		Neve!	****				
	Dan Suiugan tient Health Summary, generated on Jul. 03, 2024						
0:	Patient Demographics - Male; Patient Address	oorn Feb. 27, 1961 Patient Name	Communication				
	23920 NAPIER RD <i>(Home)</i> SOUTH LYON, MI 48178 Former (May 11, 2023 - May 10, 2023):	Ioan Suiugan	ioanaabdic@gmail.com				
	23920 NAPIER ROAD <i>(Home)</i> NOVI, MI 48374						
	Language	Race / Ethnicity	Marital Status				
	Unknown	Hispanic or Latino / Not Hispanic or Latino	Unknown				
F	Note from Catholic Health S This document contains information that w Health System.		contain the entire record from Catholic				
20	Allergies No known active allergies						
₿>	Medications QUEtiapine (Seroquel) 25 mg tablet (Sta Take 1 tablet (25 mg total) by mouth ev amiodarone (Pacerone) 200 mg tablet (Take 1 tablet (200 mg total) by mouth 1 apixaban (Eliquis) 5 mg tablet (Started 6	ery night. Started 6/17/2023) (one) time each day. 5/16/2023)					
Take 1 tablet (5 mg total) by mouth in the morning and 1 tablet (5 mg total) before bedtime.atorvastatin (Lipitor) 40 mg tablet (Started 6/17/2023)Take 1 tablet (40 mg total) by mouth 1 (one) time each day.insulin glargine (Lantus) 100 unit/mL injection (Started 6/16/2023)Inject 0.3 mL (30 Units total) under the skin 1 (one) time each day at 12 Noon.							
	metoprolol tartrate (Lopressor) 50 mg take 1 tablet (50 mg total) by mouth ev OLANZapine (Zyprexa) 5 mg tablet (Sta Take 1 tablet (5 mg total) by mouth in the	ery 6 (six) hours.	re bedtime.				
≡	Active Problems						
	Problem		Date Diagnosed Date				
	Hypomagnesemia	06/11					
	Current tobacco use		/2023				
	Centrilobular emphysema	05/16					
	Hyperlipidemia Acute respiratory failure with hypoxemia	05/15					
	Anoxic encephalopathy		/2023				

05/14/2023

05/14/2023 05/11/2023

05/11/2023

05/11/2023

Type 2 diabetes mellitus

Cardiac arrest

Transaminitis

Streptococcal pneumonia

Acute renal failure with tubular necrosis

Resolved Problems

			Resolved
Problem	Noted Date	Diagnosed Date	Date
Cerebral ischemia	05/11/2023		05/15/2023
Coma	05/11/2023		05/14/2023
Lactic acidosis	05/11/2023		05/14/2023
Hematochezia	05/11/2023		05/14/2023
Low blood potassium	05/11/2023		05/14/2023
Hyperglycemia	05/11/2023		05/14/2023
High anion gap metabolic acidosis	05/11/2023		05/14/2023

Social History

Tobacco Use	Туреѕ	Packs/Day	Years Used	Date
Smoking Tobacco: Every Day	Cigarettes			

Tobacco Cessation: Counseling Given: No

PHQ-9	Answer	Date Recorded
PHQ-9: Brief Depression Severity Measure Score	0	05/26/2023
Alcohol Use	Answer	Date Recorded
Q1: How often do you have a drink containing alcohol?	Patient declined	05/11/2023
Q2: How many drinks containing alcohol do you have on a typical day when you are drinking?	Patient declined	05/11/2023
Q3: How often do you have six or more drinks on one occasion?	Patient declined	05/11/2023
AUDIT-C Score	Not on file	05/11/2023
Sex and Gender Information	Value	Date Recorded
Sex Assigned at Birth	Male	05/26/2023 7:04 AM EDT
Gender Identity	Male	05/26/2023 8:50 AM EDT
Sexual Orientation	Don't know	05/26/2023 7:04 AM EDT

Last Filed Vital Signs

In	Reading	Time Taken	Comments
ressure	124/91	06/16/2023 7:00 AM EDT	
	97	06/16/2023 7:00 AM EDT	
ature	36.2 °C (97.1 °F)	06/16/2023 7:00 AM EDT	
ory Rate	18	06/16/2023 7:00 AM EDT	
Saturation	97%	06/16/2023 7:00 AM EDT	
Oxygen Concentration	-	-	
	90.5 kg (199 lb 8.3 oz)	06/12/2023 9:00 AM EDT	
	182.9 cm (6' 0.01")	06/12/2023 9:00 AM EDT	
ass Index	27.05	06/12/2023 9:00 AM EDT	
	ressure ature ory Rate Saturation Oxygen Concentration	ressure 124/91 97 ature 36.2 °C (97.1 °F) ory Rate 18 Saturation 97% Oxygen Concentration - 90.5 kg (199 lb 8.3 oz) 182.9 cm (6' 0.01")	ressure 124/91 06/16/2023 7:00 AM EDT 97 06/16/2023 7:00 AM EDT ature 36.2 °C (97.1 °F) 06/16/2023 7:00 AM EDT ory Rate 18 06/16/2023 7:00 AM EDT Saturation 97% 06/16/2023 7:00 AM EDT Oxygen Concentration - 90.5 kg (199 lb 8.3 oz) 06/12/2023 9:00 AM EDT 182.9 cm (6' 0.01") 06/12/2023 9:00 AM EDT

Procedures
AIRWAY CLEARANCE THERAPY (Performed 5/25/2023)
EXTUBATION (Performed 5/25/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/25/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/24/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/24/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/24/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/23/2023)
CARDIAC CATHETERIZATION (Performed 5/23/2023)
Performed for Cardiac arrest AIRWAY CLEARANCE THERAPY (Performed 5/23/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/23/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/23/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/23/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/22/2023)
TRANSTHORACIC ECHO (TTE) LIMITED (Performed 5/22/2023)
Performed for Cardiac arrest ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/22/2023)
ABCDE AWARENING/SPONTANEOUS BREATHING BUNDLE (renormed 5/22/2023) AIRWAY CLEARANCE THERAPY (Performed 5/21/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/21/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/20/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/20/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/19/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/19/2023) AIRWAY CLEARANCE THERAPY (Performed 5/18/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/18/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/18/2023)
INTUBATION (Performed 5/18/2023)
Performed for Cardiac arrest, Acute respiratory failure with hypoxemia, Anoxic encephalopathy
AIRWAY CLEARANCE THERAPY (Performed 5/18/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/18/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/17/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/17/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/17/2023) AIRWAY CLEARANCE THERAPY (Performed 5/17/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/17/2023)
AIRWAY CLEARANCE THERAPY (Performed 5/16/2023)
TRANSTHORACIC ECHO (TTE) LIMITED (Performed 5/16/2023)
Performed for Cardiac arrest
AIRWAY CLEARANCE THERAPY (Performed 5/16/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/16/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/15/2023) ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/14/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/14/2023)
ABCDE AWAKENING/SPONTANEOUS BREATHING BUNDLE (Performed 5/12/2023)
TRANSTHORACIC ECHO (TTE) COMPLETE (Performed 5/11/2023)
Performed for Cardiac arrest

Results						
MAGNESIUM - Final res	ult (06/16/202	3 7:49 AN	vi edt)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	1.8	1.7 - 2.5 mg/dL		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unknown		Venipuncture / Unknown	06/16/2023 7:49 AM EDT		06/16/2023 7:52 AM EDT
	specificity of	KIIOWII	Onknown	LDT		
Narrative	specificity of	KHOWH	Onknown	LDT		
Narrative						
Narrative Authorizing Provider	Result Type					
	·					
Authorizing Provider Prageet Kumar MD	Result Type					
Authorizing Provider	Result Type			Phone Nu	mber	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (06/16/2023 7:49 AM EDT)

Y

		Ref		Analysis	,	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	151 (H)	74 - 100 mg/dL		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	18	8 - 27 mg/dL		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.01	0.80 - 1.30 mg/ dL	/	06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	17.8	10.0 - 20.1		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	134 (L)	136 - 145 mmol/L		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	<u> </u>
Potassium	4.4	3.5 - 5.5 mmol/L		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Sample is sli		d, result m 98 - 107	ay be affected.	00/10/2022	CATHOLIC	
Chloride	103	98 - 107 mmol/L		06/16/2023 8:33 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	19 (L)	21 - 31 mmol/L		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	12 (H)	3 - 11		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	84.1 (L)	>=90.0 mL/min/ 1.73 m2		06/16/2023 8:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaborati					
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 7:49 AM	06/16/2023 7:52 AM EDT
Narrative						
Authorizing Drowider	Pocult Turce					
Authorizing Provider Prageet Kumar MD	Result Type	RDERABLE	S			

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	-		City/State/ZIP Code Phone Number Buffalo, NY 14220, US 716-828-2413			
(ABNORMAL) POCT G		ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	(06/16/2023	7:23 AM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	159 (H)	74 - 100 mg/dL		06/16/2023 7:48 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	ı Time	Received Time
Blood	Capillary blood specimen / Un			06/16/202 EDT	23 7:23 AM	06/16/2023 7:48 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	JULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	ımber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/15/2023 10:49 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
		74 - 100		06/16/2023 CATHOLIC 12:32 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		<u> </u>
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection	n Time	Received Time
Blood	Capillary blood specimen / Unknown			06/15/2023 10:49 PM EDT		06/16/2023 12:32 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT O	F CARE TES	ST DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	06/15/2023	4:50 PM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	162 (H)	74 - 100 mg/dL		06/15/2023 6:19 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/15/2023 4:50 PM EDT		06/15/2023 6:19 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2413		

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/15/2023 11:29 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	103 (H)	74 - 100 mg/dL		06/15/2023 12:23 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			06/15/202 EDT	3 11:29 AM	06/15/2023 12:23 PM EDT
Narrative						
Authorizing Provider Prageet Kumar MD	Result Type	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
- <u>-</u>						

Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC - Final result (06/15/2023 6:24 AM EDT)

	indiresult (0	Ref	5 0.24 All 25 1)	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC	13.0 (H)	4.5 - 11.0 10*3/uL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.30 (L)	4.50 - 6.50 10*6/uL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.8 (L)	14.0 - 18.0 g/ dL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	38.4 (L)	40.0 - 54.0 %		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.2	80.0 - 94.0 fL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.7	26.0 - 34.0 pg		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.3	31.0 - 37.0 g/ dL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets	323	145 - 450 10*3/uL		06/15/2023 7:20 AM EDT		
MPV	7.5	7.4 - 10.4 fL		06/15/2023 7:20 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 6:24 AM	06/15/2023 6:57 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc		Buffalo, NY 14220, US	716-828-2	2413	
MAGNESIUM - Final res		23 6:24 Al Ref	M EDT)	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	1.9	1.7 - 2.5 mg/dL		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/15/202 EDT	23 6:24 AM	06/15/2023 7:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) BASIC	METABOLIC F		nal result (06/15/20		EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	113 (H)	74 - 100 mg/dL		06/15/2023 7:34 AM EDT	
BUN	10	8 - 27 mg/dL		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.75 (L)	0.80 - 1.30 mg/ dL		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	13.3	10.0 - 20.1		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	139	136 - 145 mmol/L		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.1	3.5 - 5.5 mmol/L		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	101	98 - 107 mmol/L		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	28	21 - 31 mmol/L		06/15/2023 7:34 AM EDT	
Anion Gap	10	3 - 11		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Calcium	8.5 (L)	8.6 - 10.3 mg/ dL		06/15/2023 7:34 AM EDT		
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/15/2023 7:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,	Calculation	based on	the Chronic Kidnev			
Disease Epidemiology	Collaboratio		-			
without adjustment f	or race					
-		cation /	Collection Method /			
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
-	Anatomical Lo				Time 23 6:24 AM	Received Time 06/15/2023 7:01 AM EDT
Specimen (Source)	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/15/202		06/15/2023 7:01 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/15/202		06/15/2023 7:01 AM
Specimen (Source) Blood Narrative	Anatomical Loc Laterality Venous blood specimen / Un		Volume Venipuncture /	06/15/202		06/15/2023 7:01 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood	known	Volume Venipuncture / Unknown	06/15/202		06/15/2023 7:01 AM
Specimen (Source) Blood Narrative Authorizing Provider Prageet Kumar MD	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/15/202		06/15/2023 7:01 AM
Specimen (Source) Blood Narrative Authorizing Provider	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/15/202	23 6:24 AM	06/15/2023 7:01 AM
Specimen (Source) Blood Narrative Authorizing Provider Prageet Kumar MD Performing	Anatomical Loc Laterality Venous blood specimen / Un Result Type LAB BLOOD OI	known	Volume Venipuncture / Unknown	06/15/202 EDT	23 6:24 AM	06/15/2023 7:01 AM

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/14/2023 9:16 PM EDT)

		Ref	T (N (1))	Analysis		
Component Glucose, Poc	Value 194 (H)	Range 74 - 100 mg/dL	Test Method	Time 06/14/2023 9:41 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	ı Time	Received Time
Blood	Capillary bloc specimen / U			06/14/202 EDT	23 9:16 PM	06/14/2023 9:41 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UN	SOLICITED RES	SULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	d.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		· ·
Component Glucose, Poc	Value 156 (H)	Range 74 - 100 mg/dL	Test Method	Time 06/14/2023 4:13 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/14/202 EDT	23 3:53 PM	06/14/2023 4:13 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	- CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/14/2023 11:19 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	248 (H)	74 - 100 mg/dL		06/14/2023 11:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U		Volume		23 11:19 AM	06/14/2023 11:38 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC - Final result (06/14/2023 8:12 AM EDT)

	indiresuit (o	Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC	8.3	4.5 - 11.0 10*3/uL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.17 (L)	4.50 - 6.50 10*6/uL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.6 (L)	14.0 - 18.0 g/ dL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	36.9 (L)	40.0 - 54.0 %		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.6	80.0 - 94.0 fL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	30.1	26.0 - 34.0 pg		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	34.0	31.0 - 37.0 g/ dL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.8	11.5 - 14.5 %		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Platelets	284	145 - 450 10*3/uL		06/14/2023 8:45 AM EDT		
MPV	7.6	7.4 - 10.4 fL		06/14/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	Iknown	Venipuncture / Unknown		23 8:12 AM	06/14/2023 8:26 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res	sult (06/14/202	23 8:12 Al Ref	M EDT)	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	1.9	1.7 - 2.5 mg/dL		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un		Venipuncture / Unknown	06/14/202 EDT	3 8:12 AM	06/14/2023 8:28 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	l.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC	METABOLIC P		nal result (06/14/20		EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	99	74 - 100 mg/dL		06/14/2023 9:05 AM EDT	
BUN	10	8 - 27 mg/dL		06/14/2023 9:05 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.68 (L)	0.80 - 1.30 mg/ dL		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	14.7	10.0 - 20.1		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	135 (L)	136 - 145 mmol/L		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	3.8	3.5 - 5.5 mmol/L		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	101	98 - 107 mmol/L		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	28	21 - 31 mmol/L		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	6	3 - 11		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/14/2023 9:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,	Calculation	based on	the Chronic Kidnev			
Disease Epidemiology without adjustment f	Collaboratio		-			
WITHOUT ANNIETMENT T						
archouc adjustment r		cation /	Collection Method /			
Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
-	Anatomical Lo				Time 3 8:12 AM	Received Time 06/14/2023 8:28 AM EDT
Specimen (Source)	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/14/202		06/14/2023 8:28 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/14/202		06/14/2023 8:28 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/14/202		06/14/2023 8:28 AM
Specimen (Source) Blood Narrative	Anatomical Loc Laterality Venous blood specimen / Un	known	Volume Venipuncture / Unknown	06/14/202		06/14/2023 8:28 AM
Specimen (Source) Blood Narrative Authorizing Provider Swati Bhargava MD	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/14/202		06/14/2023 8:28 AM
Specimen (Source) Blood Narrative Authorizing Provider	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/14/202	3 8:12 AM	06/14/2023 8:28 AM
Specimen (Source) Blood Narrative Authorizing Provider Swati Bhargava MD Performing	Anatomical Loc Laterality Venous blood specimen / Un Result Type LAB BLOOD OI	known RDERABLE	Volume Venipuncture / Unknown	06/14/202 EDT	3 8:12 AM	06/14/2023 8:28 AM

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/14/2023 7:44 AM EDT)

(Ref		Analysis		·····
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	132 (H)	74 - 100 mg/dL		06/14/2023 8:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				23 7:44 AM	06/14/2023 8:08 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing				Dhana Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	142 (H)	74 - 100 mg/dL		06/13/2023 10:50 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/13/202 EDT	3 10:11 PM	06/13/2023 10:50 PM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/13/2023 11:49 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	127 (H)	74 - 100 mg/dL		06/13/2023 12:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			06/13/202 EDT	23 11:49 AM	06/13/2023 12:22 PM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT U	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULI S	

Performing				Dhama Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	J.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	06/13/2023	7:40 AM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	122 (H)	74 - 100 mg/dL		06/13/2023 8:02 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/13/202 EDT	3 7:40 AM	06/13/2023 8:02 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/12/2023 9:10 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	106 (H)	74 - 100 mg/dL		06/12/2023 9:48 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			06/12/202 EDT	23 9:10 PM	06/12/2023 9:48 PM EDT
Narrative						
Authorizing Provider Swati Bhargava MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSC	LICITED RESULTS - F	inal result (06/12/2023	1:23 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	130 (H)	74 - 100 mg/dL		06/12/2023 4:08 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	-	Received Time
Blood	Capillary blood specimen / Un			06/12/202 EDT	23 1:23 PM	06/12/2023 4:08 PM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
MAGNESIUM - Final res	sult (06/12/202		AM EDT)			
Component	Value	Ref Range	Test Method	Analysis Time	Porformed At	Pathologist Signature
Magnesium	1.8	1.7 - 2.5 mg/dL	Test Method	06/12/2023 12:24 PM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/12/202 EDT	23 11:17 AM	06/12/2023 11:53 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB BLOOD O	RDERABLE	S			

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (06/12/2023 11:17 AM EDT)

		Ref		Analysis	25 11.17 AW	
Component	Value		1ethod	Time	Performed At	Pathologist Signature
Glucose	115 (H)	74 - 100 mg/dL		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	9	8 - 27 mg/dL		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.65 (L)	0.80 - 1.30 mg/ dL		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	13.8	10.0 - 20.1		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	136	136 - 145 mmol/L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.7	3.5 - 5.5 mmol/L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	101	98 - 107 mmol/L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	28	21 - 31 mmol/L		06/12/2023 12:24 PM EDT		

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Anion Gap	7	3 - 11		06/12/2023 12:24 PM EDT		<u> </u>
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL	,	06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	25	13 - 39 U/L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	25	7 - 52 U/ L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	99	34 - 104 U/L		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.8 (L)	6.1 - 7.9 g/dL		06/12/2023 12:24 PM EDT		
Albumin	2.7 (L)	3.3 - 4.8 g/dL		06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	0.9 (L)	1.1 - 2.8		06/12/2023 12:24 PM EDT		
Total Bilirubin	0.8	0.3 - 1.0 mg/dL		06/12/2023 12:24 PM EDT		

	Ref		Analysis		
Value	Range	Test Method	Time	Performed At	Pathologist Signature
Collaboratio		-	06/12/2023 12:24 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Venous blood specimen / Un	known	Venipuncture / Unknown	06/12/202 EDT	23 11:17 AM	06/12/2023 11:53 AM EDT
Result Type					
LAB BLOOD O	RDERABLE	S			
Address		City/State/ZIP Code	Phone Nu	mber	
565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
	Calculation Collaboratic or race Anatomical Lo Laterality Venous blood specimen / Un Result Type LAB BLOOD O	Value Range >90.0 >=90.0 mL/min/ 1.73 m2 Calculation based on Collaboration (CKD-E or race Anatomical Location / Laterality Venous blood specimen / Unknown Result Type LAB BLOOD ORDERABLE	Value Range Test Method >90.0 >=90.0 mL/min/ .173 m2 .173 m2 Calculation based on the Chronic Kidney Collaboration (CKD-EPI) equation refit or race Anatomical Location / Collection Method / Laterality Venous blood Venipuncture / Specimen / Unknown Result Type LAB BLOOD ORDERABLES Address City/State/ZIP Code	Value Range Test Method Time >90.0 >=90.0 06/12/2023 mL/min/ 12:24 PM 1.73 m2 EDT Calculation based on the Chronic Kidney Collaboration Collaboration (CKD-EPT) equation refit Collection Method / Anatomical Location / Collection Method / Laterality Volume Collection Venous blood Venipuncture / 06/12/202 specimen / Unknown Unknown EDT Result Type LAB BLOOD ORDERABLES Address Address City/State/ZIP Code Phone Nu	Value Range Test Method Time Performed At >90.0 >=90.0 mL/min/ 06/12/2023 CATHOLIC 1.73 m2 Description 12:24 PM HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF Calculation based on the Chronic Kidney Collaboration (CKD-EPI) equation refit or race Collection Method / Volume Venipuncture / O6/12/2023 Services - MERCY Venous blood Venipuncture / Unknown 06/12/2023 11:17 AM Result Type LAB BLOOD ORDERABLES City/State/ZIP Code Phone Number

