# JANET H. LEE D.O.

SUITE 116
25550 HAWTHORNE BLVD
TORRANCE, CA 90505-6831

(310) 540-1712

**BERGSTROM,KRISTOFER**

| Diagnostic Test / Results | Result Code | Results | Out of Range | Flag | Units | Range | Site | Stat |
|---|---|---|---|---|---|---|---|---|
| **HS CRP, COMPREHENSIVE METABOLIC PANEL, CHLAMYDIA/N. GONORRHOEAE RNA, TMA, UROGENITAL, VITAMIN D,25-OH,TOTAL,IA, T3, FREE, HEMOGLOBIN A1c, HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM, IRON, TOTAL, MAGNESIUM, CBC (INCLUDES DIFF/PLT), HSV 1/2 IGG,TYPE SPECIFIC AB, LIPID PANEL, STANDARD, LIPID PANEL, STANDARD, LIPID PANEL, STANDARD, LIPID PANEL, STANDARD, LIPID PANEL, STANDARD, LIPID PANEL, STANDARD, URINALYSIS REFLEX, RPR (MONITOR) W/REFL TITER, HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR, T4, FREE, TESTOSTERONE, TOTAL, MALES (ADULT), IA, TSH, URIC ACID, HSV 1/2 AB (IGM), IFA W/RFL TO TITER, HIV 1/2 ANTIGEN/ANTIBODY,FOURTH GENERATION W/RFL, VITAMIN B12, Enhanced PDF Report EN802365K-1** | | | | | **Provider Name** LEE,JANET H | | **Date of Result** 7/14/2021 | |
| HIV 1+2 Ab+HIV1 p24 Ag SerPl Ql IA | 56888-1 | HIV-1 antigen and HIV-1/HIV-2 antibodies were not detected. There is no laboratory evidence of HIV infection. PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose. For additional information please refer to http://education.questdiagnostics.com /faq/FAQ106 (This link is being provided for informational/ educational purposes only.) The performance of this assay has not been clinically validated in patients less than 2 years old. | - | - | - | - | - | - |
| Testost SerPl-mCnc | 2986-8 | 745 | - | - | ng/dL | 250-827 | EN | F |
| HSV1 IgM Ser Ql IF | 40466-5 | NEGATIVE | - | - | - | - | TXC | F |
| HSV2 IgM Ser Ql IF | 45210-2 | NEGATIVE | - | - | - | - | TXC | F |
| HSV2 IgM Ser Ql IF | 45210-2 | REFERENCE RANGE: NEGATIVE The IFA procedure for measuring IgM antibodies to HSV 1 and HSV 2 detects both type-common and type- specific HSV antibodies. Thus, IgM reactivity to both HSV 1 and HSV 2 may represent crossreactive HSV antibodies rather than exposure to both HSV 1 and HSV 2. This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Infectious Disease. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. | - | - | - | - | - | - |
| C trach rRNA Spec Ql NAA+probe | 43304-5 | NOT DETECTED | - | - | - | NOT DETECTED | EN | F |
| N gonorrhoea rRNA Spec Ql NAA+probe | 43305-2 | NOT DETECTED | - | - | - | NOT DETECTED | EN | F |
| | __ResultCode__ | SEE NOTES | - | - | - | - | EN | F |

| Diagnostic Test / Results | Result Code | Results | Out of Range | Flag | Units | Range | Site | Stat |
|---|---|---|---|---|---|---|---|---|
| | __ResultCode__ | The analytical performance characteristics of this assay, when used to test SurePath(TM) specimens have been determined by Quest Diagnostics. The modifications have not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. For additional information, please refer to https://education.questdiagnostics.com /faq/FAQ154 (This link is being provided for information/ educational purposes only.) | - | - | - | - | - | - |
| RPR Ser Ql | 20507-0 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| Cholest SerPl-mCnc | 2093-3 | 143 | - | - | mg/dL | <200 | EN | F |
| HDLc SerPl-mCnc | 2085-9 | 71 | - | - | mg/dL | > OR = 40 | EN | F |
| Trigl SerPl-mCnc | 2571-8 | 54 | - | - | mg/dL | <150 | EN | F |
| LDLc SerPl Calc-mCnc | 13457-7 | 59 | - | - | mg/dL (calc) | - | EN | F |
| LDLc SerPl Calc-mCnc | 13457-7 | Reference range: <100 Desirable range <100 mg/dL for primary prevention; <70 mg/dL for patients with CHD or diabetic patients with > or = 2 CHD risk factors. LDL-C is now calculated using the Martin-Hopkins calculation, which is a validated novel method providing better accuracy than the Friedewald equation in the estimation of LDL-C. Martin SS et al. JAMA. 2013;310(19): 2061-2068 (http://education.QuestDiagnostics.com /faq/FAQ164) | - | - | - | - | - | - |
| Cholest/HDLc SerPl | 9830-1 | 2.0 | - | - | (calc) | <5.0 | EN | F |
| NonHDLc SerPl-mCnc | 43396-1 | 72 | - | - | mg/dL (calc) | <130 | EN | F |
| NonHDLc SerPl-mCnc | 43396-1 | For patients with diabetes plus 1 major ASCVD risk factor, treating to a non-HDL-C goal of <100 mg/dL (LDL-C of <70 mg/dL) is considered a therapeutic option. | - | - | - | - | - | - |
| CRP SerPl HS-mCnc | 30522-7 | 0.5 | - | - | mg/L | - | EN | F |
| CRP SerPl HS-mCnc | 30522-7 | Reference Range Optimal <1.0 Jellinger PS et al. Endocr Pract.2017;23(Suppl 2):1-87. For ages >17 Years: hs-CRP mg/L Risk According to AHA/CDC Guidelines <1.0 Lower relative cardiovascular risk. 1.0-3.0 Average relative cardiovascular risk. 3.1-10.0 Higher relative cardiovascular risk. Consider retesting in 1 to 2 weeks to exclude a benign transient elevation in the baseline CRP value secondary to infection or inflammation. >10.0 Persistent elevation, upon retesting, may be associated with infection and inflammation. | - | - | - | - | - | - |
| Glucose SerPl-mCnc | 2345-7 | 79 | - | - | mg/dL | 65-99 | EN | F |
| Glucose SerPl-mCnc | 2345-7 | Fasting reference interval | - | - | - | - | - | - |
| BUN SerPl-mCnc | 3094-0 | 10 | - | - | mg/dL | 7-25 | EN | F |
| Creat SerPl-mCnc | 2160-0 | 1.16 | - | - | mg/dL | 0.60-1.35 | EN | F |
| GFR/BSA pred.nonblk SerPl CKD-EPI-ArVRat | 88294-4 | 76 | - | - | mL/min /1.73m2 | > OR = 60 | EN | F |
| GFR/BSA pred.blk SerPlBld CKD-EPI-ArVRat | 88293-6 | 88 | - | - | mL/min /1.73m2 | > OR = 60 | EN | F |
| BUN/Creat SerPl | 3097-3 | NOT APPLICABLE | - | - | (calc) | 6-22 | EN | F |
| Sodium SerPl-sCnc | 2951-2 | 142 | - | - | mmol/L | 135-146 | EN | F |

