



Testmaster Testing
3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 334-988-9503-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 081950		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex F		Fasting	
Patient Address				Additional Information			
				NORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	Physician ID

Tests Ordered							
Vitamin D, 25-Hydroxy							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
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Vitamin D, 25-Hydroxy	58.4		ng/mL	30.0 - 100.0	01
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Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).

1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.
2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7):1911-30.

01	BN	LabCorp Burlington	Dir: William F Hancock, MD
		1447 York Court, Burlington, NC 27215-3361	
For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762			

SAMPLE, 081950		334-988-9503-0	Seq # 0000
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12/01/16 15:46 ET

DUPLICATE FINAL REPORT

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3060 S Church Street
Burlington, NC 27215

Phone: 336-436-2762

Specimen Number 334-988-9504-0		Patient ID		Control Number	Account Number 90000999	Account Phone Number 336-436-8645	Route 00
SAMPLE				Account Address			
Patient Last Name				LabCorp Test Master			
Patient First Name 081950		Patient Middle Name		Test Account			
Patient SS#		Patient Phone		3060 South Church Street			
Age (Y/M/D) 26/10/17		Date of Birth 01/11/90		Sex F		Fasting	
Patient Address				Additional Information			
				ABNORMAL REPORT			
Date and Time Collected 11/28/16 00:00		Date Entered 11/29/16		Date and Time Reported		Physician Name	Physician ID

Tests Ordered							
Vitamin D, 25-Hydroxy							

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Vitamin D, 25-Hydroxy	17.9	Low	ng/mL	30.0 - 100.0	01

Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).

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