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/12/2023 9:08 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	113 (H)	74 - 100 mg/dL		06/12/2023 9:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/12/202 EDT	23 9:08 AM	06/12/2023 9:24 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (06/12/2023 7:56 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	9.5	4.5 - 11.0 10*3/uL		06/12/2023 8:27 AM EDT		
RBC	4.14 (L)	4.50 - 6.50 10*6/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.3 (L)	14.0 - 18.0 g/ dL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	36.5 (L)	40.0 - 54.0 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.0	80.0 - 94.0 fL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.7	26.0 - 34.0 pg		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.8	31.0 - 37.0 g/ dL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	270	145 - 450 10*3/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
MPV	7.7	7.4 - 10.4 fL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	59	50 - 75 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	23	20 - 40 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	11 (H)	>2 - <10 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	6	<=8 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	5.6	2.0 - 8.2 1000/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	2.2	0.8 - 4.4 1000/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	1.0	0.1 - 1.1 1000/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis				
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Eosinophils Absolute	0.6	0.0 - 0.6 1000/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		06/12/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time		
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/12/202 EDT	3 7:56 AM	06/12/2023 7:59 AM EDT		
Narrative								
Authorizing Provider	Result Type							
Swati Bhargava MD		LAB BLOOD ORDERABLES						
Performing Organization	Address		City/State/ZIP Code	Phone Number				
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413				
POCT GLUCOSE METER	UNSOLICITED	RESULTS	5 - Final result (06/11/2	2023 10:25 F Analysis	'M EDT)			
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Glucose, Poc	81	74 - 100 mg/dL		06/11/2023 10:53 PM EDT				
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time		
Blood	Capillary blood specimen / Un			06/11/202 EDT	3 10:25 PM	06/11/2023 10:53 PM EDT		
Narrative								
Authorizing Provider Swati Bhargava MD	Result Type	CARE TEC	T DOCKED DEVICE UNS		111 TS			
			DOCKED DEVICE ONS					
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413			

(ABNORMAL) POCT G	LUCOSE ME	TER UNSC	LICITED RESULTS - I	Final result ((06/11/2023	3:36 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	116 (H)	74 - 100 mg/dL		06/11/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical L	.ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blo specimen / L			06/11/202 EDT	23 3:36 PM	06/11/2023 4:26 PM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT C	OF CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	ımber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott F	₹d.	Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G	Value	Ref Range	LICITED RESULTS - I Test Method	Analysis Time	Performed At	12:12 PM EDT) Pathologist Signature
Glucose, Poc	240 (H)	74 - 100		06/11/2023	CATHOLIC	

Glucose, Poc	- • •	/4 - 100 mg/dL		06/11/2023 12:28 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loca	ation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unki	nown		06/11/202 EDT	3 12:12 PM	06/11/2023 12:28 PM EDT
Narrative						
Authorizing Provider	Result Type					
			T DOCKED DEVICE UNS			
Swati Bhargava MD Performing	LAB POINT OF C	LARE IES	T DOCKED DEVICE ONSC	JLICITED RES	OLIS	
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/11/2023 7:58 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	129 (H)	74 - 100 mg/dL		06/11/2023 8:34 AM EDT		
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality	-1	Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			06/11/202 EDT	23 7:58 AM	06/11/2023 8:34 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) CBC W/	/ autodiff (CB	C WITH / Ref	AUTODIFF) - Final res	sult (06/11/ Analysis	2023 7:33 AI	VI EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	10.0	4.5 - 11.0 10*3/uL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.12 (L)	4.50 - 6.50 10*6/uL		06/11/2023 7:56 AM EDT		
Hemoglobin	12.4 (L)	14.0 - 18.0 g/ dL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	36.6 (L)	40.0 - 54.0 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
MCV	88.8	80.0 - 94.0 fL		06/11/2023 7:56 AM EDT		
МСН	30.1	26.0 - 34.0 pg		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.9	31.0 - 37.0 g/ dL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.9	11.5 - 14.5 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	290	145 - 450 10*3/uL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	7.6	7.4 - 10.4 fL		06/11/2023 7:56 AM EDT		
Neutrophils Relative	65	50 - 75 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	19 (L)	20 - 40 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Relative	11 (H)	>2 - <10 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Relative	5	<=8 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	6.5	2.0 - 8.2 1000/uL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.9	0.8 - 4.4 1000/uL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.1	0.1 - 1.1 1000/uL		06/11/2023 7:56 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.5	0.0 - 0.6 1000/uL		06/11/2023 7:56 AM EDT		
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		06/11/2023 7:56 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	Venous blood specimen / Un		Venipuncture / Unknown		3 7:33 AM	06/11/2023 7:38 AM EDT
Narrative						
Authorizing Provider Swati Bhargava MD	Result Type					
			J			

Performing									
Organization	Address		City/State/ZIP Code	Phone Nu					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413				
(ABNORMAL) MAGNESIUM - Final result (06/11/2023 7:33 AM EDT)									
		Ref		Analysis					
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature			
Magnesium	1.6 (L)	1.7 - 2.5 mg/dL		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection	Time	Received Time			
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/11/202 EDT	23 7:33 AM	06/11/2023 7:38 AM EDT			
Narrative									
Authorizing Provider	Result Type								
Swati Bhargava MD	LAB BLOOD O	RDERABLE	S						
Performing									
Organization	Address		City/State/ZIP Code	Phone Nu	mber				
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2					

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (06/11/2023 7:33 AM EDT)

Component	Malura	Ref	Analysis	Deuteurseed At	Dath allo gist Cing at up
Component Glucose	Value 111 (H)	Range Test Me 74 - 100 mg/dL	Time 06/11/2023 8:05 AM EDT		Pathologist Signature
BUN	13	8 - 27 mg/dL	06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.61 (L)	0.80 - 1.30 mg/ dL	06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	21.3 (H)	10.0 - 20.1		06/11/2023 8:05 AM EDT		
Sodium	136	136 - 145 mmol/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.7	3.5 - 5.5 mmol/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	104	98 - 107 mmol/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	26	21 - 31 mmol/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	6	3 - 11		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL	,	06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	25	13 - 39 U/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	27	7 - 52 U/ L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alkaline Phosphatase	97	34 - 104 U/L		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.7 (L)	6.1 - 7.9 g/dL		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	2.7 (L)	3.3 - 4.8 g/dL		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	0.9 (L)	1.1 - 2.8		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	0.8	0.3 - 1.0 mg/dL		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/11/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio			,		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown	06/11/202 EDT	23 7:33 AM	06/11/2023 7:38 AM EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address	1	City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		06/10/2023	9:51 PM EDT)	
Comment) (also	Ref		Analysis	Deufeure e d. At	Dath also sist Cissastum	
Component Glucose, Poc	Value 157 (H)	Range 74 - 100 mg/dL	Test Method	Time 06/10/2023 10:16 PM EDT		Pathologist Signature	
	Anatomical Location /		Collection Method /				
Specimen (Source)	Laterality		Volume	Collection		Received Time	
Blood	Capillary bloc specimen / U			06/10/202 EDT	23 9:51 PM	06/10/2023 10:16 PM EDT	
Narrative							
Authorizing Provider Swati Bhargava MD	Result Type						
Swati Bhargava MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413		
(ABNORMAL) POCT G	Value	FER UNSC Ref Range 74 - 100	DLICITED RESULTS - F Test Method	Analysis Time	Performed At	4:44 PM EDT) Pathologist Signature	
Glucose, Poc	145 (H)	74 - 100 mg/dL		06/10/2023 5:01 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		06/10/2023 4:44 PM EDT	06/10/2023 5:01 PM EDT

Narrative

Authorizing Provider	Result Type
Swati Bhargava MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/10/2023 11:06 AM EDT)

6		Ref	T	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	129 (H)	74 - 100 mg/dL		06/10/2023 11:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /	Callertian	Τ'	De estive d'Time e
Specimen (Source) Blood	Laterality Capillary blood	4	Volume	Collection Time 06/10/2023 11:06 AM		Received Time 06/10/2023 11:24 AM
blood	specimen / Un			EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Swati Bhargava MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing				Dia ana Nice		
Organization CATHOLIC HEALTH	Address 565 Abbott Rd		City/State/ZIP Code	Phone Nu		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 ADDOTT RO		Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER _Component	UNSOLICITED Value	RESULTS Ref Range	5 - Final result (06/10/2 Test Method	2023 7:18 Al Analysis Time		Pathologist Signature
Glucose, Poc	91	74 - 100 mg/dL		06/10/2023 7:40 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /	Callestian	Time e	Dessived Times
Specimen (Source) Blood	Laterality Capillary blood	4	Volume	Collection	11me 23 7:18 AM	Received Time 06/10/2023 7:40 AM
blood	specimen / Un			EDT	.5 7.10 AIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE METI	ER UNSO	LICITED RESULTS - F	inal result (06/09/2023	9:26 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	200 (H)	74 - 100 mg/dL		06/09/2023 9:44 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loo	cation /	Collection Method /		- .	S
Specimen (Source)	Laterality	1	Volume	Collection		Received Time
Blood	Capillary blood specimen / Unknown			06/09/2023 9:26 PM EDT		06/09/2023 9:44 PM EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER	Value	Ref Range	- Final result (06/09/2 Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	94	74 - 100 mg/dL		06/09/2023 4:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Loc	cation /	Collection Method / Volume	Collection	Time	Dessived Time
Specimen (Source) Blood	Laterality Capillary blood	1	volume	Collection Time 06/09/2023 4:13 PM		Received Time 06/09/2023 4:31 PM
blood	specimen / Unl			EDT	.5 4.15 FIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS					
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE METE	ER UNSO	LICITED RESULTS - F	inal result (06/09/2023	11:58 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	125 (H)	74 - 100 mg/dL		06/09/2023 5:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection		Received Time
Blood	Capillary bloo	d	volume		3 11:58 AM	06/09/2023 5:16 PM
	specimen / Ur			EDT		EDT
Narrative						
Authorizing Drouider	De suit Turs s					
Authorizing Provider Chinyere Ezenwa MD	Result Type	CADE TEC	T DOCKED DEVICE UNS			
		CARE IES	DOCKED DEVICE UNS			
Performing	A					
Organization	Address	.1	City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) BASIC N	METABOLIC P Value	ANEL - Fi Ref Range	nal result (06/09/20	23 11:29 AN Analysis Time	-	Pathologist Signature
Glucose	126 (H)	74 - 100 mg/dL		06/09/2023 12:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	15	8 - 27 mg/dL		06/09/2023 12:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.60 (L)	0.80 - 1.30 mg/ dL		06/09/2023 12:26 PM EDT		
Bun/Creatinine Ratio	25.0 (H)	10.0 - 20.1		06/09/2023 12:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Porformed At	Pathologist Signature
Sodium	140	136 - 145		06/09/2023 12:26 PM		
		mmol/L		EDT	LABORATORY SERVICES - MERCY	
					HOSPITAL OF BUFFALO	
Potassium	3.8	3.5 - 5.5 mmol/L		06/09/2023 12:26 PM EDT	CATHOLIC HEALTH LABORATORY	
				EDI	SERVICES - MERCY HOSPITAL OF	
Chloride	106	98 - 107		06/09/2023	BUFFALO CATHOLIC	
		mmol/L		12:26 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
CO 2	20	21 21		06 (00 (2022	BUFFALO	
CO2	26	21 - 31 mmol/L		06/09/2023 12:26 PM EDT	HEALTH LABORATORY SERVICES -	
					MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		06/09/2023 12:26 PM EDT	HEALTH LABORATORY	
					SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.3 (L)	8.6 - 10.3 mg/		06/09/2023 12:26 PM	HEALTH	
		dL		EDT	LABORATORY SERVICES - MERCY HOSPITAL OF	
GFR	>90.0	>=90.0		06/09/2023	BUFFALO	
SIK	- 50.0	mL/min/ 1.73 m2		12:26 PM EDT	HEALTH LABORATORY SERVICES -	
					MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,	Calculation	based on	the Chronic Kidnev			
Disease Epidemiology without adjustment f	/ Collaborati					
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 11:29 AM	06/09/2023 12:08 PM EDT
Narrative						
Authorizing Provider Chinyere Ezenwa MD	Result Type LAB BLOOD O	RDERABLE	S			
,						

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
POCT GLUCOSE METER	UNSOLICITED	RESULTS	5 - Final result (06/09/2	2023 9:25 Al Analysis	M EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	97	74 - 100 mg/dL		06/09/2023 9:41 AM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/09/202 EDT	23 9:25 AM	06/09/2023 9:41 AM EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	159 (H)	74 - 100 mg/dL		06/09/2023 3:44 AM FDT	CATHOLIC HEALTH LABORATORY	

	iiig/dL		EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Location /	Collection Method /			
Specimen (Source)	Laterality	Volume	Collection	n Time	Received Time
Blood	Capillary blood specimen / Unknown		06/09/20 EDT	23 3:23 AM	06/09/2023 3:44 AM EDT
Narrative					
Authorizing Drovider	Docult Turpo				
Authorizing Provider	Result Type				
Chinyere Ezenwa MD	LAB POINT OF CARE TES	ST DOCKED DEVICE UNS	SOLICITED RE	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER	UNSOLICITED	RESULTS Ref	5 - Final result (06/09/2	2023 1:15 Al Analysis	M EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	80	74 - 100 mg/dL		06/09/2023 1:34 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/09/202 EDT	3 1:15 AM	06/09/2023 1:34 AM EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
		ANEL - Fi	nal result (06/08/202	23 4:06 PM	EDT)	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (06/08/2023 4:06 PM EDT)

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
Glucose	95	74 - 100 mg/dL	06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	16	8 - 27 mg/dL	06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.64 (L)	0.80 - 1.30 mg/ dL	06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	25.0 (H)	10.0 - 20.1		06/08/2023 5:31 PM EDT		
Sodium	139	136 - 145 mmol/L		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.5	3.5 - 5.5 mmol/L		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	104	98 - 107 mmol/L		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	27	21 - 31 mmol/L		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/08/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio	ON (CKD-E	PI) equation refit			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/08/202 EDT		06/08/2023 5:06 PM EDT

Authorizing Provider	Result Type		
Chinyere Ezenwa MD	LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

Narrative

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/08/2023 12:29 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	130 (H)	74 - 100 mg/dL		06/08/2023 12:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/08/202 EDT	23 12:29 PM	06/08/2023 12:52 PM EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/08/2023 8:15 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	119 (H)	74 - 100 mg/dL		06/08/2023 9:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /	Callestian	T	
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			06/08/202 EDT	23 8:15 AM	06/08/2023 9:13 AM EDT
Narrative						

Authorizing Provider	Result Type					
Chinyere Ezenwa MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G			LICITED RESULTS - F	-	06/07/2023	8:47 PM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	133 (H)	74 - 100		06/07/2023	CATHOLIC	
	135 (11)	mg/dL		9:03 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/07/202 EDT	3 8:47 PM	06/07/2023 9:03 PM EDT
Narrative						
Authorizing Drovidor	Decult Tures					
Authorizing Provider Chinyere Ezenwa MD	Result Type		T DOCKED DEVICE UNS			
Chinyere Ezenwa MD	LAD POINT OF	CARE IES	I DOCKED DEVICE UNS	OLICITED RES	ULIS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER	UNSOLICITED Value	RESULTS Ref Range	- Final result (06/07/2 Test Method	2023 4:24 PN Analysis Time		Pathologist Signature
Glucose, Poc	93	74 - 100		06/07/2023	CATHOLIC	
		mg/dL		4:57 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/07/202 EDT	3 4:24 PM	06/07/2023 4:56 PM EDT
Narrative						
Authorizing Provider	Result Type					
Chinyere Ezenwa MD		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	l.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	142 (H)	74 - 100 mg/dL		06/07/2023 12:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source) Blood		d			Time 23 11:38 AM	Received Time 06/07/2023 12:22 PM EDT
	Laterality Capillary blood	d		06/07/202	-	06/07/2023 12:22 PM
Blood	Laterality Capillary blood	d		06/07/202	-	06/07/2023 12:22 PM
Blood	Laterality Capillary blood	d		06/07/202	-	06/07/2023 12:22 PM
Blood	Laterality Capillary blood specimen / Un Result Type	d known		06/07/202 EDT	23 11:38 AM	06/07/2023 12:22 PM
Blood Narrative Authorizing Provider	Laterality Capillary blood specimen / Un Result Type	d known	Volume	06/07/202 EDT	23 11:38 AM	06/07/2023 12:22 PM
Blood Narrative Authorizing Provider Chinyere Ezenwa MD Performing	Laterality Capillary blood specimen / Un Result Type LAB POINT OF	d Iknown CARE TES	Volume	06/07/202 EDT OLICITED RES	23 11:38 AM SULTS mber	06/07/2023 12:22 PM

(ABNORMAL) CBC - Final result (06/07/2023 7:25 AM EDT)

(ADNORWAL) CDC - F	inal result (ot	,01/202.	7.25 AN LDT			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At Patholo	gist Signature
WBC	10.8	4.5 - 11.0 10*3/uL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.11 (L)	4.50 - 6.50 10*6/uL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.4 (L)	14.0 - 18.0 g/ dL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Hematocrit	36.5 (L)	40.0 - 54.0 %		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.8	80.0 - 94.0 fL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	30.1	26.0 - 34.0 pg		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.9	31.0 - 37.0 g/ dL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	366	145 - 450 10*3/uL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.1	7.4 - 10.4 fL		06/07/2023 7:59 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 7:25 AM	06/07/2023 7:29 AM EDT
Narrative						
Authorizing Provider	Posult Typo					
Authorizing Provider Prageet Kumar MD	Result Type LAB BLOOD C	RDERABLE	S			

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Address 565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
BUFFALO						
MAGNESIUM - Final res	sult (06/07/202		M EDT)			
Component) (2)	Ref	To at Matha al	Analysis Time	Daufausa a d At	Dath allo aist Cianacture
Component	Value	Range	Test Method	_		Pathologist Signature
Magnesium	1.8	1.7 - 2.5 mg/dL		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Constitution (Course)	Anatomical Lo	cation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source) Blood	Laterality Venous blood		Venipuncture /		3 7:25 AM	06/07/2023 7:29 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (06/07/2023 7:25 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	95	74 - 100 mg/dL		06/07/2023 8:27 AM EDT		
BUN	15	8 - 27 mg/dL		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.61 (L)	0.80 - 1.30 mg/ dL		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref	Test Mathad	Analysis	Daufauna ad At	Dath als sist Cisus sture
Component Bun/Creatinine Ratio	Value 24.6 (H)	Range 10.0 - 20.1	Test Method	Time 06/07/2023 8:27 AM EDT		Pathologist Signature
Sodium	138	136 - 145 mmol/L		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.5	3.5 - 5.5 mmol/L		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	106	98 - 107 mmol/L		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	25	21 - 31 mmol/L		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	7	3 - 11		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/07/2023 8:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaboratio	on (CKD-E	PI) equation refit			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	06/07/202 EDT	23 7:25 AM	06/07/2023 7:29 AM EDT

Narrative									
Authorizing Provider	Result Type								
Prageet Kumar MD		LAB BLOOD ORDERABLES							
Trageet Rumar WD	LAD BLOOD O		5						
Performing									
Organization	Address		City/State/ZIP Code	Phone Nu					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413				
POCT GLUCOSE METER	UNSOLICITED	RESULTS	5 - Final result (06/07/2	2023 7:18 AI	M EDT)				
		Ref		Analysis					
Component	Value	Range	Test Method	Time		Pathologist Signature			
Glucose, Poc	94	74 - 100 mg/dL		06/07/2023 9:29 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
	Anatomical Lo	cation /	Collection Method /		<u>_</u> .				
Specimen (Source)	Laterality		Volume	Collection		Received Time			
Blood	Capillary blood specimen / Un			06/07/202 EDT	23 7:18 AM	06/07/2023 9:29 AM EDT			
Narrative									
Authorizing Provider	Result Type								
Prageet Kumar MD	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS				
5									
Performing									
Organization	Address	1	City/State/ZIP Code	Phone Nu					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	I.	Buffalo, NY 14220, US	716-828-2	2413				
POCT GLUCOSE METER			- Final result (06/06/	2023 10.25 5					
	UNSOLICITED	Ref		Analysis					
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature			
Glucose, Poc	96	74 - 100 mg/dL		06/06/2023 10:53 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY				
	Anotonicalla	antion (Collection Mathed /		HOSPITAL OF BUFFALO				
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time			
Blood	Capillary blood specimen / Un				23 10:25 PM	06/06/2023 10:53 PM EDT			
Narrative									

Authorizing Provider	Result Type							
Prageet Kumar MD	LAB POINT OF	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS						
Performing								
Organization	Address		City/State/ZIP Code	Phone Nu	mber			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413			
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	06/06/2023	4:23 PM EDT)		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Glucose, Poc	103 (H)	74 - 100 mg/dL		06/06/2023 5:50 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time		
Blood	Capillary blood specimen / Un				23 4:23 PM	06/06/2023 5:50 PM EDT		
Narrative								
Authorizing Provider	Result Type							
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413			
(ABNORMAL) POCT G			LICITED RESULTS - F	inal result (06/06/2023	11:43 AM EDT)		

		Ket		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	116 (H)	74 - 100 mg/dL		06/06/2023 12:38 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/06/202 EDT	3 11:43 AM	06/06/2023 12:37 PM EDT
Narrative						
Authorizing Provider	Result Type					

Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC - Final result (06/06/2023 6:37 AM EDT)

	indi result (ot	Ref	5 0.57 AM 201)	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC	13.1 (H)	4.5 - 11.0 10*3/uL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.16 (L)	4.50 - 6.50 10*6/uL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.2 (L)	14.0 - 18.0 g/ dL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	37.0 (L)	40.0 - 54.0 %		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.0	80.0 - 94.0 fL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.2	26.0 - 34.0 pg		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.9	31.0 - 37.0 g/ dL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.7	11.5 - 14.5 %		06/06/2023 7:25 AM EDT		

		Ref		Applycic		
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets	407	145 - 450 10*3/uL		06/06/2023 7:25 AM EDT		
MPV	8.2	7.4 - 10.4 fL		06/06/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown		23 6:37 AM	06/06/2023 6:55 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res		23 6:37 AN Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	1.7	1.7 - 2.5 mg/dL		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection	Time 3 6:37 AM	Received Time 06/06/2023 6:55 AM
ыооа	specimen / Ur		Unknown	EDT	.5 0.57 AIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	1.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC	METABOLIC P		nal result (06/06/20		EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	77	74 - 100 mg/dL		06/06/2023 7:54 AM EDT	
BUN	13	8 - 27 mg/dL		06/06/2023 7:54 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.75 (L)	0.80 - 1.30 mg/ dL		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	17.3	10.0 - 20.1		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	136	136 - 145 mmol/L		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	3.6	3.5 - 5.5 mmol/L		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	104	98 - 107 mmol/L		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	25	21 - 31 mmol/L		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	7	3 - 11		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature	
Calcium	7.8 (L)	8.6 - 10.3 mg/ dL		06/06/2023 7:54 AM EDT			
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/06/2023 7:54 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		
Comment: Effective 5/11/2022,	Calculation	based on	the Chronic Kidney				
Disease Epidemiology Collaboration (CKD-EPI) equation refit							
without adjustment f	or race						
without adjustment f	Anatomical Lo	cation /	Collection Method /				
Specimen (Source)	Anatomical Lo Laterality	cation /	Volume	Collection		Received Time	
-	Anatomical Lo		1		Time 23 6:37 AM	Received Time 06/06/2023 6:55 AM EDT	
Specimen (Source)	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/06/202		06/06/2023 6:55 AM	
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/06/202		06/06/2023 6:55 AM	
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	06/06/202		06/06/2023 6:55 AM	
Specimen (Source) Blood Narrative	Anatomical Loc Laterality Venous blood specimen / Un	known	Volume Venipuncture / Unknown	06/06/202		06/06/2023 6:55 AM	
Specimen (Source) Blood Narrative Authorizing Provider Prageet Kumar MD	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/06/202		06/06/2023 6:55 AM	
Specimen (Source) Blood Narrative Authorizing Provider	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	06/06/202	23 6:37 AM	06/06/2023 6:55 AM	
Specimen (Source) Blood Narrative Authorizing Provider Prageet Kumar MD Performing	Anatomical Loc Laterality Venous blood specimen / Un Result Type LAB BLOOD O	known	Volume Venipuncture / Unknown	06/06/202 EDT	23 6:37 AM	06/06/2023 6:55 AM	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/05/2023 9:10 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	104 (H)	74 - 100 mg/dL		06/06/2023 3:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
	,	, al	Volume	06/05/2023 9:10 PM		
Blood	Capillary bloc specimen / U			66/05/202 EDT	3 9:10 PM	06/06/2023 3:04 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	
POCT GLUCOSE METER		RESULTS	5 - Final result (06/05/2	2023 4:28 PN	VI EDT)	
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	99	74 - 100 mg/dL		06/06/2023 3:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			D . I.T.
Specimen (Source)	Laterality		Volume	Collection Time		Received Time
Blood	Capillary bloo specimen / Ur			06/05/2023 4:28 PM EDT		06/06/2023 3:04 AM EDT
Newstine						
Narrative						
	Result Type					
Authorizing Provider	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Authorizing Provider Prageet Kumar MD Performing	LAB POINT OF	CARE TES				
Authorizing Provider Prageet Kumar MD Performing Organization	LAB POINT OF		City/State/ZIP Code	Phone Nu	mber	
Authorizing Provider Prageet Kumar MD Performing	LAB POINT OF				mber	
Authorizing Provider Prageet Kumar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2	mber 2413	
Authorizing Provider Prageet Kumar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Address 565 Abbott Ro	i. ER UNSO	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2	mber 2413	12:07 PM EDT)
Authorizing Provider Prageet Kumar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G	LAB POINT OF Address 565 Abbott Rc	I. ER UNSC Ref	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2 inal result (Analysis	mber 2413 2 06/05/2023	
Authorizing Provider Prageet Kumar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	i. ER UNSO	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2	mber 2413 06/05/2023 Performed At	12:07 PM EDT) Pathologist Signature

Component	value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	134 (H)	74 - 100 mg/dL		06/05/2023 12:42 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			06/05/202 EDT	23 12:07 PM	06/05/2023 12:42 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	J.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		06/05/2023	7:45 AM EDT)
Component	Value	Ref	Test Method	Analysis Time	Deuteursed At	Dath allo aist Cianatuna
Component Glucose, Poc	157 (H)	Range 74 - 100 mg/dL	Test Method	06/05/2023 8:06 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/05/202 EDT	23 7:45 AM	06/05/2023 8:06 AM EDT
Narrative						
Authorizing Provider Prageet Kumar MD	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC - Final result (06/05/2023 7:28 AM EDT)

(ADNORMAL) CDC - F	mai result (ou	/05/202.	\mathbf{J}		
		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
WBC	15.1 (H)	4.5 - 11.0 10*3/uL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RBC	4.45 (L)	4.50 - 6.50 10*6/uL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	13.1 (L)	14.0 - 18.0 g/ dL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

-		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Hematocrit	39.3 (L)	40.0 - 54.0 %		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.5	80.0 - 94.0 fL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.4	26.0 - 34.0 pg		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.3	31.0 - 37.0 g/ dL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	447	145 - 450 10*3/uL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.1	7.4 - 10.4 fL		06/05/2023 8:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / U		Venipuncture / Unknown		23 7:28 AM	06/05/2023 7:58 AM EDT
Narrative						
Authorizing Provider Prageet Kumar MD	Result Type	RDERABLE	S			
-	-					

Performing						
Organization	Address		City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2413		
MAGNESIUM - Final res	sult (06/05/202	23 7:28 AN	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	1.7	1.7 - 2.5 mg/dL		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/05/202 EDT		06/05/2023 7:56 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	Ι.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) BASIC N		ANIEL _ 5	nal result (06/05/20)	7.78 VW		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (06/05/2023 7:28 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	121 (H)	74 - 100 mg/dL		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	11	8 - 27 mg/dL		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.66 (L)	0.80 - 1.30 mg/ dL		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	T (14.1)	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Bun/Creatinine Ratio	16.7	10.0 - 20.1		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	134 (L)	136 - 145 mmol/L		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.7	3.5 - 5.5 mmol/L		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	103	98 - 107 mmol/L		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	25	21 - 31 mmol/L		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	6	3 - 11		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/05/2023 8:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	collaboratic	ON (CKD-E	PI) equation refit			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 7:28 AM	06/05/2023 7:56 AM EDT

Authorizing Provider	Result Type		
Prageet Kumar MD	LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/04/2023 9:48 PM EDT)

Narrative

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	133 (H)	74 - 100 mg/dL		06/05/2023 3:29 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			06/04/2023 9:48 PM EDT		06/05/2023 3:29 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/04/2023 4:08 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	120 (H)	74 - 100 mg/dL		06/04/2023 4:42 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			06/04/2023 4:08 PM EDT		06/04/2023 4:42 PM EDT
Narrative						

Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER	UNSOLICITED	RESULTS Ref	- Final result (06/04/2	2023 11:55 A Analysis	M EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	88	74 - 100 mg/dL		06/04/2023 12:30 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Unl			06/04/202 EDT	3 11:55 AM	06/04/2023 12:30 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD		CARE TES	T DOCKED DEVICE UNS			
rugeet kundt mb			POCKED DEVICE ONS		JOE15	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mbor	
	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	JUJ ADDOLLING.		bullalo, NY 14220, 03	110-020-2		
POCT GLUCOSE METER	UNSOLICITED	RESULTS	- Final result (06/04/2	2023 7:44 AN	M EDT)	
Component		Ref	Tast Mathad	Analysis Time	Derfermed At	Dathalagist Signatura
Component Glucose, Poc	Value 91	Range 74 - 100	Test Method	06/04/2023	CATHOLIC	Pathologist Signature
Glucose, Foc	51	mg/dL		8:08 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood	1	volutile	06/04/202		06/04/2023 8:08 AM
biood	specimen / Unl			EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 137 (H)	Range 74 - 100 mg/dL	Test Method	Time 06/03/2023 10:49 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/03/202 EDT	23 10:33 PM	06/03/2023 10:49 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	JULIS	
Performing			City/State/7ID Code	Phone Nu	mber	
Organization	Address		City/State/ZIP Code	THONE INU		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	l.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/03/2023 4:23 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	120 (H)	74 - 100 mg/dL		06/03/2023 6:37 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ui			06/03/202 EDT	23 4:23 PM	06/03/2023 6:37 PM EDT
Narrative						
Authorizing Provider Prageet Kumar MD	Result Type	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	GULTS	

Performing Organization	Address		City/State/ZID Code	Dhana Nu	ma ha a r	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 138 (H)	Range 74 - 100 mg/dL	Test Method	Time 06/03/2023 12:01 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			06/03/2023 11:29 AM EDT		06/03/2023 12:01 PM EDT
Narrative						
Authorizing Provider Prageet Kumar MD	Result Type LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC - Final result (06/03/2023 11:01 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
WBC	16.4 (H)	4.5 - 11.0 10*3/uL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.17 (L)	4.50 - 6.50 10*6/uL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.2 (L)	14.0 - 18.0 g/ dL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	T . N	Analysis		
Component Hematocrit	Value	Range 40.0 -	Test Method	Time 06/03/2023		Pathologist Signature
Hematocrit	37.3 (L)	40.0 - 54.0 %		06/03/2023 11:03 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.5	80.0 - 94.0 fL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.4	26.0 - 34.0 pg		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCHC	32.8	31.0 - 37.0 g/ dL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.5	11.5 - 14.5 %		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	590 (H)	145 - 450 10*3/uL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	7.4	7.4 - 10.4 fL		06/03/2023 11:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / U		Venipuncture / Unknown		23 11:01 AM	06/03/2023 11:01 AM EDT
Narrative						
	De suit Turs s					
Authorizing Provider Prageet Kumar MD	Result Type	ORDERABLE	S			
-						

Performing						
Organization CATHOLIC HEALTH	Address 565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		1.	bullalo, NY 14220, US	710-020-2	.415	
MAGNESIUM - Final res	sult (06/03/202	23 11:01 A	AM EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	1.8	1.7 - 2.5 mg/dL		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	06/03/202 EDT	3 11:01 AM	06/03/2023 11:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (06/03/2023 11:01 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	163 (H)	74 - 100 mg/dL		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	19	8 - 27 mg/dL		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.72 (L)	0.80 - 1.30 mg/ dL		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref	To at Matha d	Analysis	Daufauna al At	Dath als sist Cisus sture
Component Bun/Creatinine Ratio	Value 26.4 (H)	Range 10.0 -	Test Method	Time 06/03/2023		Pathologist Signature
Bun/Creatinine Ratio	20.4 (П)	20.1		11:26 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	138	136 - 145 mmol/L		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.9	3.5 - 5.5 mmol/L		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	108 (H)	98 - 107 mmol/L		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	22	21 - 31 mmol/L		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.7 (L)	8.6 - 10.3 mg/ dL		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/03/2023 11:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio	on (CKD-E	PI) equation refit			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	iknown	Venipuncture / Unknown		23 11:01 AM	06/03/2023 11:01 AM EDT

Authorizing Provider	Result Type		
Prageet Kumar MD	LAB BLOOD ORDERABLE	S	
		-	
Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413
LABORATORY SERVICES		24	
- MERCY HOSPITAL OF			
BUFFALO			

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/03/2023 7:22 AM EDT)

Narrative

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	130 (H)	74 - 100 mg/dL		06/03/2023 8:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection Time		Received Time
Blood	Capillary blood specimen / Unknown			06/03/202 EDT	3 7:22 AM	06/03/2023 8:11 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/02/2023 9:49 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	164 (H)	74 - 100 mg/dL		06/02/2023 10:05 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			06/02/2023 9:49 PM EDT		06/02/2023 10:05 PM EDT
Narrative						

Authorizing Provider	Result Type							
Prageet Kumar MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS							
Performing								
Organization	Address		City/State/ZIP Code	Phone Nu	mber			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Re	d.	Buffalo, NY 14220, US	716-828-2	2413			
(ABNORMAL) POCT G	LUCOSE MET	r ER UNSC Ref	DLICITED RESULTS - F	inal result (Analysis	06/02/2023	4:15 PM EDT)		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Glucose, Poc	136 (H)	74 - 100 mg/dL		06/02/2023 4:49 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time		
Blood	Capillary bloc specimen / U			06/02/202 EDT	23 4:15 PM	06/02/2023 4:49 PM EDT		
Narrative								
Authorizing Provider	Result Type							
Prageet Kumar MD	21	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2				
(ABNORMAL) POCT G	LUCOSE MET		DLICITED RESULTS - F	inal result (06/02/2023	11:46 AM EDT)		

		Ret		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	237 (H)	74 - 100 mg/dL		06/02/2023 12:05 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			06/02/202 EDT	23 11:46 AM	06/02/2023 12:05 PM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis	-	
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	106 (H)	74 - 100 mg/dL		06/02/2023 8:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			06/02/2023 7:46 AM EDT		06/02/2023 8:05 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
Catholic Health Laboratory Services - Mercy Hospital Of Buffalo	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC - Final result (06/02/2023 6:09 AM EDT)

(ABNORMAL) CBC - Final result (00/02/2025 0:09 AM EDT)									
		Ref		Analysis					
Component	Value	Range	Test Method	Time	Performed At Patho	ologist Signature			
WBC	10.8	4.5 - 11.0 10*3/uL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
RBC	4.20 (L)	4.50 - 6.50 10*6/uL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
Hemoglobin	12.7 (L)	14.0 - 18.0 g/ dL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Hematocrit	37.7 (L)	40.0 - 54.0 %		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.8	80.0 - 94.0 fL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	30.2	26.0 - 34.0 pg		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.6	31.0 - 37.0 g/ dL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.3	11.5 - 14.5 %		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	675 (H)	145 - 450 10*3/uL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	7.7	7.4 - 10.4 fL		06/02/2023 6:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / U		Venipuncture / Unknown		23 6:09 AM	06/02/2023 6:15 AM EDT
Narrative						
Authorizing Provider	Pocult Typo					
Authorizing Provider Prageet Kumar MD	Result Type LAB BLOOD C	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res	sult (06/02/202	23 6:09 AN	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.1	1.7 - 2.5 mg/dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/02/2023 6:09 AM EDT		06/02/2023 6:15 AM EDT
Narrative						
Authorizing Drovidor	Docult Turo					
Authorizing Provider	Result Type		<u>с</u>			
Prageet Kumar MD	LAB BLOOD O	RDERABLE	5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	

6/02/2023 6:09 AM EDT) INIPREMEINSIVE INIE IABULIC PAINEL - rinai re suit (u

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	85	74 - 100 mg/dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	<u> </u>
BUN	25	8 - 27 mg/dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.73 (L)	0.80 - 1.30 mg/ dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range Tes	t Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	34.2 (H)	10.0 - 20.1		06/02/2023 7:07 AM EDT		<u>a uno og se orginatare</u>
Sodium	148 (H)	136 - 145 mmol/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.2	3.5 - 5.5 mmol/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	116 (H)	98 - 107 mmol/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	27	21 - 31 mmol/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	5	3 - 11		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	35	13 - 39 U/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	64 (H)	7 - 52 U/ L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alkaline Phosphatase	121 (H)	34 - 104 U/L		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	6.2	6.1 - 7.9 g/dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	2.7 (L)	3.3 - 4.8 g/dL		06/02/2023 7:07 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	0.8 (L)	1.1 - 2.8		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	0.7	0.3 - 1.0 mg/dL		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		06/02/2023 7:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,				,		
Disease Epidemiology without adjustment f	or race					
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown		23 6:09 AM	06/02/2023 6:15 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB BLOOD O	RDERABLE	S			
Performing	٨ ٥ ٥ ٠ ٠ ٠ ٠			Dhair - N		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		

(ABNORMAL) POCT G		ETER UNSO	LICITED RESULTS - F	inal result (06/01/2023	9:38 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	188 (H)	74 - 100 mg/dL		06/01/2023 9:55 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical	Location /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blo specimen /			06/01/202 EDT	23 9:38 PM	06/01/2023 9:55 PM EDT
Narrative						
Authorizing Provider Prageet Kumar MD Performing Organization	Address		T DOCKED DEVICE UNS City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	iLUCOSE MI Value	TER UNSO Ref Range	LICITED RESULTS - F Test Method	Final result (Analysis Time		3:25 PM EDT) Pathologist Signature
Glucose, Poc	116 (H)	74 - 100 mg/dL		06/01/2023 4:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		06/01/2023 3:25 PM EDT	06/01/2023 4:15 PM EDT

Narrative

Authorizing Provider	Result Type		
Prageet Kumar MD	LAB POINT OF CARE TES	T DOCKED DEVICE UNSO	LICITED RESULTS
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

LABORATORY SERVICES - MERCY HOSPITAL OF

BUFFALO

BUFFALO

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (06/01/2023 12:03 PM EDT)

<u> </u>		Ref	T (N (1))	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	193 (H)	74 - 100 mg/dL		06/01/2023 4:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /	Callestian	Time	Dessived Times
Specimen (Source) Blood	Laterality	4	Volume	Collection	11me 3 12:03 PM	Received Time 06/01/2023 4:15 PM
blood	Capillary blood specimen / Un			EDT	.5 12.05 FIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO						
POCT GLUCOSE METER	UNSOLICITED Value	RESULTS Ref Range	5 - Final result (06/01/2 Test Method	2023 7:44 Al Analysis Time		Pathologist Signature
Glucose, Poc	97	74 - 100 mg/dL		06/01/2023 8:07 AM	CATHOLIC HEALTH	
		nig/uL		EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality	J	Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			EDT	3 7:44 AM	06/01/2023 8:07 AM EDT
Narrative						
Authorizing Provider	Result Type					
Prageet Kumar MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) CBC W/	autodiff (CB	с wітн /	AUTODIFF) - Final res	sult (06/01/	2023 4:17 AM	M EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	10.6	4.5 - 11.0 10*3/uL		06/01/2023 4:30 AM EDT		
RBC	4.00 (L)	4.50 - 6.50 10*6/uL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.8 (L)	14.0 - 18.0 g/ dL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	35.6 (L)	40.0 - 54.0 %		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.0	80.0 - 94.0 fL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.5	26.0 - 34.0 pg		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.1	31.0 - 37.0 g/ dL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		06/01/2023 4:30 AM EDT		
Platelets	779 (H)	145 - 450 10*3/uL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
MPV	7.4	7.4 - 10.4 fL	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	71	50 - 75 %	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	19 (L)	20 - 40 %	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	7	>2 - <10 %	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	3	<=8 %	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	7.5	2.0 - 8.2 1000/uL	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	2.0	0.8 - 4.4 1000/uL	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	0.7	0.1 - 1.1 1000/uL	06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL		06/01/2023 4:30 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		06/01/2023 4:30 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/01/202 EDT	3 4:17 AM	06/01/2023 4:19 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
MAGNESIUM - Final res	sult (06/01/202	23 4:17 AN	M EDT)			
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.0	1.7 - 2.5 mg/dL		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	06/01/202 EDT	3 4:17 AM	06/01/2023 4:19 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) COMP	REHENSIVE M		C PANEL - Final resul		23 4:17 AM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	92	74 - 100 mg/dL		06/01/2023 4:52 AM EDT	
BUN	23	8 - 27 mg/dL		06/01/2023 4:52 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.72 (L)	0.80 - 1.30 mg/ dL		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	31.9 (H)	10.0 - 20.1		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	148 (H)	136 - 145 mmol/L		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	3.8	3.5 - 5.5 mmol/L		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	116 (H)	98 - 107 mmol/L		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	28	21 - 31 mmol/L		06/01/2023 4:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	4	3 - 11		06/01/2023 4:52 AM EDT	

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologis	st Signature
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	35	13 - 39 U/L	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	76 (H)	7 - 52 U/ L	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	127 (H)	34 - 104 U/L	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	6.2	6.1 - 7.9 g/dL	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	2.7 (L)	3.3 - 4.8 g/dL	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	0.8 (L)	1.1 - 2.8	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	0.7	0.3 - 1.0 mg/dL	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2	06/01/2023 CATHOLIC 4:52 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Comment: Effective 5/11/2022,	Calculation	hased on	the Chronic Kidney			
Disease Epidemiology			-			
without adjustment f		•				
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /	06/01/202	3 4:17 AM	06/01/2023 4:19 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O		c			
Lunkyung Shin	LAB BLOOD O	NULNAULL	5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
LABORATORY SERVICES						
- MERCY HOSPITAL OF						
BUFFALO						
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F	-	05/31/2023	9:17 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	124 (H)	74 - 100			CATHOLIC	
		mg/dL		10:22 PM EDT	HEALTH	
				EDI	LABORATORY SERVICES -	
					MERCY	
					HOSPITAL OF	
					BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood			05/31/202	3 9:17 PM	05/31/2023 10:22 PM
	specimen / Un	known		EDT		EDT
NL C						
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	21	CARE TES	T DOCKED DEVICE UNS			
Earikyang Shin			T DOCKED DEVICE ONS		JOE13	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
LABORATORY SERVICES			,			
- MERCY HOSPITAL OF						
BUFFALO						

MR THORACIC SPINE	WO IV CONTRAST (MR	THORACIC SPINE WO IN	V CONTRAST 72146)	- Final result (05/31/2023
8:09 PM EDT)				
Anatomical Region	Laterality	Modality		
T-spine		Magnetic I	Resonance	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/31/2023 10:16 PM EDT	1

Impressions 05/31/2023 10:17 PM EDT

1. Limited exam.

Degenerative changes.
 No significant acute lesion visible.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/31/2023 10:16 PM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/31/2023 10:17 PM

Narrative 05/31/2023 10:17 PM EDT EXAM: MR THORACIC SPINE WO IV CONTRAST 72146 CLINICAL HISTORY: spinal cord stroke (anterior spinal artery syndrome)

TECHNIQUE: Multiplanar, multisequence MR imaging the of the thoracic spine attempted without intravenous contrast.

CONTRAST: None. COMPARISON: None.

FINDINGS: Constipation motion, unable to obtained diagnostic images. Overall anatomic alignment of the thoracic spine. Multilevel disc height loss and disc degenerative changes. No obvious canal stenosis. No obvious cord expansion, atrophy or signal abnormality.

Procedure Note

Charles Chung, MD - 05/31/2023 Formatting of this note might be different from the original. EXAM: MR THORACIC SPINE WO IV CONTRAST 72146 CLINICAL HISTORY: spinal cord stroke (anterior spinal artery syndrome)

TECHNIQUE: Multiplanar, multisequence MR imaging the of the thoracic spine attempted without intravenous contrast.

CONTRAST: None. COMPARISON: None.

FINDINGS: Constipation motion, unable to obtained diagnostic images. Overall anatomic alignment of the thoracic spine. Multilevel disc height loss and disc degenerative changes. No obvious canal stenosis. No obvious cord expansion, atrophy or signal abnormality.

IMPRESSION:

1. Limited exam.

- 2. Degenerative changes.
- 3. No significant acute lesion visible.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/31/2023 10:16 PM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/31/2023 10:17 PM

Authorizing Provider	Result Type
Steve Dofitas MD	IMG MRI PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/31/2023 3:47 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	123 (H)	74 - 100 mg/dL		05/31/2023 4:08 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	lime	Received Time
Blood	Capillary blood specimen / Un			05/31/202 EDT	23 3:47 PM	05/31/2023 4:08 PM EDT
Authorizing Provider	Result Type					
Eunkyung Shin Performing	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/31/2023 11:55 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	141 (H)	74 - 100 mg/dL		05/31/2023 2:48 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/31/202 EDT	23 11:55 AM	05/31/2023 2:48 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

IR US MIDLINE CATHETER PLACEMENT 76937 - Final result (05/31/2023 8:42 AM EDT)

Anatomical Region	Laterality	Modality				
Humerus	Ultrasound					
	Anatomical Location /	Collection Method /				
Specimen (Source)	Laterality	Volume	Collection Time	Received Time		
			05/31/2023 2:34 PM			

EDT

Impressions

05/31/2023 2:53 PM EDT

SUCCESSFUL PLACEMENT OF A MIDLINE AS DESCRIBED ABOVE.

Performed by Marta Ayala, Radiology Practitioner Assistant, RDMS -Registered Vascular Technologist, under the supervision of Dr. Mahmoud Zahra.

Reading Location: BMRADPACS03

Dictated By: Ayala, Marta

Dictated Date/Time: 5/31/2023 2:34 PM

Electronically Signed By: Zahra, Mahmoud

Signed Date/Time: 5/31/2023 2:53 PM

Narrative

05/31/2023 2:53 PM EDT

Indication: 62-year-old male in need of IV access long-term intravenous medical treatment of acute respiratory failure, hyperlipidemia, diabetes.

Findings:

Written informed consent was obtained and placed in the patient's chart for an ultrasound guided midline placement.

The patient was placed in the supine position on the bed. The right upper extremity was scanned utilizing ultrasonography.

Duplex evaluation to include grayscale, color flow and spectral Doppler analysis of the right upper extremity veins with a high frequency linear transducer demonstrates normal patency and blood flow throughout the brachial, basilic and cephalic veins. Veins are compressible where accessible. The decision was made to place a basilic midline.

After sterile prep and drape, 1% Lidocaine was infiltrated down to the level of the vein. Using sterile ultrasound guidance, access was gained into the right basilic vein. After passing a guide wire into the central venous structures, a peel away sheath was placed. Following this, a 4-French single midline was inserted. The catheter was trimmed to 10 cm in length. The midline was then aspirated, flushed and secured in the usual fashion. Static ultrasound images were captured during the examination.

All elements of maximal sterile barrier were utilized including cap, mask, sterile gown, sterile gloves, large sterile drape, hand scrubbing and 2% chlorhexidine for skin cleaning.

Procedure Note

Mahmoud Zahra, MD - 05/31/2023

Procedure Note

Formatting of this note might be different from the original.

Indication: 62-year-old male in need of IV access long-term intravenous medical treatment of acute respiratory failure, hyperlipidemia, diabetes.

Findings:

Written informed consent was obtained and placed in the patient's chart for an ultrasound guided midline placement.

The patient was placed in the supine position on the bed. The right upper extremity was scanned utilizing ultrasonography.

Duplex evaluation to include grayscale, color flow and spectral Doppler analysis of the right upper extremity veins with a high frequency linear transducer demonstrates normal patency and blood flow throughout the brachial, basilic and cephalic veins. Veins are compressible where accessible. The decision was made to place a basilic midline.

After sterile prep and drape, 1% Lidocaine was infiltrated down to the level of the vein. Using sterile ultrasound guidance, access was gained into the right basilic vein. After passing a guide wire into the central venous structures, a peel away sheath was placed. Following this, a 4-French single midline was inserted. The catheter was trimmed to 10 cm in length. The midline was then aspirated, flushed and secured in the usual fashion. Static ultrasound images were captured during the examination.

All elements of maximal sterile barrier were utilized including cap, mask, sterile gown, sterile gloves, large sterile drape, hand scrubbing and 2% chlorhexidine for skin cleaning.

IMPRESSION: SUCCESSFUL PLACEMENT OF A MIDLINE AS DESCRIBED ABOVE.

Performed by Marta Ayala, Radiology Practitioner Assistant, RDMS -Registered Vascular Technologist, under the supervision of Dr. Mahmoud Zahra.

Reading Location: BMRADPACS03

Dictated By: Ayala, Marta

Dictated Date/Time: 5/31/2023 2:34 PM

Electronically Signed By: Zahra, Mahmoud

Signed Date/Time: 5/31/2023 2:53 PM

Authorizing Provider	Result Type
Eunkyung Shin	IMG IR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/31/2023 7:26 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	129 (H)	74 - 100 mg/dL		05/31/2023 8:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/31/202 EDT	23 7:26 AM	05/31/2023 8:19 AM EDT

						•	
IN	а	r	r	а	t	I	ve

Authorizing Provider	Result Type				
Eunkyung Shin	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS				
Performing Organization	Address	City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413		

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/31/2023 7:00 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	11.8 (H)	4.5 - 11.0 10*3/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.03 (L)	4.50 - 6.50 10*6/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.7 (L)	14.0 - 18.0 g/ dL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	36.2 (L)	40.0 - 54.0 %		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.7	80.0 - 94.0 fL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	28.9	26.0 - 34.0 pg		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.3	31.0 - 37.0 g/ dL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
RDW	13.5	11.5 - 14.5 %		05/31/2023 7:44 AM EDT		
Platelets	851 (H)	145 - 450 10*3/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	7.7	7.4 - 10.4 fL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	79 (H)	50 - 75 %		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	13 (L)	20 - 40 %		05/31/2023 7:44 AM EDT		
Monocytes Relative	6	>2 - <10 %		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	2	<=8 %		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	9.3 (H)	2.0 - 8.2 1000/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Lymphocytes Absolute	1.5	0.8 - 4.4 1000/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	0.7	0.1 - 1.1 1000/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		05/31/2023 7:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /		- .	D . IT.
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection	11me 3 7:00 AM	Received Time 05/31/2023 7:13 AM
	specimen / Un	known	Unknown	EDT	.5 7.00 AW	EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res	sult (05/31/202		M EDT)	Anglusia		
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.0	1.7 - 2.5 mg/dL		05/31/2023 7:57 AM EDT		- sale sglot orginature
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/31/202 EDT	3 7:00 AM	05/31/2023 7:12 AM EDT

Ν	а	rr	a	Fi	ve
1 1	а	11	а	ιı	ve

Authorizing Provider Eunkyung Shin	Result Type LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/31/2023 7:00 AM EDT)

Component	Value	Ref Range Test Metho	Analysis d Time	Performed At	Pathologist Signature
Glucose	126 (H)	74 - 100 mg/dL	05/31/2023 7:57 AM EDT		
BUN	26	8 - 27 mg/dL	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.76 (L)	0.80 - 1.30 mg/ dL	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	34.2 (H)	10.0 - 20.1	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	149 (H)	136 - 145 mmol/L	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.0	3.5 - 5.5 mmol/L	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	116 (H)	98 - 107 mmol/L	05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
CO2	28	21 - 31 mmol/L		05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Tathologist Signature
Anion Gap	5	3 - 11		05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.1 (L)	8.6 - 10.3 mg/ dL		05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/31/2023 7:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio		-			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		3 7:00 AM	05/31/2023 7:12 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	5			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/30/2023 8:24 PM EDT)

_Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose, Poc	202 (H)	74 - 100 mg/dL		05/30/2023 9:10 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

	Anatomical Lo	cation /	Collection Method /	Callestian	Time	Dessived Time
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/30/202 EDT	23 8:24 PM	05/30/2023 9:10 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref Range	LICITED RESULTS - F Test Method	inal result (Analysis Time		4:07 PM EDT) Pathologist Signature
Glucose, Poc	132 (H)	74 - 100 mg/dL		05/30/2023 4:27 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/30/202 EDT	23 4:07 PM	05/30/2023 4:27 PM EDT
Narrative						
Authorizing Provider Eunkyung Shin	Result Type LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	

Performing
OrganizationAddressCity/State/ZIP CodePhone NumberCATHOLIC HEALTH
LABORATORY SERVICES
- MERCY HOSPITAL OF565 Abbott Rd.Buffalo, NY 14220, US716-828-2413BUFFALOBuffalo, NY 14220, US716-828-2413716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/30/2023 11:08 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	220 (H)	74 - 100 mg/dL		05/30/2023 11:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/30/202 EDT	3 11:08 AM	05/30/2023 11:31 AM EDT

Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSC Ref Range	LICITED RESULTS - F Test Method	inal result (Analysis Time		8:12 AM EDT) Pathologist Signature
Glucose, Poc	155 (H)	74 - 100		05/30/2023		
		mg/dL		8:28 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/30/202 EDT	3 8:12 AM	05/30/2023 8:28 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/30/2023 4:58 AM EDT)

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	13.2 (H)	4.5 - 11.0 10*3/uL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RBC	4.14 (L)	4.50 - 6.50 10*6/uL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hemoglobin	12.1 (L)	14.0 - 18.0 g/ dL		05/30/2023 5:08 AM EDT		
Hematocrit	37.1 (L)	40.0 - 54.0 %		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.6	80.0 - 94.0 fL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.3	26.0 - 34.0 pg		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.6	31.0 - 37.0 g/ dL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.5	11.5 - 14.5 %		05/30/2023 5:08 AM EDT		
Platelets	905 (H)	145 - 450 10*3/uL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	7.5	7.4 - 10.4 fL		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	74	50 - 75 %		05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
Lymphocytes Relative	16 (L)	20 - 40 %	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	7	>2 - <10 %	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	2	<=8 %	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	9.8 (H)	2.0 - 8.2 1000/uL	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	2.1	0.8 - 4.4 1000/uL	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	0.9	0.1 - 1.1 1000/uL	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL	05/30/2023 5:08 AM EDT	
Basophils Absolute	0.1	0.0 - 0.2 1000/uL	05/30/2023 5:08 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unl	known	Venipuncture / Unknown	05/30/2023 4:58 AM EDT		05/30/2023 5:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD OF	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
DOTINEO						
MAGNESIUM - Final res		3 4:58 Al Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	2.2	1.7 - 2.5 mg/dL		05/30/2023 5:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unl	known	Venipuncture / Unknown	05/30/202 EDT	23 4:58 AM	05/30/2023 5:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD OF	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/30/2023 4:58 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	127 (H)	74 - 100 mg/dL		05/30/2023 5:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
BUN	28 (H)	8 - 27 mg/dL	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.80	0.80 - 1.30 mg/ dL	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	35.0 (H)	10.0 - 20.1	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	147 (H)	136 - 145 mmol/L	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.1	3.5 - 5.5 mmol/L	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	116 (H)	98 - 107 mmol/L	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	25	21 - 31 mmol/L	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	6	3 - 11	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Calcium	8.2 (L)	8.6 - 10.3 mg/ dL	05/30/2023 CATHOLIC 5:41 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
GFR Comment:	>90.0	>=90.0 mL/min/ 1.73 m2		05/30/2023 5:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Effective 5/11/2022,	Calculation	based on	the Chronic Kidney			
Disease Epidemiology without adjustment f		on (CKD-E	PI) equation refit			
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/30/202 EDT	23 4:58 AM	05/30/2023 5:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD OI	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/29/2023 9:12 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	151 (H)	74 - 100 mg/dL		05/29/2023 9:41 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/29/202 EDT	23 9:12 PM	05/29/2023 9:41 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/29/2023 4:05 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	107 (H)	74 - 100 mg/dL		05/29/2023 4:25 PM EDT		
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U		volume		23 4:05 PM	05/29/2023 4:25 PM EDT
Narrative						
Authorizing Drovidor	Docult Turpo					
Authorizing Provider Eunkyung Shin	Result Type	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
			DOCKED DEVICE ONS		0213	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott R	d.	Buffalo, NY 14220, US	716-828-2	2413	
- MERCY HOSPITAL OF BUFFALO						
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component	Value	Ref Range	DLICITED RESULTS - F Test Method	Analysis Time	Performed At	10:58 AM EDT) Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G		Ref		Analysis	Performed At	
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc	Value 314 (H) Anatomical L	Ref Range 74 - 100 mg/dL	Test Method Collection Method /	Analysis Time 05/29/2023 11:26 AM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc	Value 314 (H) Anatomical L Laterality	Ref Range 74 - 100 mg/dL ocation /	Test Method	Analysis Time 05/29/2023 11:26 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc	Value 314 (H) Anatomical L	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method /	Analysis Time 05/29/2023 11:26 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc	Value 314 (H) Anatomical L Laterality Capillary bloc	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method /	Analysis Time 05/29/2023 11:26 AM EDT Collection 05/29/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/29/2023 11:25 AM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood	Value 314 (H) Anatomical L Laterality Capillary bloc	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method /	Analysis Time 05/29/2023 11:26 AM EDT Collection 05/29/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/29/2023 11:25 AM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider	Value 314 (H) Anatomical Le Laterality Capillary bloc specimen / U Result Type	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method / Volume	Analysis Time 05/29/2023 11:26 AM EDT Collection 05/29/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 10:58 AM	Pathologist Signature Received Time 05/29/2023 11:25 AM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative	Value 314 (H) Anatomical Le Laterality Capillary bloc specimen / U Result Type	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method /	Analysis Time 05/29/2023 11:26 AM EDT Collection 05/29/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 10:58 AM	Pathologist Signature Received Time 05/29/2023 11:25 AM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider	Value 314 (H) Anatomical Le Laterality Capillary bloc specimen / U Result Type	Ref Range 74 - 100 mg/dL ocation /	Test Method Collection Method / Volume	Analysis Time 05/29/2023 11:26 AM EDT Collection 05/29/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 10:58 AM	Pathologist Signature Received Time 05/29/2023 11:25 AM

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/29/2023 8:32 AM EDT	
RBC	3.93 (L)	4.50 - 6.50 10*6/uL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	11.5 (L)	14.0 - 18.0 g/ dL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	34.9 (L)	40.0 - 54.0 %		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MCV	88.8	80.0 - 94.0 fL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСН	29.2	26.0 - 34.0 pg		05/29/2023 8:32 AM EDT	
МСНС	32.9	31.0 - 37.0 g/ dL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RDW	13.5	11.5 - 14.5 %		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Platelets	878 (H)	145 - 450 10*3/uL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
MPV	7.6	7.4 - 10.4 fL	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	75	50 - 75 %	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	14 (L)	20 - 40 %	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	8	>2 - <10 %	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	2	<=8 %	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	9.2 (H)	2.0 - 8.2 1000/uL	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.7	0.8 - 4.4 1000/uL	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	1.0	0.1 - 1.1 1000/uL	05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/29/2023 8:32 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		05/29/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/29/202 EDT	3 7:55 AM	05/29/2023 8:09 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD OI	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
MAGNESIUM - Final res	sult (05/29/202	23 7:55 AN Ref	M EDT)	Applycic		
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.1	1.7 - 2.5 mg/dL		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/29/202 EDT	3 7:55 AM	05/29/2023 8:09 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing Organization					mhar	
	Address		City/State/7IP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Rd		City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		

(ABNORMAL) BASIC	METABOLIC P		nal result (05/29/20		EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	124 (H)	74 - 100 mg/dL		05/29/2023 8:37 AM EDT	
BUN	26	8 - 27 mg/dL		05/29/2023 8:37 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.78 (L)	0.80 - 1.30 mg/ dL		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	33.3 (H)	10.0 - 20.1		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	146 (H)	136 - 145 mmol/L		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.1	3.5 - 5.5 mmol/L		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	116 (H)	98 - 107 mmol/L		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	24	21 - 31 mmol/L		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	6	3 - 11		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL		05/29/2023 8:37 AM EDT		
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/29/2023 8:37 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,	Calculation	based on	the Chronic Kidnev			
Disease Epidemiology	Collaboratio					
without adjustment f		cation /	Collection Mathad /			
	Anatomical Lo	cation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source) Blood			-		Time 3 7:55 AM	Received Time 05/29/2023 8:09 AM EDT
Specimen (Source)	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	05/29/202		05/29/2023 8:09 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood		Volume Venipuncture /	05/29/202		05/29/2023 8:09 AM
Specimen (Source) Blood Narrative	Anatomical Loc Laterality Venous blood specimen / Un		Volume Venipuncture /	05/29/202		05/29/2023 8:09 AM
Specimen (Source) Blood	Anatomical Loc Laterality Venous blood	known	Volume Venipuncture / Unknown	05/29/202		05/29/2023 8:09 AM
Specimen (Source) Blood Narrative Authorizing Provider Eunkyung Shin	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	05/29/202		05/29/2023 8:09 AM
Specimen (Source) Blood Narrative Authorizing Provider Eunkyung Shin Performing	Anatomical Loc Laterality Venous blood specimen / Un Result Type LAB BLOOD O	known	Volume Venipuncture / Unknown	05/29/202 EDT	3 7:55 AM	05/29/2023 8:09 AM
Specimen (Source) Blood Narrative Authorizing Provider Eunkyung Shin	Anatomical Loc Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	05/29/202	3 7:55 AM	05/29/2023 8:09 AM

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/29/2023 7:37 AM EDT)

Component	Value	Ref	Test Method	Analysis Time	Darformed At	Pathologist Signature
Component Glucose, Poc	139 (H)	Range 74 - 100 mg/dL	Test Method	05/29/2023 7:57 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/29/202 EDT	23 7:37 AM	05/29/2023 7:57 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing				Dhana Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 126 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/28/2023 10:16 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				23 9:41 PM	05/28/2023 10:16 PM EDT
Narrative						
Authorizing Provider Eunkyung Shin	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/28/2023 5:17 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	173 (H)	74 - 100 mg/dL		05/28/2023 5:34 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical L	ocation /	Collection Method /	Callestian	Time	Dessived Time
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary bloo specimen / U			05/28/202 EDT	23 5:17 PM	05/28/2023 5:34 PM EDT
Narrative						
Authorizing Provider Eunkyung Shin	Result Type LAB POINT C	F CARE TES	T DOCKED DEVICE UN	SOLICITED RES	GULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
- MERCY HOSPITAL OF BUFFALO						
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		05/28/2023	11:59 AM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	189 (H)	74 - 100			CATHOLIC	
		mg/dL		12:28 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	-	Received Time
Blood	Capillary blood specimen / Un			05/28/2023 11:59 AM EDT		05/28/2023 12:28 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
, ,						
Performing	Address		City/State/ZID Code	Dhana Nu	m h o r	
Organization CATHOLIC HEALTH	565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			Bulluio, NY 14220, 03	110 020 2		
XR CHEST 1 VIEW (XR C	CHEST 1 VIEW	71045) -	Final result (05/28/202	3 10:48 AM	EDT)	
Anatomical Region	Lateralit	у	Modality			
Chest			Computed	d Radiograph	ý	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
				05/28/202 EDT	3 11:01 AM	
				201		
Impressions						
05/28/2023 11:02 AM 1. No acute cardiopu		ess.				
Reading Location: S	R-LAMARCA2					
Dictated By: Lamarca	, Anthony					
Dictated Date/Time: 5/28/2023 11:01 AM						
Electronically Signed By: Lamarca, Anthony						
Signed Date/Time: 5	/28/2023 11:0)2 АМ				
Narrative 05/28/2023 11:02 AM	FDT					
55/20/2025 II.02 AM						

CLINICAL HISTORY: mri clearnace. TECHNIQUE: AP upright chest. COMPARISON: 5/24/2023. FINDINGS: Lungs/pleura: Unremarkable. No pleural effusion or pneumothorax. Heart: Unremarkable. No cardiomegaly. Mediastinum: Unremarkable. Bones/joints: Unremarkable. Other: No metallic foreign body. Right-sided PICC line with tip roughly localized axillary vein.

Procedure Note

Narrative

Anthony Lamarca, MD - 05/28/2023 Formatting of this note might be different from the original. CLINICAL HISTORY: mri clearnace. TECHNIQUE: AP upright chest. COMPARISON: 5/24/2023. FINDINGS: Lungs/pleura: Unremarkable. No pleural effusion or pneumothorax. Heart: Unremarkable. No cardiomegaly. Mediastinum: Unremarkable. Bones/joints: Unremarkable. Other: No metallic foreign body. Right-sided PICC line with tip roughly localized axillary vein. IMPRESSION: 1. No acute cardiopulmonary process. Reading Location: SR-LAMARCA2

Dictated By: Lamarca, Anthony

Dictated Date/Time: 5/28/2023 11:01 AM

Electronically Signed By: Lamarca, Anthony

Signed Date/Time: 5/28/2023 11:02 AM

 Authorizing Provider
 Result Type

 Maureen Geary NP
 IMG XR PROCEDURES

Abdomen		Computed Radiography	
Anatomical Region	Laterality	Modality	
XR ABDOMEN 1 VIEW	(XR ABDOMEN 1 VIEW	74018) - Final result (05/28/2023 10:47 AM EDT)	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time			
			05/28/2023 11:04 AM EDT				
Impressions							
Impressions	EDT						

05/28/2023 11:04 AM EDT

Impressions

1. No metallic foreign bodies

Reading Location: SR-LAMARCA2

Dictated By: Lamarca, Anthony

Dictated Date/Time: 5/28/2023 11:04 AM

Electronically Signed By: Lamarca, Anthony

Signed Date/Time: 5/28/2023 11:04 AM

Narrative 05/28/2023 11:04 AM EDT CLINICAL HISTORY: mri clearnace.

TECHNIQUE: Frontal supine view of the abdomen/pelvis.

COMPARISON: None.

FINDINGS: Gastrointestinal: Unremarkable. No bowel dilation. Bones/joints: Unremarkable. Kidneys/Ureters/Bladder: No nephrolithiasis or ureterolithiasis.

Procedure Note

Anthony Lamarca, MD - 05/28/2023

Formatting of this note might be different from the original. CLINICAL HISTORY: mri clearnace.

TECHNIQUE: Frontal supine view of the abdomen/pelvis.

COMPARISON: None.

FINDINGS: Gastrointestinal: Unremarkable. No bowel dilation. Bones/joints: Unremarkable. Kidneys/Ureters/Bladder: No nephrolithiasis or ureterolithiasis.

IMPRESSION:

1. No metallic foreign bodies

Reading Location: SR-LAMARCA2

Dictated By: Lamarca, Anthony

Dictated Date/Time: 5/28/2023 11:04 AM

Electronically Signed By: Lamarca, Anthony

Signed Date/Time: 5/28/2023 11:04 AM

Authorizing Provider	Result Type			
Maureen Geary NP	IMG XR PROCEDURES			
XR SKULL 1-3 VIEWS ()	(R SKULL 1-3 VIEWS 70	250) - Final result (05/2	8/2023 10:47 AM EDT)	
Anatomical Region	Laterality	Modality		
Head		Computed	l Radiography	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/28/2023 11:00 AM EDT	

Narrative **05/28/2023 11:01 AM EDT** 2 views skull History screening for metallic foreign body before MRI No metallic foreign bodies are identified. Reading Location: SR-LAMARCA2 Dictated By: Lamarca, Anthony Dictated Date/Time: 5/28/2023 11:00 AM Electronically Signed By: Lamarca, Anthony Signed Date/Time: 5/28/2023 11:01 AM

Procedure Note

Anthony Lamarca, MD - 05/28/2023

Formatting of this note might be different from the original. 2 views skull

History screening for metallic foreign body before MRI

No metallic foreign bodies are identified.

Reading Location: SR-LAMARCA2

Dictated By: Lamarca, Anthony

Dictated Date/Time: 5/28/2023 11:00 AM

Electronically Signed By: Lamarca, Anthony

Signed Date/Time: 5/28/2023 11:01 AM

 Authorizing Provider
 Result Type

 Maureen Geary NP
 IMG XR PROCEDURES

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/28/2023 7:47 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
	12.0 (H)	4.5 - 11.0 10*3/uL		05/28/2023 8:07 AM EDT		<u> </u>
RBC	3.99 (L)	4.50 - 6.50 10*6/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.7 (L)	14.0 - 18.0 g/ dL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Hematocrit	36.2 (L)	40.0 - 54.0 %		05/28/2023 8:07 AM EDT		
MCV	90.7	80.0 - 94.0 fL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.4	26.0 - 34.0 pg		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.5	31.0 - 37.0 g/ dL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.6	11.5 - 14.5 %		05/28/2023 8:07 AM EDT		
Platelets	665 (H)	145 - 450 10*3/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	9.1	7.4 - 10.4 fL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	79 (H)	50 - 75 %		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	12 (L)	20 - 40 %		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Relative	7	>2 - <10 %		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	2	<=8 %		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	0	<=2 %		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	9.5 (H)	2.0 - 8.2 1000/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.4	0.8 - 4.4 1000/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	0.8	0.1 - 1.1 1000/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/28/2023 8:07 AM EDT		
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/28/2023 8:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spaciment (Course)	Anatomical Lo	cation /	Collection Method /	Collection	Time	Received Time
Specimen (Source) Blood	Laterality Venous blood specimen / Ur	Iknown	Volume Venipuncture / Unknown		23 7:47 AM	05/28/2023 8:03 AM EDT
Narrative						

Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Deufermaine						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	1.	Buffalo, NY 14220, US	716-828-2		
MAGNESIUM - Final res	sult (05/28/202		M EDT)			
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.2	1.7 - 2.5 mg/dL		05/28/2023 8:45 AM	CATHOLIC HEALTH	
				EDT	LABORATORY SERVICES - MERCY	
					HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	Iknown	Venipuncture / Unknown	05/28/202 EDT	23 7:47 AM	05/28/2023 8:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/28/2023 7:47 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	150 (H)	74 - 100 mg/dL		05/28/2023 8:45 AM EDT		
BUN	26	8 - 27 mg/dL		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.72 (L)	0.80 - 1.30 mg/ dL		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	36.1 (H)	10.0 - 20.1		05/28/2023 8:45 AM EDT		
Sodium	144	136 - 145 mmol/L		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.3	3.5 - 5.5 mmol/L		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Sample is sl Chloride	ightly hemolyze 115 (H)	ed, result m 98 - 107	ay be attected.	05/28/2023	CATHOLIC	
	(n)	mmol/L		8:45 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	21	21 - 31 mmol/L		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.8 (L)	8.6 - 10.3 mg/ dL		05/28/2023 8:45 AM EDT		
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/28/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati					

Supprime (Source)	Anatomical Lo	cation /	Collection Method /	Collection	Time e	Dessived Time
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /		23 7:47 AM	Received Time 05/28/2023 8:01 AM
	specimen / Ur	iknown	Unknown	EDT		EDT
Narrative						
Authorizing Provider Eunkyung Shin	Result Type		C			
	LAD BLOOD O	NULNAULL				
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
BUFFALO						
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result (05/28/2023	7:37 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	134 (H)	74 - 100 mg/dL		05/28/2023 8:23 AM	CATHOLIC	
		mg/uL		EDT	LABORATORY	
					SERVICES -	
					MERCY	
					HOSPITAL OF BUFFALO	
					DOTINEO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			05/28/202 EDT	23 7:37 AM	05/28/2023 8:23 AM EDT
Narrative						
Authorizing Provider	Result Type					

Eunkyung Shin	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS
---------------	--

Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/28/2023 12:42 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	147 (H)	74 - 100 mg/dL		05/28/2023 1:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/28/202 EDT	23 12:42 AM	05/28/2023 1:21 AM EDT

Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis	-	
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	128 (H)	74 - 100 mg/dL		05/27/2023 4:51 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		05/27/2023 4:29 PM EDT	05/27/2023 4:51 PM EDT
Narrative				
Authorizing Provider	Pocult Typo			

BUFFALO

Authorizing Provider	Result Type		
Eunkyung Shin	LAB POINT OF CARE TES	T DOCKED DEVICE UNSO	LICITED RESULTS
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

HIV SCREEN/CONFIRM - Final result (05/27/2023 11:55 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
HIV Screen	Nonreactive	Non Reactive		05/27/2023 2:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 11:55 AM	05/27/2023 11:58 AM EDT
Narrative						

Authorizing Provider	Result Type		
Eunkyung Shin	LAB BLOOD ORDERABL	ES	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1150

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/27/2023 11:55 AM EDT)

		Ref		Analysis		
Component WBC (White Blood Cell) Count	Value 14.4 (H)	Range 4.5 - 11.0 10*3/uL	Test Method	Time 05/27/2023 12:09 PM EDT		Pathologist Signature
RBC	3.92 (L)	4.50 - 6.50 10*6/uL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.4 (L)	14.0 - 18.0 g/ dL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	35.1 (L)	40.0 - 54.0 %		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.7	80.0 - 94.0 fL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.2	26.0 - 34.0 pg		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.6	31.0 - 37.0 g/ dL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
RDW	13.6	11.5 - 14.5 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Platelets	824 (H)	145 - 450 10*3/uL	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MPV	8.0	7.4 - 10.4 fL	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	82 (H)	50 - 75 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	8 (L)	20 - 40 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	9	>2 - <10 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	1	<=8 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	11.8 (H)	2.0 - 8.2 1000/uL	05/27/2023 CATHOLIC 12:09 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lymphocytes Absolute	1.2	0.8 - 4.4 1000/uL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.3 (H)	0.1 - 1.1 1000/uL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.1	0.0 - 0.6 1000/uL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/27/2023 12:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		3 11:55 AM	05/27/2023 12:04 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Daufauraina						
Performing Organization	Address		City/State/ZIP Code	Phone Nur	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	
HEPATITIS C ANTIBODY	' - Final result	(05/27/20	23 11:55 AM EDT)	Analysis		
Component	Value	Ref Rang	e Test Method	Time	Performed At	Pathologist Signature
Hepatitis C Antibody	Nonreactive	Nonreact		05/27/2023 2:16 PM EDT		
					CHARITY MAIN STREET	

-				Analysis		
Component	Value	Ref Range	Test Method	Time		Pathologist Signature
Hepatitis C Antibody, S/ Co Ratio	0.14	<=0.79 RATIO		05/27/2023 2:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Comment: Nonreactive (S/CO = (HCV) not detected; to HCV.			-			
Grayzone (S/CO = 0.8 may not be present; from the individual recommendations for	another spect for further t	imen shoul testing or	d be obtained			
Reactive (S/CO = 1.0 of antibodies to HCV automatically be per	; supplementa	al testing				
Results were obtaine Assay. Results may n obtained from differ	ot be used in	nterchange	ably with values			
Specimen (Source)	Anatomical Lo Laterality	-	Collection Method / /olume	Collection	Time	Received Time
Blood	Venous blood specimen / Un		/enipuncture / Jnknown	05/27/2023 EDT		05/27/2023 11:58 AM EDT
Narrative						
Authorizing Duryiday	De suit Turs s					
Authorizing Provider	Result Type					
Eunkyung Shin	LAD BLOOD O	RUERADLES				
Performing						
Organization	Address		City/State/ZIP Code	Phone Nur		
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		3uffalo, NY 14214, US	5 716-862-1	150	
HEPATITIS B SURFACE A	NTIGEN - Fina	al result (05	/27/2023 11:55 AN	l EDT) Analysis		
Component	Value	Ref Range	Test Method	Time	Performed At	Pathologist Signature
Hepatitis B Surface Antigen	Nonreactive	Nonreactiv	e	05/27/2023 2:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES -	

				Analysis		
Component Comment:	Value	Ref Range	Test Method	Time	Performed At	Pathologist Signature
Nonreactive - Indica was not detected in does not exclude the Hepatitis B virus.	the patient s	ample. A	non-reactive resu	lt		
Reactive - Indicates sample has been conf neutralization.	-					
Individuals recently transient reactive r the vaccine.		-		in		
Repeat Reactive, Non reactive for HBsAg b antibody neutralizat	out does not o	-	-			
Results were obtaine Results may not be u with different assay	ised interchar					
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 11:55 AM	05/27/2023 11:58 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLES	5			
Performing	A al al va a a		City (Ctate /ZID Cade	Phone Nu	una la la vi	
Organization CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Address 2157 Main St.		City/State/ZIP Code Buffalo, NY 14214, US			
	sult (05/27/202)))))))))))))))))))))))				
MAGNESIUM - Final res	Suit (03/21/202		IVI EDT)			
		Ref	·	Analysis	Performed At	Pathologist Signature
MAGNESIUM - Final res Component Magnesium	Value 2.2		Test Method	Analysis Time 05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES -	Pathologist Signature
Component	Value	Ref Range 1.7 - 2.5	·	Time 05/27/2023 12:29 PM	CATHOLIC HEALTH LABORATORY	Pathologist Signature
Component Magnesium Comment: Specimen moderately	Value 2.2 hemolyzed, re	Ref Range 1.7 - 2.5 mg/dL	Test Method	Time 05/27/2023 12:29 PM	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Pathologist Signature
Component Magnesium Comment:	Value 2.2 hemolyzed, re appropriate. hemolyzed, re	Ref Range 1.7 - 2.5 mg/dL	Test Method be affected.	Time 05/27/2023 12:29 PM	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Pathologist Signature
Magnesium Comment: Specimen moderately Recollection may be Specimen moderately	Value 2.2 hemolyzed, re appropriate. hemolyzed, re	Ref Range 1.7 - 2.5 mg/dL esult may	Test Method be affected.	Time 05/27/2023 12:29 PM	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature

						•	
IN	а	r	r	а	t	I	ve

Authorizing Provider Eunkyung Shin	Result Type	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/27/2023 11:55 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Dorformed At	Pathologist Signature
Component Glucose	238 (H)	74 - 100 mg/dL		05/27/2023 12:29 PM EDT		
BUN	27	8 - 27 mg/dL		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.84	0.80 - 1.30 mg/ dL		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	32.1 (H)	10.0 - 20.1		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	143	136 - 145 mmol/L		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.3	3.5 - 5.5 mmol/L		05/27/2023 12:29 PM EDT		
Comment: Specimen moderately Recollection may be Specimen moderately Recollection may be	appropriate. hemolyzed, r					

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Chloride	111 (H)	98 - 107 mmol/L		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	23	21 - 31 mmol/L		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	9	3 - 11		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/27/2023 12:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio					
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/27/202 EDT	3 11:55 AM	05/27/2023 12:04 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/27/2023 11:29 AM EDT)

Component		Ref	To at Matha al	Analysis	Deufeuse el At	Dath allo aist Cianatura
Component Glucose, Poc	Value 262 (H)	Range 74 - 100	Test Method	Time 05/27/2023		Pathologist Signature
Glucose, Foc	202 (П)	mg/dL		12:18 PM EDT	HEALTH LABORATORY SERVICES - MERCY	
					HOSPITAL OF	
	Anatomical Lo	cation /	Collection Method /		BUFFALO	
Specimen (Source)	Laterality Vo		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/27/202 EDT	3 11:29 AM	05/27/2023 12:18 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	21	CARE TES	T DOCKED DEVICE UN	SOLICITED RES	SULTS	
, ,						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
	565 Abbott Ro	1.	Buffalo, NY 14220, US			
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5057.5500.1.1					
XR LUMBAR SPINE 2-3	\/IE\//S (YR I I I		INE 2_3 VIEWS 72100)) - Final resul	+ (05/27/2023	
Anatomical Region	Laterali		Modality		11 (03/21/2023	10.39 AN LDT)
L-spine		-)	7	ed Radiograph	у	
·				5 1		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
opeennen (oouree)	Lateranty		Volume		3 10:45 AM	
				EDT		
Impressions						
05/27/2023 10:46 AM						
1. Spondylosis witho		aings				
Reading Location: S	R-LAMARCA2					
Dictated By: Lamarca	, Anthony					
Dictated Date/Time:	5/27/2023 10	:45 AM				
Electronically Signe	d By: Lamarc	a, Anthor	ıy			
Signed Date/Time: 5	-		, ,			
Signed Date/ Time: 5	/27/2025 10.					
Narrative						
05/27/2023 10:46 AM CLINICAL HISTORY: LO		y numbnes	55.			
TECHNIQUE: AP and la	teral views	of the lu	ımbar spine.			
COMPARISON: None.						
FINDINGS: Vertebral bodies: No Alignment: Slight le Disc spaces: Mild to disc spaces. Moderat Soft tissues: Unrema	voscoliosis moderate mu e lower lumb	ltilevel	degenerative endpla		ith relative	preservation of the

Procedure Note				
	D - 05/27/2023 might be different from th ver extremity numbness.	e original.		
TECHNIQUE: AP and lat	eral views of the lumbar sp	bine.		
COMPARISON: None.				
Alignment: Slight levos	oderate multilevel degenera ropathy.		h relative preservation of	the disc spaces. Moderate
IMPRESSION: 1. Spondylosis without	acute findings			
Reading Location: SR-L	AMARCA2			
Dictated By: Lamarca, A	nthony			
Dictated Date/Time: 5/2	27/2023 10:45 AM			
Electronically Signed By	r: Lamarca, Anthony			
Signed Date/Time: 5/27	7/2023 10:46 AM			
Authorizing Provider	Result Type			
Raj Thapar MD	IMG XR PROCEDURES			
US UPPER EXTREMITY Anatomical Region	ARTERIES RIGHT 93931 Laterality	- Final result (05/27/20 Modality	23 10:20 AM EDT)	
Upper Extremities	Right	Ultrasound	ł	
_Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/27/2023 10:36 AM EDT	
Impressions 05/27/2023 10:39 AM				
plaque.	SCALE: No elevated velo		-	
Percent of stenosis Normal 30% to 49% 50% to 75% Greater than 75%	<pre>PSV Velocity</pre>	Ratio < 1.5 1.5 to 2:1 2.1 to 4:1 > 4:1	:1	
Reading Location:	SR-PARRIKH2			
Dictated By: Parrik				
	h, Mannan			
Dictated Date/Time:	h, Mannan 5/27/2023 10:36 AM			
	5/27/2023 10:36 AM wed By: Parrikh, Manna	n		

Narrative

INDICATION: Upper extremity pain.

TECHNIQUE: Right upper extremity arterial doppler. Realtime grayscale, color and pulsed doppler spectral analysis utilized from the subclavian artery to the radial and ulnar arteries.

COMPARISON: None.

FINDINGS RIGHT: Limited evaluation as patient was unable to tolerate exam. Subclavian Artery: 116 cm/sec. Triphasic waveform. Axillary artery: 71 cm/sec. Triphasic waveform. Brachial artery proximal: 98 cm/sec. Triphasic waveform. Brachial artery mid: 54 cm/sec. Triphasic waveform. Radial artery: 102 cm/sec. Triphasic waveform. Ulnar Artery: 99 cm/sec. Triphasic waveform.

