN AMERICAN	<b>95</b>	> OR = 60 (mL/min/1.73m2)	TP
F <b>BUN/CREATININE RATIO</b>	<b>4</b> L	<b>6-22 ((calc))</b>	<b>TP</b>
F SODIUM	<b>139</b>	135-146 (mmol/L)	TP
F POTASSIUM	<b>4.2</b>	3.5-5.3 (mmol/L)	TP
F CHLORIDE	<b>102</b>	98-110 (mmol/L)	TP
F CARBON DIOXIDE	<b>28</b>	20-32 (mmol/L)	TP
F CALCIUM	<b>9.6</b>	8.6-10.3 (mg/dL)	TP
F PROTEIN, TOTAL	<b>6.9</b>	6.1-8.1 (g/dL)	TP
F ALBUMIN	<b>4.5</b>	3.6-5.1 (g/dL)	TP
F GLOBULIN	<b>2.4</b>	1.9-3.7 (g/dL (calc))	TP
F ALBUMIN/GLOBULIN RATIO	<b>1.9</b>	1.0-2.5 ((calc))	TP
F BILIRUBIN, TOTAL	<b>0.4</b>	0.2-1.2 (mg/dL)	TP

	NAME	VALUE	REFERENCE RANGE	LAB
F	ALKALINE PHOSPHATASE	71	35-144 (U/L)	TP
F	AST	25	10-35 (U/L)	TP
F	ALT	14	9-46 (U/L)	TP

Received Date: 202106092147

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM722658Y

Notes:

Address:  
**801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652**

Tel:  
**813-349-7600**

Fax:  
**888-815-3533**

**RESULT**

Patient  
**Gordon Watts**

DOB  
**05/16/1966**

Address  
**2046 PLEASANT ACRE DR, ,  
PLANT CITY, FL 33566-7511**

Phone  
**863-687-6141**

Ordered Date  
**01/16/2020**

Test Name  
**Retinal Scan (IN-HOUSE)**

Assessments  
**Age-related nuclear cataract of eye**

Name	Value	Reference Range
------	-------	-----------------

Result

Notes

Received Date  
**01/16/2020**

Address:  
801 E. Baker Street 340B00129100SC,Plant City, FL 33563-3652

Tel:  
813-349-7600

Fax:  
888-815-3533

**RESULT**

Patient  
Gordon Watts

DOB  
05/16/1966

Address  
2046 PLEASANT ACRE DR, ,  
PLANT CITY, FL 33566-7511

Phone  
863-687-6141

Ordered Date  
01/14/2020

Test Name  
EKG, Electrocardiogram (IN-  
HOUSE)

Assessments  
History of cardiac arrhythmia

Name	Value	Reference Range
------	-------	-----------------

**Result**

Notes  
Sapp,Ariel 01/14/2020 02:45:28 PM > EKG DONE

Received Date  
01/14/2020



Watts, Gordon W, M, 05/16/1966

☐ 863-687-6141

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM963031Y</b>	Lab Ref ID: <b>1A5359749</b>
Order Date: <b>12/10/2019</b>	Received: <b>12/11/2019 11:46:05</b>
Collection Date: <b>12/10/2019 11:11:00</b>	Report: <b>12/11/2019 11:44:00</b>
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>

## Complete Metabolic Panel (14) (CMP)

NAME	VALUE	REFERENCE RANGE	LAB
F GLUCOSE	<b>82</b>	65-99 (mg/dL)	TP
	- - Fasting reference interval -		
F UREA NITROGEN (BUN)	<b>13</b>	7-25 (mg/dL)	TP
F CREATININE	<b>1.12</b>	0.70-1.33 (mg/dL)	TP
	- For patients >49 years of age, the reference limit - for Creatinine is approximately 13% higher for people - identified as African- American. -		
F eGFR NON-AFR. AMERICAN	<b>75</b>	> OR = 60 (mL/min/1.73m2)	TP
F eGFR AFRICAN AMERICAN	<b>86</b>	> OR = 60 (mL/min/1.73m2)	TP
F BUN/CREATININE RATIO	<b>NOT APPLICABLE</b>	6-22 ((calc))	TP
F SODIUM	<b>140</b>	135-146 (mmol/L)	TP
F POTASSIUM	<b>4.5</b>	3.5-5.3 (mmol/L)	TP
F CHLORIDE	<b>103</b>	98-110 (mmol/L)	TP
F CARBON DIOXIDE	<b>27</b>	20-32 (mmol/L)	TP
F CALCIUM	<b>9.5</b>	8.6-10.3 (mg/dL)	TP
F PROTEIN, TOTAL	<b>6.6</b>	6.1-8.1 (g/dL)	TP
F ALBUMIN	<b>4.1</b>	3.6-5.1 (g/dL)	TP
F GLOBULIN	<b>2.5</b>	1.9-3.7 (g/dL (calc))	TP
F ALBUMIN/GLOBULIN RATIO	<b>1.6</b>	1.0-2.5 ((calc))	TP
F BILIRUBIN, TOTAL	<b>0.7</b>	0.2-1.2 (mg/dL)	TP

	NAME	VALUE	REFERENCE RANGE	LAB
F	ALKALINE PHOSPHATASE	64	40-115 (U/L)	TP
F	AST	20	10-35 (U/L)	TP
F	ALT	16	9-46 (U/L)	TP

Received Date: 201912110607

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM963031Y

Notes:



Watts, Gordon W, M, 05/16/1966

☐ 863-687-6141

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: **TM963031Y**

Lab Ref ID: **1A5359749**

Order Date: **12/10/2019**

Received: **12/11/2019 11:46:05**

Collection Date: **12/10/2019 11:11:00**

Report: **12/11/2019 11:44:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## CBC With Differential/Platelet

NAME	VALUE	REFERENCE RANGE	LAB
F WHITE BLOOD CELL COUNT	4.9	3.8-10.8 (Thousand/uL)	TP
F RED BLOOD CELL COUNT	4.63	4.20-5.80 (Million/uL)	TP
F HEMOGLOBIN	14.8	13.2-17.1 (g/dL)	TP
F HEMATOCRIT	44.9	38.5-50.0 (%)	TP
F MCV	97.0	80.0-100.0 (fL)	TP
F MCH	32.0	27.0-33.0 (pg)	TP
F MCHC	33.0	32.0-36.0 (g/dL)	TP
F RDW	12.5	11.0-15.0 (%)	TP
F PLATELET COUNT	239	140-400 (Thousand/uL)	TP
F MPV	10.5	7.5-12.5 (fL)	TP
F ABSOLUTE NEUTROPHILS	2813	1500-7800 (cells/uL)	TP
F ABSOLUTE LYMPHOCYTES	1308	850-3900 (cells/uL)	TP
F ABSOLUTE MONOCYTES	461	200-950 (cells/uL)	TP
F ABSOLUTE EOSINOPHILS	260	15-500 (cells/uL)	TP
F ABSOLUTE BASOPHILS	59	0-200 (cells/uL)	TP
F NEUTROPHILS	57.4	(%)	TP
F LYMPHOCYTES	26.7	(%)	TP
F MONOCYTES	9.4	(%)	TP
F EOSINOPHILS	5.3	(%)	TP
F BASOPHILS	1.2	(%)	TP

Received Date: 201912110607

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM963031Y

Notes:



Watts, Gordon W, M, 05/16/1966

☐ 863-687-6141

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: **TM963031Y**

Lab Ref ID: **1A5359749**

Order Date: **12/10/2019**

Received: **12/11/2019 11:46:05**

Collection Date: **12/10/2019 11:11:00**

Report: **12/11/2019 11:44:00**

Requesting Physician: **Burns-Thigpen, Robin**

Ordering Physician: **Burns-Thigpen, Robin**

## TSH, 3RD GENERATION W/REFLEX TO FT4

	NAME	VALUE	REFERENCE RANGE	LAB
F	TSH W/REFLEX TO FT4	1.25	0.40-4.50 (mIU/L)	TP

Received Date: 201912110607

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

TM963031Y

Notes:



Watts, Gordon W, M, 05/16/1966

☐ 863-687-6141

**NEW PLANT CITY FAMILY CARE**

801 E. Baker Street 340B00129100SC, Plant City, FL 33563-3652

☐ 813-349-7600

FINAL RESULT

Accession ID: <b>TM963031Y</b>	Lab Ref ID: <b>1A5359749</b>
Order Date: <b>12/10/2019</b>	Received: <b>12/11/2019 11:46:04</b>
Collection Date: <b>12/10/2019 11:11:00</b>	Report: <b>12/11/2019 11:44:00</b>
Requesting Physician: <b>Burns-Thigpen, Robin</b>	Ordering Physician: <b>Burns-Thigpen, Robin</b>

## LIPID PANEL, Reflex DIRECT LDL

NAME	VALUE	REFERENCE RANGE	LAB
F CHOLESTEROL, TOTAL	172	<200 (mg/dL)	TP
F HDL CHOLESTEROL	51	>40 (mg/dL)	TP
F TRIGLYCERIDES	114	<150 (mg/dL)	TP
F <b>LDL-CHOLESTEROL</b>	<b>100</b> H	<b>(mg/dL (calc))</b>	<b>TP</b>
<ul style="list-style-type: none"> <li>- Reference range: &lt;100</li> <li>-</li> <li>- Desirable range &lt;100 mg/dL for primary prevention;</li> <li>- &lt;70 mg/dL for patients with CHD or diabetic patients</li> <li>- with &gt; or = 2 CHD risk factors.</li> <li>-</li> <li>- LDL-C is now calculated using the Martin-Hopkins</li> <li>- calculation, which is a validated novel method providing</li> <li>- better accuracy than the Friedewald equation in the</li> <li>- estimation of LDL-C.</li> <li>- Martin SS et al. JAMA. 2013;310(19): 2061-2068</li> <li>-</li> <li>(<a href="http://education.QuestDiagnostics.com/faq/FAQ164">http://education.QuestDiagnostics.com/faq/FAQ164</a>)</li> </ul>			
F CHOL/HDLC RATIO	3.4	<5.0 ((calc))	TP
F NON HDL CHOLESTEROL	121	<130 (mg/dL (calc))	TP
<ul style="list-style-type: none"> <li>- For patients with diabetes plus 1 major ASCVD risk</li> </ul>			

NAME

VALUE

REFERENCE RANGE

LAB

- factor, treating to a  
non-HDL-C goal of <100  
mg/dL  
- (LDL-C of <70 mg/dL)  
is considered a  
therapeutic  
- option.

Received Date: 201912110607

PERFORMING LAB: TP, Quest Diagnostics-Tampa, 4225 E Fowler Ave, Tampa, FL, 33617-2026 Glen L Hortin

Result:

Accession ID:

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Notes: