



Patient Information	Specimen Information	Client Information		
SMITH, JOHN A	Specimen: CARDIOALL Requisition: 0000000	Client #: 18894 0000P M. YYYY LON		
DOB: 08/08/1952 AGE: 66 Gender: M Phone: NG Patient ID: RRR	Lab Ref #: XXXXX Collected: 10/22/2018 / 08:02 AST Received: 10/24/2018 / 00:37 AST Reported: 10/26/2018 / 22:50 AST	QUEST DIAGNOSTICS Attn: UNIVERSIDAD 107 AVE ORTEGON STE 203 EDIF XXX XXXX XXXX, PR 00966-2517		

Cardio IQ®							
	Current		Risk/Reference Interval				Historical
Test Name	Resul Optimal	t & Risk Non-Optimal	Optimal	Moderate	High	Units	Result & Risk
LIPID PANEL							
CHOLESTEROL, TOTAL	153		<200	N/A	>=200	mg/dL	
HDL CHOLESTEROL	42		>=40	N/A	<40	mg/dL	
TRIGLYCERIDES	83		<150	150-199	>=200	mg/dL	
LDL-CHOLESTEROL	83		<100	100-129	>129	mg/dL	
CHOL/HDLC RATIO	2.7		<=3.5	3.6-5.0	>5.0	calc	
NON-HDL CHOLESTEROL	111		<130	130-189	>190	mg/dL (calc)	
LIPOPROTEIN FRACTIONA	TION, ION M	IOBILITY					
LDL PARTICLE NUMBER		1203	<1138	1138-1409	>1409	nmol/L	
LDL SMALL		236	<142	142-219	>219	nmol/L	
LDL MEDIUM		373	<215	215-301	>301	nmol/L	
HDL LARGE	9454		>6729	6729-5353	<5353	nmol/L	
LIPOPROTEIN SUBFRACTI	IONS						
HDL2b	33		>26	18-26	<18	%	
sdLDL		23	<=40.0	NA	>40.0	mg/dL	
APOLIPOPROTEINS							
APOLIPOPROTEIN A1		78	>=115	NA	<115	mg/dL	
APOLIPOPROTEIN B		110	<90	90-119	>120	mg/dL	
APOLIPOPROTEIN B/A1 RATIO	C	1.4	<0.77	0.77-0.95	>0.95		
LIPOPROTEIN (a)	54		<75	75-125	>125	nmol/L	

CLIENT SERVICES: 866.697.8378

### SPECIMEN: CARDIOALL

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	Current		Risk/Reference Interval				Historical
Test Name	Result & Optimal N		Optimal	Moderate	High	Units –	Result & Risk
						·,	
INFLAMMATION HS CRP		4.5	<1.0	1.0-3.0	>3.0		
		4.5	<1.0	1.0-3.0		mg/L 	
LP PLA2 ACTIVITY	82		<=123	N/A	>123	min/mL	
FIBRINOGEN ANTIGEN	268	_	<350	N/A	>=350	mg/dL	
MYELOPEROXIDASE	227		<470	470-539	>=540	pmol/L	
OxLDL	39		<60	60-69	>=70	U/L	
F2-ISOPROSTANE/CREAT RATIO	0.29		<0.86	N/A	>=0.86	ng/mg	
F2-ISOPROSTANE	0.6	7		<0.86		ng/mL	
CREATININE, URINE	234.2			20.0-300.0		mg/dL	
ADMA	88		<100	100-123	>123	ng/mL	
SDMA	100			73-135		ng/mL	
METABOLIC MARKERS							
GLUCOSE		111	65-99	100-125	>=126	mg/dL	
HEMOGLOBIN A1c	5.5		<=5.6	5.7-6.4	>=6.5	% of total Hgb	
INSULIN	17.5		<23	N/A	>=23	ulU/mL	
VITAMIN D, 25-OH, TOTAL		25	>=30	20-29	<20	ng/mL	
VITAMIN D, 25-OH, D3	25					ng/mL	
VITAMIN D, 25-OH, D2	<4					ng/mL	
TMAO (TRIMETHYLAMINE N OXIDE)	4.5		<6.2	6.2-9.9	>=10.0	uM	

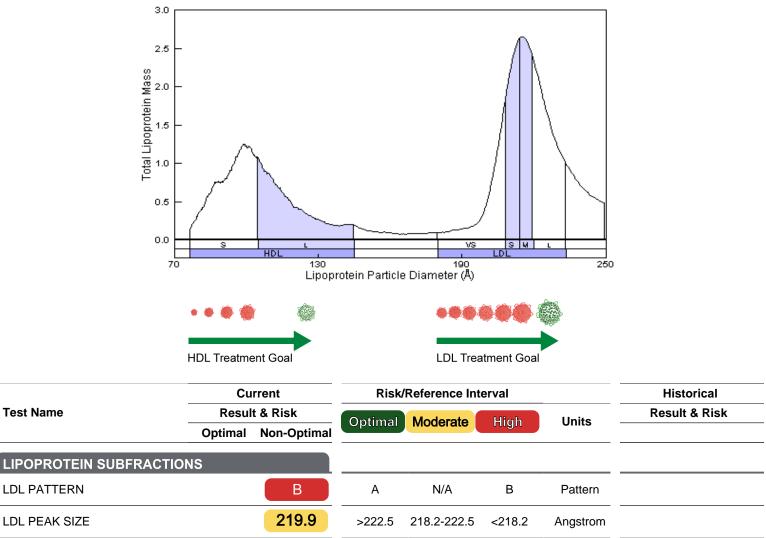
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### LIPID SUBCLASS DETAIL FROM ION MOBILITY



High Tertile cut-points are based on a reference range population. Risk of CVD events is based on a reanalysis (unpublished) of the data presented in Musunuru et al. ATVB 2009;29:1975-80.



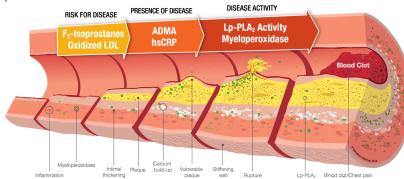


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#### INFLAMMATION SUMMARY

# Your medical provider has gone beyond standard testing to examine your inflammation levels so you can Know Your Risk® for heart attack and stroke!

Lowering blood pressure, blood sugar and cholesterol reduces risk, but 50% of heart attack or stroke victims have normal cholesterol levels. Measuring inflammation levels can help identify hidden risk so your provider can catch the beginning or treat advanced stages of vascular disease. Always review your results and treatment considerations with your medical provider.



**Disclaimer:** The information provided here is for educational purposes only, and the results provided should be reviewed and interpreted by the treating physician. This Inflammation Summary is generated when three or more of the inflammation tests listed below are ordered, or for repeat tests due to a sample problem.

Risk for Diseas	se	Presence of Disease		Disease Activity	
Test	Result	Test	Result	Test	Result
F2-Isoprostanes/Creat	0.29 L	ADMA ng/mL	88 L	Lp-PLA2 Activity nmol/min/mL	82 L

Your result in the desirable range suggests that the levels of oxidation in your body are low.

Your body needs F2-Isoprostanes for basic functions like making muscle. In excess, F2-Isops caused by inactivity, smoking and processed foods increase oxidation and blood vessel damage.



## Your result is in the desirable range, suggesting that you have low levels of OxLDL.

OxLDL measures oxidized damage to LDL cholesterol (bad cholesterol). High levels trigger inflammation, increasing your risk of developing metabolic syndrome and your future risk of plaque build-up.

### Your Lifestyle Considerations

- Limit your intake of processed foods, exercise regularly and if you smoke, quit.
- Eat foods rich in anti-oxidants and high in fiber, and consider a heart healthy Mediterranean-style diet.
- Limit foods high in sugar and salt (sodium) to reduce the damage to your endothelium (vessel lining).
- Strive for optimal oral health to reduce inflammation associated with periodontal disease.

Your ADMA result in the desirable range suggests optimal nitric oxide levels and low risk of endothelial dysfunction.

ADMA is a chemical in your blood that reduces nitric oxide, a molecule needed to keep a healthy endothelium (the cells that line your blood vessels). High levels of ADMA indicate unhealthy cells in the blood vessel and may identify risk of cardiovascular disease.



You have high levels of hsCRP suggesting that you may have increased vascular inflammation. Your provider may order a repeat test and/or consider the presence of cardiovascular disease.

hsCRP measures inflammation in the body. Increases of hsCRP are seen with recent illness, injury, a virus, periodontal (gum) disease and with cardiovascular disease. 
 Nmol/min/mL

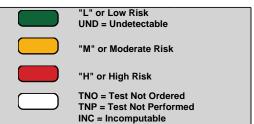
 Your result is in the desirable range suggesting that you may have limited active cholesterol build-up.

Lp-PLA2 Activity measures vascular-specific inflammation. When cholesterol enters and gets trapped in the vessel wall, inflammation occurs. Lp-PLA2 Activity may identify active cholesterol build-up inside the vessel wall and the progression of cardiovascular disease.



Your result is in the desirable range suggesting that you may have a low probability of plaque rupture if cardiovascular disease is present.

MPO identifies vulnerable plaque due to the breakdown of cells lining the blood vessel. This breakdown leads to white blood cells attacking the vessel wall and marks the progression of cardiovascular disease.



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