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|---|---|---|---|---|---|---|---|---|
| Potassium SerPl-sCnc | 2823-3 | 4.2 | - | - | mmol/L | 3.5-5.3 | EN | F |
| Chloride SerPl-sCnc | 2075-0 | 105 | - | - | mmol/L | 98-110 | EN | F |
| CO2 SerPl-sCnc | 2028-9 | - | 18 | - | mmol/L | 20-32 | EN | F |
| Calcium SerPl-mCnc | 17861-6 | 9.5 | - | - | mg/dL | 8.6-10.3 | EN | F |
| Prot SerPl-mCnc | 2885-2 | 6.9 | - | - | g/dL | 6.1-8.1 | EN | F |
| Albumin SerPl-mCnc | 1751-7 | 4.4 | - | - | g/dL | 3.6-5.1 | EN | F |
| Globulin Ser Calc-mCnc | 10834-0 | 2.5 | - | - | g/dL (calc) | 1.9-3.7 | EN | F |
| Albumin/Glob SerPl | 1759-0 | 1.8 | - | - | (calc) | 1.0-2.5 | EN | F |
| Bilirub SerPl-mCnc | 1975-2 | 0.9 | - | - | mg/dL | 0.2-1.2 | EN | F |
| ALP SerPl-cCnc | 6768-6 | 61 | - | - | U/L | 36-130 | EN | F |
| AST SerPl-cCnc | 1920-8 | 20 | - | - | U/L | 10-40 | EN | F |
| ALT SerPl-cCnc | 1742-6 | 16 | - | - | U/L | 9-46 | EN | F |
| HbA1c MFr Bld | 4548-4 | 4.9 | - | - | % of total Hgb | <5.7 | EN | F |
| HbA1c MFr Bld | 4548-4 | For the purpose of screening for the presence of diabetes: <5.7% Consistent with the absence of diabetes 5.7-6.4% Consistent with increased risk for diabetes (prediabetes) > or =6.5% Consistent with diabetes This assay result is consistent with a decreased risk of diabetes. Currently, no consensus exists regarding use of hemoglobin A1c for diagnosis of diabetes in children. According to American Diabetes Association (ADA) guidelines, hemoglobin A1c <7.0% represents optimal control in non-pregnant diabetic patients. Different metrics may apply to specific patient populations. Standards of Medical Care in Diabetes(ADA). | - | - | - | - | - | - |
| 25(OH)D3 SerPl-mCnc | 1989-3 | 37 | - | - | ng/mL | 30-100 | EN | F |
| 25(OH)D3 SerPl-mCnc | 1989-3 | Vitamin D Status 25-OH Vitamin D: Deficiency: <20 ng/mL Insufficiency: 20 - 29 ng/mL Optimal: > or = 30 ng/mL For 25-OH Vitamin D testing on patients on D2-supplementation and patients for whom quantitation of D2 and D3 fractions is required, the QuestAssureD(TM) 25-OH VIT D, (D2,D3), LC/MS/MS is recommended: order code 92888 (patients >2yrs). See Note 1 Note 1 For additional information, please refer to http://education.QuestDiagnostics.com /faq/FAQ199 (This link is being provided for informational/ educational purposes only.) | - | - | - | - | - | - |
| Magnesium SerPl-mCnc | 19123-9 | 2.0 | - | - | mg/dL | 1.5-2.5 | EN | F |
| Urate SerPl-mCnc | 3084-1 | 4.5 | - | - | mg/dL | 4.0-8.0 | EN | F |
| Urate SerPl-mCnc | 3084-1 | Therapeutic target for gout patients: <6.0 mg/dL | - | - | - | - | - | - |
| TSH SerPl-aCnc | 3016-3 | 3.15 | - | - | mIU/L | 0.40-4.50 | EN | F |
| T4 Free SerPl-mCnc | 3024-7 | 1.1 | - | - | ng/dL | 0.8-1.8 | EN | F |
| T3Free SerPl-mCnc | 3051-0 | 3.1 | - | - | pg/mL | 2.3-4.2 | EN | F |
| WBC # Bld Auto | 6690-2 | - | 3.2 | - | Thousand/uL | 3.8-10.8 | EN | F |
| RBC # Bld Auto | 789-8 | 4.70 | - | - | Million/uL | 4.20-5.80 | EN | F |
| Hgb Bld-mCnc | 718-7 | 14.6 | - | - | g/dL | 13.2-17.1 | EN | F |
| Hct VFr Bld Auto | 4544-3 | 43.7 | - | - | % | 38.5-50.0 | EN | F |
| MCV RBC Auto | 787-2 | 93.0 | - | - | fL | 80.0-100.0 | EN | F |
| MCH RBC Qn Auto | 785-6 | 31.1 | - | - | pg | 27.0-33.0 | EN | F |