Grayscale imaging: Mild diffuse atherosclerotic irregularity.

Procedure Note

Mannan Parrikh, MD - 05/27/2023

Formatting of this note might be different from the original. INDICATION: Upper extremity pain.

TECHNIQUE: Right upper extremity arterial doppler. Realtime grayscale, color and pulsed doppler spectral analysis utilized from the subclavian artery to the radial and ulnar arteries.

COMPARISON: None.

FINDINGS RIGHT: Limited evaluation as patient was unable to tolerate exam. Subclavian Artery: 116 cm/sec. Triphasic waveform. Axillary artery: 71 cm/sec. Triphasic waveform. Brachial artery proximal: 98 cm/sec. Triphasic waveform. Brachial artery mid: 54 cm/sec. Triphasic waveform. Radial artery: 102 cm/sec. Triphasic waveform. Ulnar Artery: 99 cm/sec. Triphasic waveform.

Grayscale imaging: Mild diffuse atherosclerotic irregularity.

IMPRESSION:

1. VELOCITIES/GRAYSCALE: No elevated velocities to suggest significant stenosis. Mild atherosclerotic plaque. 2. WAVEFORM ANALYSIS: Waveforms throughout both lower extremities within normal limits.

Percent of stenosis PSV Velocity Ratio Normal < 150 cm/s < 1.5:1 30% to 49% 150 to 200 cm/s 1.5 to 2:1 50% to 75% 200 to 400 cm/s 2.1 to 4:1 Greater than 75% > 400 cm/s > 4:1

Reading Location: SR-PARRIKH2

Dictated By: Parrikh, Mannan

Dictated Date/Time: 5/27/2023 10:36 AM

Electronically Signed By: Parrikh, Mannan

Signed Date/Time: 5/27/2023 10:39 AM

Authorizing Provider	Result Type
Eunkyung Shin	IMG US PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/27/2023 6:58 AM EDT)

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Glucose, Poc	168 (H)	74 - 100 mg/dL	05/27/2023 CATHOLIC 7:53 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Specimen (Source) Blood	Anatomical Loc Laterality Capillary blood specimen / Un	1	Collection Method / Volume	Collection 05/27/202 EDT	Time 3 6:58 AM	Received Time 05/27/2023 7:53 AM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization CATHOLIC HEALTH	Address 565 Abbott Rd		City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	505765501114	•	541410, 141 11220, 05	110 020 2		
(ABNORMAL) POCT G		ER UNSO Ref		inal result (Analysis	05/26/2023	9:21 PM EDT)
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	107 (H)	74 - 100 mg/dL		05/26/2023 10:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/26/202 EDT	3 9:21 PM	05/26/2023 10:00 PM EDT
Narrative						
Authorizing Provider	Result Type					
Eunkyung Shin	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	JULIS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
POCT GLUCOSE METER		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	96	74 - 100 mg/dL		05/26/2023 6:39 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			

Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		05/26/2023 6:20 PM EDT	05/26/2023 6:38 PM EDT

Narrative					
Authorizing Provider	Result Type				
	21				
Eunkyung Shin	LAB POINT OF	CARE IES	T DOCKED DEVICE UNS	OLICITED RES	SULIS
Performing					
Organization	Address		City/State/ZIP Code	Phone Nu	ımber
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result ((05/26/2023 4:43 PM EDT)
		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Glucose, Poc	111 (H)	74 - 100		05/26/2023	CATHOLIC
		mg/dL		5:04 PM	HEALTH

EDT

LABORATORY SERVICES -MERCY HOSPITAL OF

			BUFFALO	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		05/26/2023 4:43 PM EDT	05/26/2023 5:04 PM EDT
Narrative				
Authorizing Provider	Result Type			
Eunkyung Shin	LAB POINT OF CARE TES	ST DOCKED DEVICE UNSC	DLICITED RESULTS	
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/26/2023 11:49 AM EDT)

BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	161 (H)	74 - 100 mg/dL		05/26/2023 2:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/26/202 EDT	23 11:49 AM	05/26/2023 2:02 PM EDT
Narrative						

Authorizing Provider	Result Type							
Nirosshan Thiruchelvam MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS							
Derforming								
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber			
				716-828-2				
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	SOS ADDOLL K	J.	Buffalo, NY 14220, US	/ 10-020-2	.413			
(ABNORMAL) POCT G	LUCOSE MET	TER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	05/26/2023	8:15 AM EDT)		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Glucose, Poc	152 (H)	74 - 100 mg/dL		05/26/2023 8:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time		
Blood	Capillary blood specimen / Unknown			05/26/2023 8:15 AM EDT		05/26/2023 8:32 AM EDT		
Narrative								
Authorizing Provider	Result Type							
Nirosshan Thiruchelvam MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS			
Performing								
Organization	Address		Address City/State/ZIP Code					
CATHOLIC HEALTH	565 Abbott Rd.		,	Phone Nu				
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	50571050111	d.	Buffalo, NY 14220, US	Phone Nu 716-828-2				
- MERCY HOSPITAL OF			Buffalo, NY 14220, US	716-828-2	2413	4:25 AM EDT)		
- MERCY HOSPITAL OF BUFFALO		ER UNSO	Buffalo, NY 14220, US	716-828-2 inal result (2413 0 5/26/2023	4:25 AM EDT) Pathologist Signature		
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	Buffalo, NY 14220, US	716-828-2 inal result (Analysis	2413 0 5/26/2023			
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component	LUCOSE MET Value	ER UNSO Ref Range 74 - 100 mg/dL	Buffalo, NY 14220, US	716-828-2 inal result (Analysis Time 05/26/2023 2:02 PM	2413 05/26/2023 Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G Component Glucose, Poc	LUCOSE MET Value 106 (H) Anatomical Lo	FER UNSO Ref Range 74 - 100 mg/dL	Buffalo, NY 14220, US LICITED RESULTS - F Test Method Collection Method /	716-828-2 inal result (Analysis Time 05/26/2023 2:02 PM EDT Collection	2413 05/26/2023 Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature		

Narrative

Authorizing Provider Result Type

Nirosshan Thiruchelvam LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS

MD

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	•	Buffalo, NY 14220, US	716-828-2	2413	
PHOSPHORUS - Final re	esult (05/26/20)23 3:35 A	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Phosphorous	2.7	2.5 - 5.0 mg/dL		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/26/2023 3:35 AM EDT		05/26/2023 3:43 AM EDT
Narrative						
Authorizing Provider	Result Type					
Andrew Peterson PA	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/26/2023 3:23 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	15.8 (H)	4.5 - 11.0 10*3/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	3.76 (L)	4.50 - 6.50 10*6/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	10.9 (L)	14.0 - 18.0 g/ dL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Porformed At	Pathologist Signature
Hematocrit	33.0 (L)	40.0 - 54.0 %		05/26/2023 3:44 AM EDT		
MCV	87.9	80.0 - 94.0 fL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.0	26.0 - 34.0 pg		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.9	31.0 - 37.0 g/ dL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.3	11.5 - 14.5 %		05/26/2023 3:44 AM EDT		
Platelets	714 (H)	145 - 450 10*3/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.3	7.4 - 10.4 fL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	78 (H)	50 - 75 %		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	10 (L)	20 - 40 %		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Relative	9	>2 - <10 %		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	2	<=8 %		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	12.3 (H)	2.0 - 8.2 1000/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.6	0.8 - 4.4 1000/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.4 (H)	0.1 - 1.1 1000/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.2	0.0 - 0.2 1000/uL		05/26/2023 3:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Course)	Anatomical Lo	ocation /	Collection Method /	Collection	Time	Received Time
Specimen (Source) Blood	Laterality Venous blood specimen / Ur		Volume Venipuncture / Unknown		23 3:23 AM	05/26/2023 3:41 AM EDT
Narrative						

Authorizing Provider	Result Type					
Raj Thapar MD	LAB BLOOD ORDERABLES					
Performing						
Organization	Address		City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH	565 Abbott Ro	ł.	Buffalo, NY 14220, US	716-828-2	2413	
LABORATORY SERVICES - MERCY HOSPITAL OF						
BUFFALO						
Donnied						
MAGNESIUM - Final res	sult (05/26/202	23 3:23 AI	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.2	1.7 - 2.5		05/26/2023	CATHOLIC	
		mg/dL		4:03 AM	HEALTH	
				EDT	LABORATORY	
					SERVICES - MERCY	
					HOSPITAL OF	
					BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood		Venipuncture /		23 3:23 AM	05/26/2023 3:43 AM
	specimen / Ur	nknown	Unknown	EDT		EDT
Newstine						
Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAB BLOOD O	RDFRABI F	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Ro	ł.	Buffalo, NY 14220, US	716-828-2	2413	
LABORATORY SERVICES						
- MERCY HOSPITAL OF BUFFALO						
DUFFALO						
(ABNORMAL) ALBUM	IN - Final res	ult (05/2	6/2023 3:23 AM EDT)		
. ,		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Albumin	2.7 (L)	3.3 - 4.8		05/26/2023	CATHOLIC	
		g/dL		4:03 AM	HEALTH	
				EDT	LABORATORY	
					SERVICES -	
					MERCY HOSPITAL OF	
					BUFFALO	
					20	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /		23 3:23 AM	05/26/2023 3:43 AM
	specimen / Ur	nknown	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Pocult Tupo					
Authorizing Provider	Result Type		°C			
Robert Gianfagna MD	LAB BLOOD O		3			
			-			

Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Factor of the second s	Performing			
LABORATORY SERVICES - MERCY HOSPITAL OF	Organization	Address	City/State/ZIP Code	Phone Number
	LABORATORY SERVICES - MERCY HOSPITAL OF		Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/26/2023 3:23 AM EDT)

(ADNORWAL) DASIC		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	107 (H)	74 - 100 mg/dL		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	29 (H)	8 - 27 mg/dL		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.84	0.80 - 1.30 mg/ dL		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	34.5 (H)	10.0 - 20.1		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	145	136 - 145 mmol/L		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.8	3.5 - 5.5 mmol/L		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	113 (H)	98 - 107 mmol/L		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	25	21 - 31 mmol/L		05/26/2023 4:03 AM EDT		

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Anion Gap	7	3 - 11		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/26/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
	Anatomical Lo	ocation /	Collection Method /			D
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ui		Venipuncture / Unknown	05/26/202 EDT	23 3:23 AM	05/26/2023 3:43 AM EDT
Narrative						
Authorizing Provider	Posult Typo					
Raj Thapar MD	LAB BLOOD C		ς			
			5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	ILUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result (05/26/2023	1:39 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	103 (H)	74 - 100 mg/dL		05/26/2023 2:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			05/26/202 EDT	23 1:39 AM	05/26/2023 2:22 AM EDT
Narrative						

Authorizing Provider	Result Type						
Nirosshan Thiruchelvam MD	LAB POINT OF	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS					
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413		
POCT GLUCOSE METER		Ref		Analysis			
Component	Value	Range	Test Method	Time		Pathologist Signature	
Glucose, Poc	92	74 - 100 mg/dL		05/25/2023 8:59 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time	
Blood	Capillary bloo specimen / Ur				23 8:38 PM	05/25/2023 8:59 PM EDT	
Narrative							
Authorizing Provider	Result Type						
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS		
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413		
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSO Ref Range	LICITED RESULTS - F Test Method	'inal result (Analysis Time		4:56 PM EDT) Pathologist Signature	
Glucose, Poc	103 (H)	74 - 100		05/25/2023	CATHOLIC		
Glucose, Foc		mg/dL		5:23 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time	
Blood	Capillary bloo specimen / Ur			05/25/202 EDT	23 4:56 PM	05/25/2023 5:22 PM EDT	
Narrative							
Authorizing Provider	Result Type						
Nirosshan Thiruchelvam MD	LAB POINT OF	- care tes	T DOCKED DEVICE UNS	OLICITED RES	OLIS		

Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result (05/25/2023	12:51 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	118 (H)	74 - 100 mg/dL		05/25/2023 1:09 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality	-1	Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/25/202 EDT	3 12:51 PM	05/25/2023 1:09 PM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref Range	LICITED RESULTS - F	inal result (Analysis Time		8:17 AM EDT) Pathologist Signature
Component Glucose, Poc	135 (H)	74 - 100	Test Method		CATHOLIC	Pathologist Signature
Glucose, Foc	135 (П)	mg/dL		8:34 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/25/202 EDT	3 8:17 AM	05/25/2023 8:34 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	ULICITED RES	ULIS	

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/25/2023 3:55 AM EDT)

(ADNORIVIAL) CDC VV/		Ref		Analysis	2023 3.33 AIVI	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/25/2023 4:42 AM EDT		
RBC	3.18 (L)	4.50 - 6.50 10*6/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	9.3 (L)	14.0 - 18.0 g/ dL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	28.6 (L)	40.0 - 54.0 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	90.1	80.0 - 94.0 fL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.4	26.0 - 34.0 pg		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.6	31.0 - 37.0 g/ dL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.4	11.5 - 14.5 %		05/25/2023 4:42 AM EDT		

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets	530 (H)	145 - 450 10*3/uL		05/25/2023 4:42 AM EDT		
MPV	8.8	7.4 - 10.4 fL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	76 (H)	50 - 75 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	11 (L)	20 - 40 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Relative	10 (H)	>2 - <10 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	3	<=8 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	10.0 (H)	2.0 - 8.2 1000/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.4	0.8 - 4.4 1000/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Absolute	1.3 (H)	0.1 - 1.1 1000/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.4	0.0 - 0.6 1000/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		05/25/2023 4:42 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /	C all a sti a r	T '	De estive d'Time e
Specimen (Source) Blood	Laterality Venous blood specimen / Ur		Volume Venipuncture / Unknown	Collection 05/25/202 EDT	23 3:55 AM	Received Time 05/25/2023 4:37 AM EDT
Narrative						
Authorizing Dravidor	De sult Turs s					
Authorizing Provider	Result Type					
			.c			
Raj Thapar MD	LAB BLOOD O	RDERABLE	S			
		RDERABLE	S City/State/ZIP Code	Phone Nu	mber	
Raj Thapar MD Performing	LAB BLOOD O			Phone Nu 716-828-2		
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina	l. I l result ((Ref	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 EDT) Analysis	2413	
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value	l. I l result ((Ref Range	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 EDT) Analysis Time	2413 Performed At	Pathologist Signature
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina	l. I l result ((Ref	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 EDT) Analysis	2413 Performed At	Pathologist Signature
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L)	l. I result (f Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L) Anatomical Lo Laterality	I. I result (I Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US D5/25/2023 3:55 AM Test Method Collection Method / Volume	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L)	I. I result (Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L) Anatomical Lo Laterality Venous blood	I. I result (Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method Collection Method / Volume Venipuncture /	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection 05/25/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/25/2023 5:04 AM
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous Specimen (Source) Blood	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L) Anatomical Lo Laterality Venous blood	I. I result (Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method Collection Method / Volume Venipuncture /	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection 05/25/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/25/2023 5:04 AM
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous Specimen (Source) Blood Narrative	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L) Anatomical Lo Laterality Venous blood specimen / Ur	I. I result (Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method Collection Method / Volume Venipuncture /	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection 05/25/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/25/2023 5:04 AM
Raj Thapar MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) PHOSPI Component Phosphorous Specimen (Source) Blood	LAB BLOOD O Address 565 Abbott Ro HORUS - Fina Value 2.3 (L) Anatomical Lo Laterality Venous blood	I. I result (I Ref Range 2.5 - 5.0 mg/dL ocation /	City/State/ZIP Code Buffalo, NY 14220, US 05/25/2023 3:55 AM Test Method Collection Method / Volume Venipuncture / Unknown	716-828-2 EDT) Analysis Time 05/25/2023 5:16 AM EDT Collection 05/25/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/25/2023 5:04 AM

Performing						
Organization CATHOLIC HEALTH	Address 565 Abbott Rd	l.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Number 716-828-2413		
LABORATORY SERVICES - MERCY HOSPITAL OF						
BUFFALO						
MAGNESIUM - Final res	sult (05/25/202	23 3:55 AN	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	2.2	1.7 - 2.5 mg/dL		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES -	
					MERCY	
					HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/25/202 EDT	3 3:55 AM	05/25/2023 5:04 AM EDT
Narrative						
Authorizing Provider	Result Type					
Andrew Peterson PA	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	Ι.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/25/2023 3:55 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	233 (H)	74 - 100 mg/dL		05/25/2023 5:16 AM EDT		
BUN	37 (H)	8 - 27 mg/dL		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.99	0.80 - 1.30 mg/ dL		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Comment) (- l	Ref		Analysis	Deufeure el At	Dethele sist Cissestowe
Component Bun/Creatinine Ratio	Value 37.4 (H)	Range 10.0 -	Test Method	Time 05/25/2023		Pathologist Signature
bully creatinine Ratio	37.4 (N)	20.1		5:16 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	140	136 - 145 mmol/L		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.7	3.5 - 5.5 mmol/L		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	112 (H)	98 - 107 mmol/L		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	23	21 - 31 mmol/L		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	5	3 - 11		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.3 (L)	8.6 - 10.3 mg/ dL		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	86.1 (L)	>=90.0 mL/min/ 1.73 m2		05/25/2023 5:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio	on (CKD-E	-			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	iknown	Venipuncture / Unknown		23 3:55 AM	05/25/2023 5:04 AM EDT

Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSO Ref Range	LICITED RESULTS - F Test Method	'inal result (Analysis Time	-	1:07 AM EDT) Pathologist Signature
Glucose, Poc	146 (H)	74 - 100 mg/dL		05/25/2023 1:31 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/25/202 EDT	23 1:07 AM	05/25/2023 1:31 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						

Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/24/2023 8:47 PM EDT)

		Ret		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	140 (H)	74 - 100 mg/dL		05/24/2023 9:18 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/24/202 EDT	23 8:47 PM	05/24/2023 9:18 PM EDT
Narrative						

Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS					
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413			2413		
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		05/24/2023	4:15 PM EDT)
Component	Value	Ref	Teet Metheed	Analysis	Deufeure ed At	Dath allo gist Cignature
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	131 (H)	74 - 100 mg/dL		05/24/2023 4:34 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			05/24/2023 4:15 PM EDT		05/24/2023 4:34 PM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address City/State/ZIP Code			Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		05/24/2023	12:27 PM EDT)
<i>c</i>		Ref	T (N (1)	Analysis —·		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	134 (H)	74 - 100 mg/dL		05/25/2023 5:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			05/24/2023 12:27 PM EDT		05/25/2023 5:45 AM EDT

Narrative

Authorizing Provider Result Type

Nirosshan Thiruchelvam LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS MD

Performing						
Organization	Address	City/State/ZIP Code	Phone Number			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413			
XR CHEST 1 VIEW (XR C	CHEST 1 VIEW 71045) -	Final result (05/24/2023	8 9:02 AM EDT)			
Anatomical Region	Laterality	Modality				
Chest		Computed	Radiography			
	Anatomical Location /	Collection Method /				
Specimen (Source)	Laterality	Volume	Collection Time	Received Time		
			05/24/2023 9:05 AM			
			EDT			
Impressions						
	s above.	ikely unusual pneumon electasis.	ia.			
Reading Location: K	MRADPACS01					
Dictated By: CHUNG,	CHARLES					
Dictated Date/Time:	5/24/2023 9:05 AM					
Electronically Signe	d By: CHUNG, CHARLES					
Signed Date/Time: 5/24/2023 9:08 AM						
Narrative						
05/24/2023 9:08 AM E EXAM: XR CHEST 1 VIE						
INDICATION: follow-u	p for metaneb					
TECHNIQUE: Chest single view COMPARISON: 5/21/2023.						
FINDINGS: No significant enlargement of the cardiomediastinal silhouette.						
Patchy dense subsegmental retrocardiac opacities. Ill-defined bronchovascular markings. No pleural effusion or pneumothorax.						
Right midline tip pr						
ET tube tip projects Enteric catheter tip Esophageal probe tip	obscured, underexpo	sed for evaluation in	the lower mediastinu	m.		
Procedure Note						
	(24/2022					
Charles Chung, MD - 05	0/ 24/2023					

Procedure Note

Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.

INDICATION: follow-up for metaneb

TECHNIQUE: Chest single view COMPARISON: 5/21/2023.

FINDINGS: No significant enlargement of the cardiomediastinal silhouette.

Patchy dense subsegmental retrocardiac opacities. III-defined bronchovascular markings. No pleural effusion or pneumothorax.

Right midline tip projects at axilla. ET tube tip projects at mid thoracic trachea. Enteric catheter tip obscured, underexposed for evaluation in the lower mediastinum. Esophageal probe tip projects at lower thoracic esophagus.

IMPRESSION:

- 1. Lines and tubes as above.
- 2. Probable mild pulmonary edema, less likely unusual pneumonia.
- 3. Probable subsegmental retrocardiac atelectasis.

Reading Location: KMRADPACS01

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/24/2023 9:05 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/24/2023 9:08 AM

Authorizing Provider	Result Type
Raj Thapar MD	IMG XR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/24/2023 8:26 AM EDT)

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	132 (H)	74 - 100 mg/dL		05/24/2023 8:55 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			05/24/202 EDT	23 8:26 AM	05/24/2023 8:55 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/24/2023 4:15 AM EDT)

(ADNORIVIAL) CDC VV/		Ref	No robier) - Filial re	Analysis	2023 4.13 AW EDT)
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	16.7 (H)	4.5 - 11.0 10*3/uL		05/24/2023 4:45 AM EDT	
RBC	3.37 (L)	4.50 - 6.50 10*6/uL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	9.9 (L)	14.0 - 18.0 g/ dL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	30.0 (L)	40.0 - 54.0 %		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MCV	89.2	80.0 - 94.0 fL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСН	29.5	26.0 - 34.0 pg		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСНС	33.0	31.0 - 37.0 g/ dL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RDW	13.6	11.5 - 14.5 %		05/24/2023 4:45 AM EDT	

Component	Value	Ref Range Test Method	Analysis Time	Performed At	Pathologist Signature
Platelets	441	145 - 450 10*3/uL	05/24/2023 4:45 AM EDT		
MPV	9.5	7.4 - 10.4 fL	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	82 (H)	50 - 75 %	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	7 (L)	20 - 40 %	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Relative	9	>2 - <10 %	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	2	<=8 %	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	13.7 (H)	2.0 - 8.2 1000/uL	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.2	0.8 - 4.4 1000/uL	05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Absolute	1.5 (H)	0.1 - 1.1 1000/uL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.2	0.0 - 0.2 1000/uL		05/24/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	Venous blood		Venipuncture /	05/24/202		05/24/2023 4:40 AM
biood	specimen / Un		Unknown	EDT	5 1.15 / III	EDT
N1						
Narrative						
Authorizing Provider	Result Type					
Authorizing Provider Nirosshan Thiruchelvam MD		RDERABLE	S			
Nirosshan Thiruchelvam MD Performing	LAB BLOOD O	RDERABLE		Phone Nu	mbor	
Nirosshan Thiruchelvam MD			S City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Address 565 Abbott Rc	J.	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Rc	l. ult (05/24	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2	413	Pathologist Signature
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) ALBUM	LAB BLOOD O Address 565 Abbott Rc	I. ult (05/24 Ref	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 Analysis	413	Pathologist Signature
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) ALBUM Component Albumin	LAB BLOOD O Address 565 Abbott Rc IN - Final resu Value 2.4 (L) Anatomical Lo	l. ult (05/24 Ref Range 3.3 - 4.8 g/dL	City/State/ZIP Code Buffalo, NY 14220, US 4/2023 4:15 AM EDT Test Method Collection Method /	716-828-2 Analysis Time 05/24/2023 4:57 AM EDT	413 Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) ALBUM Component Albumin	Address 565 Abbott Ro Value 2.4 (L) Anatomical Lo Laterality	I. ult (05/2 4 Ref Range 3.3 - 4.8 g/dL bcation /	City/State/ZIP Code Buffalo, NY 14220, US 4/2023 4:15 AM EDT Test Method Collection Method / Volume	716-828-2 Analysis Time 05/24/2023 4:57 AM EDT Collection	413 Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time
Nirosshan Thiruchelvam MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO (ABNORMAL) ALBUM Component Albumin	LAB BLOOD O Address 565 Abbott Rc IN - Final resu Value 2.4 (L) Anatomical Lo	I. ult (05/24 Ref Range 3.3 - 4.8 g/dL ocation /	City/State/ZIP Code Buffalo, NY 14220, US 4/2023 4:15 AM EDT Test Method Collection Method /	716-828-2 Analysis Time 05/24/2023 4:57 AM EDT	413 Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	

Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/24/2023 4:15 AM EDT)

		Ref	nai result (03/24/20	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	173 (H)	74 - 100 mg/dL		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	37 (H)	8 - 27 mg/dL		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.10	0.80 - 1.30 mg/ dL		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	33.6 (H)	10.0 - 20.1		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	144	136 - 145 mmol/L		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.8	3.5 - 5.5 mmol/L		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	112 (H)	98 - 107 mmol/L		05/24/2023 4:57 AM EDT		
CO2	26	21 - 31 mmol/L		05/24/2023 4:57 AM EDT		

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Anion Gap	6	3 - 11		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.4 (L)	8.6 - 10.3 mg/ dL		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	75.9 (L)	>=90.0 mL/min/ 1.73 m2		05/24/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
	Anatomical Lo	ocation /	Collection Method /		- .	D . I.T.
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/24/202 EDT	23 4:15 AM	05/24/2023 4:40 AM EDT
Narrative						
Authorizing Provider	Posult Typo					
Carrie Jones NP	LAB BLOOD C		ς			
curre sones m			5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	149 (H)	74 - 100 mg/dL		05/24/2023 4:43 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				23 4:10 AM	05/24/2023 4:43 AM EDT
Narrative						

Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS				
Dorforming						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US			
(ABNORMAL) POCT G	LUCOSE METI	ER UNSO	LICITED RESULTS - F	inal result (05/24/2023	12:29 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	139 (H)	74 - 100 mg/dL		05/24/2023 3:48 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Specimen (Source) Blood	Laterality Capillary blood	4	Volume	Collection		Received Time 05/24/2023 3:48 AM
Specimen (Source) Blood	Laterality Capillary blood specimen / Un		Volume		Time 23 12:29 AM	Received Time 05/24/2023 3:48 AM EDT
	Capillary blood		Volume	05/24/202		05/24/2023 3:48 AM
Blood	Capillary blood		Volume	05/24/202		05/24/2023 3:48 AM
Blood	Capillary blood		Volume	05/24/202		05/24/2023 3:48 AM
Blood	Capillary blood specimen / Un Result Type	known	Volume	05/24/202 EDT	23 12:29 AM	05/24/2023 3:48 AM
Blood Narrative Authorizing Provider Valeri Kraskovsky MD	Capillary blood specimen / Un Result Type	known		05/24/202 EDT	23 12:29 AM	05/24/2023 3:48 AM
Blood Narrative Authorizing Provider	Capillary blood specimen / Un Result Type	known		05/24/202 EDT	23 12:29 AM	05/24/2023 3:48 AM
Blood Narrative Authorizing Provider Valeri Kraskovsky MD Performing	Capillary blood specimen / Un Result Type LAB POINT OF	known CARE TES	T DOCKED DEVICE UNS	05/24/202 EDT OLICITED RES	23 12:29 AM SULTS mber	05/24/2023 3:48 AM

		Rei		Allalysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	202 (H)	74 - 100 mg/dL		05/23/2023 8:38 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/23/202 EDT	23 8:07 PM	05/23/2023 8:38 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	

Performing				
Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
CCA/LHC (05/23/2023 (6:35 PM EDT)			
Anatomical Region	Laterality	Modality		
		X-Ray Angi	ography	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Narrative				
05/23/2023 6:35 PM E This result has an a	EDT attachment that is not	t available.		

Narrative • Dist Cx lesion is 90% stenosed with 90% stenosed side branch in 3rd Mrg. Prox LAD to Mid LAD lesion is 30% stenosed. Ost RCA to Dist RCA lesion is 100% stenosed. Conclusion: Occluded right coronary artery with well-developed left-to-right collaterals Severe disease in the distal circumflex Recommendations: Medical therapy for coronary artery disease At this time there is no indication for revascularization Catheterization results discussed with family. Procedure Details Access was obtained in the right radial artery using ultrasound guidance. A 5Fr Terumo glidesheath was inserted without difficulty. Coronary angiography was performed using a 5Fr TIG 4.0. The equipment was removed and hemostasis was achieved. The patient was transferred to the MIU in stable condition. Coronary Findings Diagnostic Dominance: Right Left Main: The vessel was visualized by selective angiography and is angiographically normal. The left main is a large vessel that bifurcates into the circumflex and LAD Left Anterior Descending: The vessel was visualized by selective angiography. The LAD is a moderatesized vessel that gives off a very small first diagonal branch and a moderate second diagonal branch. There is mild disease in the proximal LAD. The distal LAD is relatively normal angiographically and gives epicardial collaterals to the occluded right PDA Prox LAD to Mid LAD lesion is 30% stenosed. TIMI flow is 3. Left Circumflex: The vessel was visualized by selective angiography. The circumflex is a large vessel that gives off a small first obtuse marginal branch and a small second obtuse marginal branch. The distal circumflex then has severe disease and terminates as a small OM 3 Dist Cx lesion is 90% stenosed with 90% stenosed side branch in 3rd Mrg. TIMI flow is 3. Right Coronary Artery: The vessel was visualized by selective angiography. The right coronary artery is occluded proximally. The right PDA and posterolateral branches fill via left to right collaterals Ost RCA to Dist RCA lesion is 100% stenosed. TIMI flow is 0. Right Posterior Descending Artery: RPDA filled by collaterals from Dist LAD. Intervention No interventions have been documented. Heart Failure (within 2 weeks): NYHA Class IV Anginal Classification (within 2 weeks): NSTEMI Risk Factors: Current smoker Chronic kidney disease Dyslipidemia Hypertension Diabetes mellitus/therapy Cardiomyopathy or sys dys Male gender 62-year-old man with history of tobacco use, diabetes, hypertension, hyperlipidemia, COPD who presented 5/11/2023 after being found down with an out of hospital cardiac arrest. He apparently had a prolonged code in the field and required multiple shocks and medications. He had elevated troponin and this increased to over 50,000. 3 echocardiograms during the hospitalization have shown normal LV systolic function with inferior wall motion abnormalities. He remains intubated in the ICU and has not had definitive neurologic recovery. He is now referred for coronary angiography to evaluate for NSTEMI. NCDR CATHPCI ACC-NCDR CathPCI V5 Collection Form Pre-Procedure Information - Electrocardiac assessment method: ECG - The assessment result was abnormal. Abnormal assessment findings include: ventricular fibrillation; sustained VT; T-wave inversions; ST deviation greater than or equal to 0.5 mm; other electrocardiac abnormality Cardiac Arrest - Cardiac arrest(s) occurred outside of this facility. Indications and Presentation - Indication(s) for cath lab visit: ACS greater than 24 hours and cardiac arrhythmia Authorizing Provider Result Type CV CARDIAC CATH PROCEDURES Divya Gumber MD

(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F	-	05/23/2023	4:45 PM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	187 (H)	74 - 100 mg/dL		05/23/2023 5:06 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/23/202 EDT	3 4:45 PM	05/23/2023 5:06 PM EDT
Narrative						
Authorizing Provider Nirosshan Thiruchelvam	Result Type				ти тс	
MD	LAB POINT OF	CARETES	T DOCKED DEVICE UNS	OLICITED RES	JULIS	
Performing	A al al 4 a a a					
Organization CATHOLIC HEALTH	Address 565 Abbott Ro	1	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			Builaio, INT 14220, US	710-020-2	415	
CULTURE, BLOOD ANA	EROBIC - Final Value	result (05 Ref Range	7/23/2023 1:17 PM ED Test Method	DT) Analysis Time	Performed At	Pathologist Signature
Culture, Blood Anaerobic	No growth after 5 days incubation.			05/28/2023 4:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/23/202 EDT	3 1:17 PM	05/23/2023 1:24 PM EDT
Narrative	·					
Authorizin a Dura idau	Description of					
Authorizing Provider	Result Type					
Raj Thapar MD		JLUGI - G	ENERAL ORDERABLES			
Performing				-		
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Culture, Blood Anaerobic	No growth after 5 days incubation.			05/28/2023 4:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/23/202 EDT	23 1:17 PM	05/23/2023 1:24 PM EDT
Narrative						
Authorizing Provider Raj Thapar MD Performing		DLOGY - G	ENERAL ORDERABLES			
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
CULTURE, BLOOD - Fina	al result (05/23	/2023 1:1 Ref	7 PM EDT)	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/28/2023 4:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF	

Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/28/2023 4:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	ıknown	Venipuncture / Unknown	05/23/202 EDT	23 1:17 PM	05/23/2023 1:24 PM EDT
Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAB MICROBI	ology - G	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	1150	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.	,		05/28/2023 4:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/23/202 EDT		05/23/2023 1:24 PM EDT
Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAB MICROBIO	DLOGY - GI	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	

CULTURE, RESPIRATORY - Final result (05/23/2023 1:15 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Culture, Respiratory	Normal respiratory flora isolated; No recognized pathogens.			05/25/2023 3:13 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	Rare White Blood Cells seen.			05/25/2023 3:13 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	<=25 Epithelial cells per low power field			05/25/2023 3:13 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	No Organisms seen			05/25/2023 3:13 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	

	Anatomical	Location /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Respiratory (Sputum)				05/23/202 EDT	23 1:15 PM	05/23/2023 1:23 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB MICRO	BIOLOGY - G	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main S	it.	Buffalo, NY 14214, US	716-862-1	1150	
(ABNORMAL) POCT G	ILUCOSE ME		LICITED RESULTS - F		(05/23/2023	11:33 AM EDT)
Comment) <i>(</i> =	Ref	To at Martha a d	Analysis		Dath also sist Cisus stores
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	249 (H)	74 - 100 mg/dL		05/23/2023 11:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical	Location /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blc specimen / l			05/23/202 EDT	23 11:33 AM	05/23/2023 11:50 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam	LAB POINT (OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
MD						
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott	Rd.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/23/2023 7:27 AM EDT)

- MERCY HOSPITAL OF

BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	252 (H)	74 - 100 mg/dL		05/23/2023 8:00 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/23/202 EDT	23 7:27 AM	05/23/2023 8:00 AM EDT

rrative	Na
nauve	ING

Authorizing Provider	Result Type		
Nirosshan Thiruchelvam MD	LAB POINT OF CARE TES	T DOCKED DEVICE UNSO	LICITED RESULTS
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/23/2023 3:38 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
	19.6 (H)	4.5 - 11.0 10*3/uL		05/23/2023 4:02 AM EDT		
RBC	3.67 (L)	4.50 - 6.50 10*6/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	10.8 (L)	14.0 - 18.0 g/ dL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	32.6 (L)	40.0 - 54.0 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.9	80.0 - 94.0 fL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.5	26.0 - 34.0 pg		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
МСНС	33.2	31.0 - 37.0 g/ dL		05/23/2023 4:02 AM EDT		
RDW	13.3	11.5 - 14.5 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	400	145 - 450 10*3/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	9.4	7.4 - 10.4 fL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Relative	82 (H)	50 - 75 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	7 (L)	20 - 40 %		05/23/2023 4:02 AM EDT		
Monocytes Relative	10 (H)	>2 - <10 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Relative	1	<=8 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	0	<=2 %		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Neutrophils Absolute	16.1 (H)	2.0 - 8.2 1000/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.4	0.8 - 4.4 1000/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	2.0 (H)	0.1 - 1.1 1000/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/23/2023 4:02 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 3:38 AM	05/23/2023 3:54 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	21	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2		
MAGNESIUM - Final res	sult (05/23/20)	23 3:38 AI	M EDT)			

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.2	1.7 - 2.5 mg/dL		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection		Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown		3 3:38 AM	05/23/2023 3:54 AM EDT
Narrative						
Authorizing Provider Raj Thapar MD	Result Type LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) BASIC		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose	218 (H)	74 - 100 mg/dL		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	35 (H)	8 - 27 mg/dL		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.07	0.80 - 1.30 mg/ dL		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	32.7 (H)	10.0 - 20.1		05/23/2023 4:22 AM EDT		

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	142	136 - 145 mmol/L		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.3	3.5 - 5.5 mmol/L		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	111 (H)	98 - 107 mmol/L		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	23	21 - 31 mmol/L		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL		05/23/2023 4:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	78.5 (L)	>=90.0 mL/min/ 1.73 m2		05/23/2023 4:22 AM EDT		
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati	on (CKD-E	-			
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture / Unknown	Collection 05/23/202 EDT	Time 23 3:38 AM	Received Time 05/23/2023 3:54 AM EDT
Narrative	specimen / Ur		CHKHOWH			
Authorizing Provider	Result Type					
Carrie Jones NP	LAB BLOOD O	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	05/23/2023	12:38 AM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	236 (H)	74 - 100 mg/dL		05/23/2023 12:53 AM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/23/202 EDT	23 12:38 AM	05/23/2023 12:53 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSO Ref Range	LICITED RESULTS - F	inal result (Analysis Time		8:23 PM EDT) Pathologist Signature
Glucose, Poc	227 (H)	74 - 100 mg/dL		05/22/2023 8:39 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Capillary blood specimen / Unknown		05/22/2023 8:23 PM EDT	05/22/2023 8:39 PM EDT
Narrative				
Authorizing Provider	Result Type			

HOSPITAL OF BUFFALO

Nirosshan Thiruchelvam LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS MD

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G	LUCOSE METE		LICITED RESULTS - F	-	05/22/2023	4:27 PM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	192 (H)	74 - 100 mg/dL		05/22/2023 5:19 PM EDT		Tathologist signature
Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unl			05/22/202 EDT		05/22/2023 5:19 PM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	
IR US MIDLINE CATHET Anatomical Region	ER PLACEMEN Laterality		Modality		EDT)	
Humerus			Ultrasoun	d		
	Anatomical Loc	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection 05/22/202 EDT		Received Time
Impressions						
05/22/2023 5:40 PM E	DT					

Impressions

SUCCESSFUL PLACEMENT OF A MIDLINE AS DESCRIBED ABOVE.

Performed by Lisa Hanavan, Radiology Practitioner Assistant, under the supervision of Dr. Mahmoud Zahra

••

Reading Location: BMRADPACS03

Dictated By: HANAVAN, LISA

Dictated Date/Time: 5/22/2023 3:39 PM

Electronically Signed By: Zahra, Mahmoud

Signed Date/Time: 5/22/2023 5:40 PM

Narrative

05/22/2023 5:40 PM EDT

Indication: 62-year-old male in need of IV access.

Findings:

Written informed consent was obtained and placed in the patient's chart for an ultrasound guided midline placement.

The patient was placed in the supine position on the bed. The right upper extremity was scanned utilizing ultrasonography. Baseline arm circumference was obtained at 10 cm from antecubital fossa and it measures 33 cm.

Duplex evaluation to include grayscale analysis of the right upper extremity veins with a high frequency linear transducer demonstrates normal patency and blood flow throughout the brachial, basilic and cephalic veins. Veins are compressible where accessible. The decision was made to place a cephalic midline.

After sterile prep and drape, 1% Lidocaine was infiltrated down to the level of the vein. Using sterile ultrasound guidance, access was gained into the cephalic vein. After passing a guide wire into the central venous structures, a peel away sheath was placed. The catheter was trimmed to 20 cm in length. Following this, a 5-French dual midline was inserted over the guidewire, and the guidewire was removed. The midline was then aspirated, flushed and secured in the usual fashion. Static ultrasound images were captured during the examination.

All elements of maximal sterile barrier were utilized including cap, mask, sterile gown, sterile gloves, large sterile drape, hand scrubbing and 2% chlorhexidine for skin cleaning.

Procedure Note

Mahmoud Zahra, MD - 05/22/2023

Procedure Note

Formatting of this note might be different from the original. Indication: 62-year-old male in need of IV access.

Findings:

Written informed consent was obtained and placed in the patient's chart for an ultrasound guided midline placement.

The patient was placed in the supine position on the bed. The right upper extremity was scanned utilizing ultrasonography. Baseline arm circumference was obtained at 10 cm from antecubital fossa and it measures 33 cm.

Duplex evaluation to include grayscale analysis of the right upper extremity veins with a high frequency linear transducer demonstrates normal patency and blood flow throughout the brachial, basilic and cephalic veins. Veins are compressible where accessible. The decision was made to place a cephalic midline.

After sterile prep and drape, 1% Lidocaine was infiltrated down to the level of the vein. Using sterile ultrasound guidance, access was gained into the cephalic vein. After passing a guide wire into the central venous structures, a peel away sheath was placed. The catheter was trimmed to 20 cm in length. Following this, a 5-French dual midline was inserted over the guidewire, and the guidewire was removed. The midline was then aspirated, flushed and secured in the usual fashion. Static ultrasound images were captured during the examination.

All elements of maximal sterile barrier were utilized including cap, mask, sterile gown, sterile gloves, large sterile drape, hand scrubbing and 2% chlorhexidine for skin cleaning.

IMPRESSION: SUCCESSFUL PLACEMENT OF A MIDLINE AS DESCRIBED ABOVE.

