



PIEDMONT MEDICAL LABORATORY

333 West Cork Street, Suite #215 Winchester VA 22601
Phone: (540) 536-5500 FAX: (540) 676-1507

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Page: 1

Physician:
mith, Ashley
Inchester Family Practice, P.C.
140 Amherst Street
Inchester, VA, 22601

Accession
Doctor ID: **SMITASH**
Account No: _____
MRN: **1258-6861**

ID:
SSN:
Collected: **2/09/2009 @ 10:28 AM**
Received: **2/09/2009 @ 6:07 PM**

Patient:
Jones, Richard, V Jr
D.O.B.: **49 YRS 7 MOS 1**
Sex: **M Male**
Phone:
Status: **Final Report**

Printed: **2/09/2009 @ 10:37 PM**

Test Name	Result	Units	Reference Range	Notes
Report Generated For: Facility ID: 1258 Copies: 1 Destination: Printer PHASER_840				
Name: Winchester Family Practice, P.C. Address: 1440 Amherst Street				
Phone: 450-3338 CSZ: Winchester VA 22601				

Basic Metabolic Panel

Glucose	106	H	mg/dL	70 - 100	<i>Nonfasting</i>
Sodium	140		mEq/L	136 - 145	
Potassium	4.5		mEq/L	3.5-5.3	
Chloride	104		mEq/L	98 - 110	
Carbon Dioxide	27.9		mEq/L	22.0 - 32.0	
BUN	14		mg/dL	6 - 20	
Calcium	9.0		mg/dL	8.5-10.5	
Creatinine	0.80		mg/dL	0.70 - 1.20	
Osmolality	284		mOsm/kg	275 - 295	
Anion Gap	12.8			7.0-16.0	

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Other Tests

Thyroid Stimulating Hormone	4.834	mIU/mL	0.350-5.500
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*NK kidney fun
+ Thyroid
AS
2/11/09*

*LM OT
2:11:09
SEM*

M. M. Orlando, M.D., Ph.D.

Medical Directors
S. Monroe, M.D.

R.C. Dillingham, M.D.

Date Printed: 2/10/2009 6:37 AM

CH-Critical High H -High
CL-Critical Low L -Low

Result Copied - A -Abnormal

*** Final Page ***
All Results Included