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| MCHC RBC Auto-mCnc | 786-4 | 33.4 | - | - | g/dL | 32.0-36.0 | EN | F |
| RDW RBC Auto-Rto | 788-0 | 12.1 | - | - | % | 11.0-15.0 | EN | F |
| Platelet # Bld Auto | 777-3 | 170 | - | - | Thousand/uL | 140-400 | EN | F |
| PMV Bld Rees-Ecker | 776-5 | 11.9 | - | - | fL | 7.5-12.5 | EN | F |
| Neutrophils # Bld Auto | 751-8 | 1654 | - | - | cells/uL | 1500-7800 | EN | F |
| Neuts Band # Bld | 26507-4 | DNR | - | - | cells/uL | 0-750 | EN | X |
| Metamyelocytes # Bld | 30433-7 | DNR | - | - | cells/uL | 0 | EN | X |
| Myelocytes # Bld | 30446-9 | DNR | - | - | cells/uL | 0 | EN | X |
| Promyelocytes # Bld | 26523-1 | DNR | - | - | cells/uL | 0 | EN | X |
| Lymphocytes # Bld Auto | 731-0 | 1107 | - | - | cells/uL | 850-3900 | EN | F |
| Monocytes # Bld Auto | 742-7 | 310 | - | - | cells/uL | 200-950 | EN | F |
| Eosinophil # Bld Auto | 711-2 | 99 | - | - | cells/uL | 15-500 | EN | F |
| Basophils # Bld Auto | 704-7 | 29 | - | - | cells/uL | 0-200 | EN | F |
| Blasts # Bld | 30376-8 | DNR | - | - | cells/uL | 0 | EN | X |
| nRBC # Bld | 30392-5 | 0 | - | - | cells/uL | 0 | EN | F |
| Neutrophils/leuk NFr Bld Auto | 770-8 | 51.7 | - | - | % | - | EN | F |
| Neuts Band/leuk NFr Bld Manual | 764-1 | DNR | - | - | % | - | EN | X |
| Metamyelocytes/leuk NFr Bld Manual | 740-1 | DNR | - | - | % | - | EN | X |
| Myelocytes/leuk NFr Bld Manual | 749-2 | DNR | - | - | % | - | EN | X |
| Promyelocytes/leuk NFr Bld Manual | 783-1 | DNR | - | - | % | - | EN | X |
| Lymphocytes/leuk NFr Bld Auto | 736-9 | 34.6 | - | - | % | - | EN | F |
| Variant Lymphs/leuk NFr Bld | 13046-8 | DNR | - | - | % | 0-10 | EN | X |
| Monocytes/leuk NFr Bld Auto | 5905-5 | 9.7 | - | - | % | - | EN | F |
| Eosinophil/leuk NFr Bld Auto | 713-8 | 3.1 | - | - | % | - | EN | F |
| Basophils/leuk NFr Bld Auto | 706-2 | 0.9 | - | - | % | - | EN | F |
| Blasts/leuk NFr Bld Manual | 709-6 | DNR | - | - | % | - | EN | X |
| nRBC/100 WBC Bld-Rto | 19048-8 | DNR | - | - | /100 WBC | 0 | EN | X |
| Service Cmnt-Imp | 8251-1 | DNR | - | - | - | - | EN | X |
| Color Ur | 5778-6 | DARK YELLOW | - | - | - | YELLOW | EN | F |
| Color Ur | 5778-6 | The preferred specimen for urinalysis is urine preserved using a Quest standard urine preservative tube (yellow capped, blue band) that may be obtained from your Quest Diagnostics supplier. Please review results with caution. Urinalysis testing on unpreserved urine may produce alteration of chemical constituents and deterioration of formed elements. | - | - | - | - | - | - |
| Appearance Ur | 5767-9 | CLEAR | - | - | - | CLEAR | EN | F |
| Sp Gr Ur Strip | 5811-5 | 1.029 | - | - | - | 1.001-1.035 | EN | F |

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| pH Ur Strip | 5803-2 | < OR = 5.0 | - | - | - | 5.0-8.0 | EN | F |
| Glucose Ur Ql Strip | 25428-4 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| Bilirub Ur Ql Strip | 5770-3 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| Ketones Ur Ql Strip | 2514-8 | - | TRACE | - | - | NEGATIVE | EN | F |
| Hgb Ur Ql Strip | 5794-3 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| Prot Ur Ql Strip | 20454-5 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| Nitrite Ur Ql Strip | 5802-4 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| Leukocyte esterase Ur Ql Strip | 5799-2 | NEGATIVE | - | - | - | NEGATIVE | EN | F |
| WBC #/area UrnS HPF | 5821-4 | DNR | - | - | /HPF | < OR = 5 | EN | X |
| RBC #/area UrnS HPF | 13945-1 | DNR | - | - | /HPF | < OR = 2 | EN | X |
| Squamous #/area UrnS HPF | 11277-1 | DNR | - | - | /HPF | < OR = 5 | EN | X |
| Trans Cells #/area UrnS HPF | 30089-7 | DNR | - | - | /HPF | < OR = 5 | EN | X |
| Renal Epi Cells #/area UrnS HPF | 26052-1 | DNR | - | - | /HPF | < OR = 3 | EN | X |
| Bacteria #/area UrnS HPF | 5769-5 | DNR | - | - | /HPF | NONE SEEN | EN | X |
| CaOx Cry #/area UrnS HPF | 25148-8 | DNR | - | - | /HPF | NONE OR FEW | EN | X |
| Tri-Phos Cry #/area UrnS HPF | 46137-6 | DNR | - | - | /HPF | NONE OR FEW | EN | X |
| Urate Cry #/area UrnS HPF | 46138-4 | DNR | - | - | /HPF | NONE OR FEW | EN | X |
| Amorph Sed UrnS Ql Micro | 8246-1 | DNR | - | - | /HPF | NONE OR FEW | EN | X |
| Crystals #/area UrnS HPF | 38459-4 | DNR | - | - | /HPF | NONE SEEN | EN | X |
| Hyaline Casts #/area UrnS LPF | 5796-8 | DNR | - | - | /LPF | NONE SEEN | EN | X |
| Gran Casts #/area UrnS LPF | 5793-5 | DNR | - | - | /LPF | NONE SEEN | EN | X |
| Casts #/area UrnS LPF | 9842-6 | DNR | - | - | /LPF | NONE SEEN | EN | X |
| Yeast #/area UrnS HPF | 5822-2 | DNR | - | - | /HPF | NONE SEEN | EN | X |
| Service Cmnt-Imp | 8251-1 | DNR | - | - | - | - | EN | X |
| Iron SerPl-mCnc | 2498-4 | 128 | - | - | mcg/dL | 50-180 | EN | F |
| Vit B12 SerPl-mCnc | 2132-9 | - | 1460 | - | pg/mL | 200-1100 | EN | F |
| HBV surface Ag SerPl Ql IA | 5196-1 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| HBV surface Ag SerPl Ql Nt | 7905-3 | DNR | - | - | - | - | EN | X |
| HCV Ab SerPl Ql IA | 13955-0 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| HCV Ab s/co SerPl IA | 48159-8 | 0.00 | - | - | - | <1.00 | EN | F |

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| HCV Ab s/co SerPl IA | 48159-8 | HCV antibody was non-reactive. There is no laboratory evidence of HCV infection. In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested. For additional information please refer to http://education.questdiagnostics.com /faq/FAQ22v1 (This link is being provided for informational/ educational purposes only.) | - | - | - | - | - | - |
| HSV1 IgG Ser IA-aCnc | 5206-8 | - | 2.02 | - | index | - | EN | F |
| HSV2 IgG Ser IA-aCnc | 5209-2 | <0.90 | - | - | index | - | EN | F |
| HSV2 IgG Ser IA-aCnc | 5209-2 | Index Interpretation ----- ---------- <0.90 Negative 0.90-1.09 Equivocal >1.09 Positive This assay utilizes recombinant type-specific antigens to differentiate HSV-1 from HSV-2 infections. A positive result cannot distinguish between recent and past infection. If recent HSV infection is suspected but the results are negative or equivocal, the assay should be repeated in 4-6 weeks. The performance characteristics of the assay have not been established for pediatric populations, immunocompromised patients, or neonatal screening. | - | - | - | - | - | - |
| HIV 1+2 Ab+HIV1 p24 Ag SerPl Ql IA | 56888-1 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| **CHLAMYDIA/N. GONORRHOEAE RNA, TMA, UROGENITAL, HEPATITIS B SURFACE ANTIGEN W/REFL CONFIRM, HSV 1/2 IGG,TYPE SPECIFIC AB, RPR (MONITOR) W/REFL TITER, HEPATITIS C AB W/REFL TO HCV RNA, QN, PCR, HSV 1/2 AB (IGM), IFA W/RFL TO TITER, HIV 1/2 ANTIGEN/ANTIBODY,FOURTH GENERATION W/RFL, Enhanced PDF Report EN797371N-1** | | | | | **Provider Name** LEE,JANET H | | **Date of Result** 9/24/2021 | |
| HBV surface Ag SerPl Ql IA | 5196-1 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| HBV surface Ag SerPl Ql Nt | 7905-3 | DNR | - | - | - | - | EN | X |
| HCV Ab SerPl Ql IA | 13955-0 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| HCV Ab s/co SerPl IA | 48159-8 | 0.01 | - | - | - | <1.00 | EN | F |
| HCV Ab s/co SerPl IA | 48159-8 | HCV antibody was non-reactive. There is no laboratory evidence of HCV infection. In most cases, no further action is required. However, if recent HCV exposure is suspected, a test for HCV RNA (test code 35645) is suggested. For additional information please refer to http://education.questdiagnostics.com /faq/FAQ22v1 (This link is being provided for informational/ educational purposes only.) | - | - | - | - | - | - |
| HSV1 IgG Ser IA-aCnc | 5206-8 | - | 2.11 | - | index | - | EN | F |
| HSV2 IgG Ser IA-aCnc | 5209-2 | <0.90 | - | - | index | - | EN | F |

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| HSV2 IgG Ser IA-aCnc | 5209-2 | Index Interpretation ----- ---------- <0.90 Negative 0.90-1.09 Equivocal >1.09 Positive This assay utilizes recombinant type-specific antigens to differentiate HSV-1 from HSV-2 infections. A positive result cannot distinguish between recent and past infection. If recent HSV infection is suspected but the results are negative or equivocal, the assay should be repeated in 4-6 weeks. The performance characteristics of the assay have not been established for pediatric populations, immunocompromised patients, or neonatal screening. | - | - | - | - | - | - |
| HIV 1+2 Ab+HIV1 p24 Ag SerPl Ql IA | 56888-1 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |
| HIV 1+2 Ab+HIV1 p24 Ag SerPl Ql IA | 56888-1 | HIV-1 antigen and HIV-1/HIV-2 antibodies were not detected. There is no laboratory evidence of HIV infection. PLEASE NOTE: This information has been disclosed to you from records whose confidentiality may be protected by state law. If your state requires such protection, then the state law prohibits you from making any further disclosure of the information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. A general authorization for the release of medical or other information is NOT sufficient for this purpose. For additional information please refer to http://education.questdiagnostics.com /faq/FAQ106 (This link is being provided for informational/ educational purposes only.) The performance of this assay has not been clinically validated in patients less than 2 years old. | - | - | - | - | - | - |
| HSV1 IgM Ser Ql IF | 40466-5 | NEGATIVE | - | - | - | - | TXC | F |
| HSV2 IgM Ser Ql IF | 45210-2 | NEGATIVE | - | - | - | - | TXC | F |
| HSV2 IgM Ser Ql IF | 45210-2 | REFERENCE RANGE: NEGATIVE The IFA procedure for measuring IgM antibodies to HSV 1 and HSV 2 detects both type-common and type- specific HSV antibodies. Thus, IgM reactivity to both HSV 1 and HSV 2 may represent crossreactive HSV antibodies rather than exposure to both HSV 1 and HSV 2. This test was developed and its analytical performance characteristics have been determined by Quest Diagnostics Infectious Disease. It has not been cleared or approved by FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. | - | - | - | - | - | - |
| C trach rRNA Spec Ql NAA+probe | 43304-5 | NOT DETECTED | - | - | - | NOT DETECTED | EN | F |
| N gonorrhoea rRNA Spec Ql NAA+probe | 43305-2 | NOT DETECTED | - | - | - | NOT DETECTED | EN | F |
| | __ResultCode__ | SEE NOTES | - | - | - | - | EN | F |

| Diagnostic Test / Results | Result Code | Results | Out of Range | Flag | Units | Range | Site | Stat |
|---|---|---|---|---|---|---|---|---|
| | __ResultCode__ | The analytical performance characteristics of this assay, when used to test SurePath(TM) specimens have been determined by Quest Diagnostics. The modifications have not been cleared or approved by the FDA. This assay has been validated pursuant to the CLIA regulations and is used for clinical purposes. For additional information, please refer to https://education.questdiagnostics.com /faq/FAQ154 (This link is being provided for information/ educational purposes only.) | - | - | - | - | - | - |
| RPR Ser Ql | 20507-0 | NON-REACTIVE | - | - | - | NON-REACTIVE | EN | F |