Performed by Lisa Hanavan, Radiology Practitioner Assistant, under the supervision of Dr. Mahmoud Zahra

Reading Location: BMRADPACS03

Dictated By: HANAVAN, LISA

Dictated Date/Time: 5/22/2023 3:39 PM

Electronically Signed By: Zahra, Mahmoud

Signed Date/Time: 5/22/2023 5:40 PM

Authorizing Provider	Result Type
Raj Thapar MD	IMG IR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 11:55 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	252 (H)	74 - 100 mg/dL		05/22/2023 12:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/22/202 EDT	23 11:55 AM	05/22/2023 12:16 PM EDT

Authorizing Provider Result Type Nirosshan Thiruchelvam LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS MD Normal Statement S

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

TRANSTHORACIC ECHO (TTE) LIMITED W/ CONTRAST (05/22/2023 9:31 AM EDT)

		Ref	,	Analysis	,	Pathologist
Component	Value	Range Te	st Method	Time	Performed At	Signature
BSA	2.34	m2			CVSYNGODYNAMICSEC	НО
2D EF	63	%			CVSYNGODYNAMICSEC	НО
LVIDD	5.05	7.42 - 10.31 cm			CVSYNGODYNAMICSEC	НО
LVIDS	3.31	4.29 - 6.50 cm			CVSYNGODYNAMICSEC	НО
IVSd	0.92	0.6 - 1.1 cm			CVSYNGODYNAMICSEC	НО
LVPWd	1.31	0.6 - 1.1 cm			CVSYNGODYNAMICSEC	НО
FS	34	28 - 44 %			CVSYNGODYNAMICSEC	НО
Est. RA pres	3.0	mmHg			CVSYNGODYNAMICSEC	НО
ZLVIDS	-3.70				CVSYNGODYNAMICSEC	НО
ZLVIDD	-5.49				CVSYNGODYNAMICSEC	HO
Main PA dia	34.5	cm			CVSYNGODYNAMICSEC	НО
Anatomical Region		Laterality		Modality		
				Ultrasound		
Specimen (Source)	Anator Lateral	nical Location / ity	Collection Volume	Method /	Collection Time	Received Time
Narrative						
05/22/2023 12:36 This result has a	РМ EDT <mark>n attachm</mark>	ent that is n	ot available	2.		

Narrative Technically difficult study ٠ Limited study, definity contrast was used Left ventricular systolic function is normal with an ejection fraction of 55-60%. Left Ventricle: Regional wall motion cannot be accurately assessed. Left Ventricle Left ventricle cavity size appears normal. Wall thickness was not well visualized. Left ventricular systolic function is normal with an ejection fraction of 55-60%. Regional wall motion cannot be accurately assessed. Right Ventricle Right ventricle cavity size appears normal. Systolic function is not well visualized. Left Atrium Left atrium cavity size is normal. Right Atrium Right atrium cavity size is normal. Mitral Valve The mitral valve was not well visualized. Tricuspid Valve The tricuspid valve was not well visualized. Study Details A limited echo was performed using limited 2D. Definity contrast was used during the study. The study had technical difficulties. The study was difficult due to patient's clinical status and body habitus. ECG The ECG shows atrial flutter. Prior Study

Prior TTE study available for comparison. Prior study date: 5/16/2023.

 Authorizing Provider
 Result Type

 Marwan Saoud MD
 CV ECHO PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 8:02 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	235 (H)	74 - 100 mg/dL		05/22/2023 8:29 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/22/202 EDT	23 8:02 AM	05/22/2023 8:29 AM EDT
Narrative						
Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 4:38 AM EDT)							
		Ref		Analysis			
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature	
Glucose, Poc	217 (H)	74 - 100 mg/dL		05/22/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		
	Anatomical Lo	cation /	Collection Method /				
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time	
Blood	Capillary blood specimen / Un			05/22/202 EDT	3 4:38 AM	05/22/2023 5:07 AM EDT	
Narrative							
Authorizing Provider	Result Type						
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS		
Performing							
Organization	Address		City/State/ZIP Code	Phone Nu	mber		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413		

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/22/2023 3:46 AM EDT)

(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Ref		Analysis	2020 0.1071	,
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	19.1 (H)	4.5 - 11.0 10*3/uL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	3.80 (L)	4.50 - 6.50 10*6/uL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.2 (L)	14.0 - 18.0 g/ dL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	33.9 (L)	40.0 - 54.0 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
MCV	89.3	80.0 - 94.0 fL		05/22/2023 4:19 AM EDT		
МСН	29.4	26.0 - 34.0 pg		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.9	31.0 - 37.0 g/ dL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.1	11.5 - 14.5 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	331	145 - 450 10*3/uL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	9.5	7.4 - 10.4 fL		05/22/2023 4:19 AM EDT		
Neutrophils Relative	82 (H)	50 - 75 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	9 (L)	20 - 40 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Relative	8	>2 - <10 %)	05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Eosinophils Relative	1	<=8 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	0	<=2 %		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	15.7 (H)	2.0 - 8.2 1000/uL		05/22/2023 4:19 AM EDT		
Lymphocytes Absolute	1.7	0.8 - 4.4 1000/uL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.5 (H)	0.1 - 1.1 1000/uL		05/22/2023 4:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/22/2023 4:19 AM EDT		
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/22/2023 4:19 AM EDT		
	Anatomical Lo	cation /	Collection Method /	Collection		Durative d Time
Specimen (Source) Blood	Laterality Venous blood specimen / Ur		Volume Venipuncture / Unknown	Collection 05/22/202 EDT	23 3:46 AM	Received Time 05/22/2023 4:10 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	.5			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) TRIGLY		al result	(05/22/2023 3-46 AM			
(ADNORWAL) TRIGER	CERIDES - FIII	Ref	(03/22/2023 3.40 AW	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Triglycerides	296 (H)	35 - 149 mg/dL		05/22/2023 7:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500	-					
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/22/202 EDT		05/22/2023 4:09 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD C	RDERABLE	5			
Performing	A					
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
(ABNORMAL) CK - Fin	al result (05/	22/2023	3:46 AM EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
CPK, Total	390 (H)	38 - 174 U/L		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/22/202 EDT		05/22/2023 4:09 AM EDT
Narrative						

Performing	A dalara a		
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/22/2023 3:46 AM EDT)

(ADINORIVIAL) BASIC		Ref	int (03/22/20	Analysis		
Component	Value	Range Test Me	thod	Time	Performed At	Pathologist Signature
Glucose	236 (H)	74 - 100 mg/dL		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	36 (H)	8 - 27 mg/dL		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.15	0.80 - 1.30 mg/ dL		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	31.3 (H)	10.0 - 20.1		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	141	136 - 145 mmol/L		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.1	3.5 - 5.5 mmol/L		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	110 (H)	98 - 107 mmol/L		05/22/2023 4:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	24	21 - 31 mmol/L		05/22/2023 4:45 AM EDT		

Component Value Range Test Method Time Performed AL Pathologist Signature Anion Gap 7 3 - 11 05/22/2023 CATHOLIC 445 AM Generation 8.0 (L) 8.6 - Discover and the control of the control			Ref		Analysis		
445 ÅM HELTH EDT LABCRATORY SERVICES - MERCY HOSPITAL OF BUFFALO Calcium 8.0 (L) 8.6 - 10.3 mg/ dL 05/22/2023 CATHOLIC 445 ÅM HELTH HEL	Component	Value		Test Method		Performed At	Pathologist Signature
10.3 mg/ dL 10.3 mg/ L 443 5 AM HEALTH EDT HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF GFR 72.0 (L) > =90.0 mL/min/ T.73 m2 05/22/2023 CATHOLIC 445 AM HEALTH	Anion Gap	7	3 - 11		4:45 AM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
mL/min/ 1.73 m2 445 AM 445 AM 445 AM 445 AM 445 AM 445 AM 445 AM 445 AM 445 AM 446 AM 405 TRAIL OF BUFFALO Comment: Effective 5/11/2022, Calculation based on the Chronic Kidney prisease Epidemiology Collaboration (CK0-EPI) equation refit without adjustment for race Anatomical Location / Collection Method / Laterality Collection Time Collection Time Anatomical Location / Collection Method / Unknown Received Time 05/22/2023 3:46 AM EDT Received Time 05/22/2023 4:09 AM EDT Blood Venous blood specimen / Unknown Venipuncture / Unknown 05/22/2023 3:46 AM EDT 05/22/2023 4:09 AM EDT Authorizing Provider Result Type EDT 05/22/2023 4:09 AM EDT 05/22/2023 4:09 AM EDT Authorizing Provider Result Type City/State/ZIP Code Phone Number Authorizing Provider Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES S65 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 CATHOLIC HEALTH LABORATORY SERVICES S65 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 CATHOLIC HEALTH LABORATORY SERVICES S65 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 Camponent Value Range Range Time Time Performed At Pathologist Signature 05/22/2023 12:21 AM EDT Glucose, Poc 236 (H) 74 - 100 mg/dL Collection Method / UNROWN Collection Time Received Time Blood	Calcium	8.0 (L)	10.3 mg/		4:45 AM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Effective 5/11/2022, Calculation based on the Chronic kidney prisease Epidemiology Collaboration (CKD-EPI) equation refit without adjustment for race Anatomical Location / Collection Method / Volume Collection Time Received Time Blood Venous blood specimen (Source) Laterality Volume Collection Method / Unknown 05/22/2023 3:46 AM 05/22/2023 4:09 AM Narrative Venous blood specimen / Unknown Venipuncture / Unknown 05/22/2023 3:46 AM 05/22/2023 4:09 AM Authorizing Provider Result Type Venipuncture / Unknown 05/22/2023 3:46 AM 05/22/2023 4:09 AM Marwan Saoud MD LAB BLOOD ORDERABLES Performing 05/22/2023 4:09 AM EDT Organization Address City/State/ZIP Code Phone Number Performing CATHOLIC HEALTH S65 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 Venipuncture ABRORARACRY SERVICES Se5 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 Venipuncture Glucose, Poc 236 (H) 74 - 100 Malysis Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC SERVICES - MERCY MERCY MBRCY HOSPITAL OF<	GFR	72.0 (L)	mL/min/		4:45 AM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Specimen (Source) Laterality Volume Collection Time Received Time Blood Venous blood specimen / Unknown Venipuncture / Unknown 05/22/2023 3:46 AM EDT 05/22/2023 4:09 AM EDT Narrative Authorizing Provider Result Type EDT EDT Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Time Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC 12:37 AM Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC 12:37 AM DF/22/2023 CATHOLIC 12:37 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time 65/22/2023 12:37 AM EDT	Effective 5/11/2022, Disease Epidemiology	Collaborati		-			
Blood Venous blood specimen / Unknown Venipuncture / Unknown 05/22/2023 3:46 AM EDT 05/22/2023 4:09 AM EDT Narrative Authorizing Provider Result Type EDT EDT Marwan Saoud MD LAB BLOOD ORDERABLES Performing Provider Phone Number CATHOLIC HEALTH LABORATORY SERVICES S65 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Analysis Component Value Ref Rang/dL Test Method 05/22/2023 CATHOLIC Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC 12:37 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time 05/22/2023 12:21 AM EDT Received Time 05/22/2023 12:37 AM EDT			ocation /	-		- .	D . I.T.
specimen / Unknown Unknown EDT EDT Narrative Authorizing Provider Result Type Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 CABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Glucose, Poc 236 (H) 74 - 100 mg/dL Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Specimen (Source) Anatomical Location / Specimen / Unknown Collection Time EDT Received Time Blood							
Authorizing Provider Result Type Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Final result (05/22/2023 12:21 AM EDT) (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC 12:27 AM HEALTH EDT LABORATORY SERVICES - METER UNSOLICITED RESULTS - Final result (D5/22/2023 12:21 AM EDT) Analysis Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC mg/dL 12:37 AM HEALTH LABORATORY SERVICES - MERCY SERVICES - MERCY HOSPITAL OF UNERCY HOSPITAL OF Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM EDT 05/22/2023 12:37 AM	RIOOD					23 3:46 AM	
Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Component Value Range Test Method Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC LABORATORY SERVICES - MERCY HOSPITAL OF Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT 05/22/2023 12:37 AM	Narrative						
Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Component Value Range Test Method Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC LABORATORY SERVICES - MERCY HOSPITAL OF Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT 05/22/2023 12:37 AM							
Marwan Saoud MD LAB BLOOD ORDERABLES Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Component Value Range Test Method Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC LABORATORY SERVICES - MERCY HOSPITAL OF Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT 05/22/2023 12:37 AM	Authorizing Drovidor	Docult Turoo					
Performing Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Analysis Component Value Range Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC EDT LABORATORY SERVICES - MERCY HOSPITAL OF LABORATORY SERVICES - MERCY HOSPITAL OF Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown Collection Method / EDT Collection Time Received Time				c			
Organization Address City/State/ZIP Code Phone Number CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Component Value Range Test Method Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 05/22/2023 CATHOLIC mg/dL 12:37 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown Collection Method / EDT 05/22/2023 12:21 AM EDT 05/22/2023 12:37 AM EDT		LAD BLOOD O		5			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Component Value Ref Range Test Method Analysis Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC EDT LABORATORY SERVICES - MERCY HOSPITAL OF Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown Collection Method / EDT 05/22/2023 12:21 AM EDT 05/22/2023 12:21 AM EDT							
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Image: Test Method Final result (05/22/2023 12:21 AM EDT) (ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/22/2023 12:21 AM EDT) Analysis Component Value Range Test Method Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC 12:37 AM HEALTH EDT LABORATORY LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Services - MERCY HOSPITAL OF BUFFALO Specimen (Source) Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT EDT				·			
Component Value Ref Range Test Method Analysis Time Performed At Pathologist Signature Glucose, Poc 236 (H) 74 - 100 mg/dL 05/22/2023 CATHOLIC 12:37 AM HEALTH EDT LABORATORY SERVICES - MERCY Anatomical Location / Laterality Collection Method / Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT	LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	
Glucose, Poc236 (H)74 - 100 mg/dL05/22/2023CATHOLIC 12:37 AM EDTLABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOSpecimen (Source)Anatomical Location / LateralityCollection Method / VolumeCollection TimeReceived TimeBloodCapillary blood specimen / Unknown05/22/202312:21 AM EDT05/22/202305/22/2023			Ref		Analysis		
mg/dL12:37 AMHEALTH EDTLABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOSERVICES - MERCY HOSPITAL OF BUFFALOSpecimen (Source)Anatomical Location / LateralityCollection Method / VolumeCollection TimeReceived TimeBloodCapillary blood specimen / Unknown05/22/2023 12:21 AM EDT05/22/2023 12:37 AM EDTEDT			-	lest wiethod			Pathologist Signature
Specimen (Source) Laterality Volume Collection Time Received Time Blood Capillary blood specimen / Unknown 05/22/2023 12:21 AM EDT 05/22/2023 12:37 AM EDT 05/22/2023 12:37 AM	Glucose, Poc	236 (H)			12:37 AM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Blood Capillary blood 05/22/2023 12:21 AM 05/22/2023 12:37 AM EDT EDT	Specimen (Source)		ocation /	-	Collection	Time	Received Time
Narrative		Capillary bloo			05/22/202		05/22/2023 12:37 AM
	Narrative						

Authorizing Provider	Result Type					
Nirosshan Thiruchelvam MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	ł.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	05/21/2023	8:40 PM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	155 (H)	74 - 100 mg/dL		05/21/2023 9:14 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/21/202 EDT	23 8:40 PM	05/21/2023 9:14 PM EDT
Narrative						
Authorizing Drovidor	Decult Tures					
Authorizing Provider Nirosshan Thiruchelvam	Result Type		T DOCKED DEVICE UNS		יו וו דכ	
MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	JULIS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	05/21/2023	4:13 PM EDT)
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	171 (H)	74 - 100 mg/dL		05/21/2023 4:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
					2011/120	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Collection Method / Volume	Collection	Time	Received Time
Specimen (Source) Blood		d				Received Time 05/21/2023 4:29 PM EDT

 Authorizing Provider
 Result Type

 Marwan Saoud MD
 LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS

Performing				
Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
		Final result (05/21/2023	3 2:54 PM EDT)	
Anatomical Region	Laterality	Modality	De die enversien	
Chest		Computed	Radiography	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/21/2023 3:04 PM EDT	
Improceione				
Impressions 05/21/2023 3:05 PM E	DT			
FINDINGS and IMPRESS				
Endotracheal tube no	ted with the distal	tip 3 cm above the ca	rina, in appropriate	position.
Hazy bilateral inter	stitial opacities.			
Reading Location: S	R-AWAN			
Dictated By: Awan, Q	adus			
Dictated Date/Time:	5/21/2023 3:04 PM			
Electronically Signe	d By: Awan, Qadus			
Signed Date/Time: 5	/21/2023 3:05 PM			
Newstree				
Narrative 05/21/2023 3:05 PM E	DT			
EXAM: XR CHEST 1 VIE	w 71045.			
INDICATION: review E	TT placement			
TECHNIQUE: Chest sin	gle view			
COMPARISON: Earlier	same day.			
Procedure Note				
Qadus Awan, MD - 05/2	21/2023			

Procedure Note
Formatting of this note might be different from the original.
EXAM: XR CHEST 1 VIEW 71045.
INDICATION: review ETT placement
TECHNIQUE: Chest single view
COMPARISON: Earlier same day.
IMPRESSION:
FINDINGS and IMPRESSION:
Endotracheal tube noted with the distal tip 3 cm above the carina, in appropriate position.
Hazy bilateral interstitial opacities.
Reading Location: SR-AWAN
Dictated By: Awan, Qadus
Dictated Date/Time: 5/21/2023 3:04 PM
Electronically Signed By: Awan, Qadus
Signed Date/Time: 5/21/2023 3:05 PM

Authorizing Provider	Result Type
Alyssa Dasilva PA	IMG XR PROCEDURES

CULTURE, BLOOD - Final result (05/21/2023 2:19 PM EDT)

		Ref	,	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/26/2023 7:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/21/202 EDT	23 2:19 PM	05/21/2023 2:19 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB MICROBIO	ology - G	ENERAL ORDERABLES			
Performing	Address		City/State/ZID Code	Dhana Nu	va h o r	
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Culture, Blood Anaerobic	No growth after 5 days incubation.			05/26/2023 7:02 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/21/202 EDT	23 2:18 PM	05/21/2023 2:18 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB MICROBIC	DLOGY - G	ENERAL ORDERABLES			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
XR CHEST 1 VIEW (XR C Anatomical Region	HEST 1 VIEW Lateralit		Final result (05/21/202 Modality	3 1:51 PM E	DT)	
Chest			Computed	d Radiograph	у	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
				05/21/202 EDT	23 2:11 PM	
Impressions						
05/21/2023 2:12 PM E	DT					
Limited portable upr	ight techniqu	Je.				
Endotracheal tube no recommended. Epic ch					t mainstem b	ronchus. Retraction
Hazy bilateral inter	stitial opaci	ities.				
Reading Location: S	R-AWAN					
Dictated By: Awan, Q	adus					
Dictated Date/Time:	5/21/2023 2:1	L1 PM				
Electronically Signe	d By: Awan, (Qadus				

Signed Date/Time: 5/21/2023 2:12 PM

Narrative EXAM: XR CHEST 1 VIEW 71045. INDICATION: ETT placement TECHNIQUE: Chest single view COMPARISON: Earlier same day. FINDINGS: Limited portable upright technique. Endotracheal tube noted with the distal tip at the carina/proximal right mainstem bronchus. Retraction recommended. Hazy bilateral interstitial opacities. There is no large pleural effusion. There is no pneumothorax detected. The cardiomediastinal silhouette is within normal limits. There is no acute osseous abnormality.

Procedure Note

Qadus Awan, MD - 05/21/2023

Procedure Note

Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.

INDICATION: ETT placement

TECHNIQUE: Chest single view

COMPARISON: Earlier same day.

FINDINGS:

Limited portable upright technique.

Endotracheal tube noted with the distal tip at the carina/proximal right mainstem bronchus. Retraction recommended.

Hazy bilateral interstitial opacities.

There is no large pleural effusion.

There is no pneumothorax detected.

The cardiomediastinal silhouette is within normal limits.

There is no acute osseous abnormality.

IMPRESSION:

Limited portable upright technique.

Endotracheal tube noted with the distal tip at the carina/proximal right mainstem bronchus. Retraction recommended. Epic chat message sent at the time of dictation.

Hazy bilateral interstitial opacities.

Reading Location: SR-AWAN

Dictated By: Awan, Qadus

Dictated Date/Time: 5/21/2023 2:11 PM

Electronically Signed By: Awan, Qadus

Signed Date/Time: 5/21/2023 2:12 PM

Authorizing Provider	Result Type
Marwan Saoud MD	IMG XR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/21/2023 12:37 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	200 (H)	74 - 100 mg/dL		05/21/2023 12:53 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			05/21/202 EDT	23 12:37 PM	05/21/2023 12:53 PM EDT

Narrative									
Authorizing Provider	Result Type								
Marwan Saoud MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS								
Performing									
Organization	Address	City/State/ZIP Code	Phone Number						
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413						
XR CHEST 1 VIEW (XR C	CHEST 1 VIEW 71045) -	Final result (05/21/2023	3 11:44 AM EDT)						
Anatomical Region	Laterality	Modality							
Chest	Computed Radiography								
	Anatomical Location /	Collection Method /							
Specimen (Source)			Collection Time	Received Time					
			05/21/2023 11:49 AM EDT						
Impressions									
05/21/2023 11:50 AM EDT									
Limited portable upr	ight technique.								
Endotracheal tube 6 cm above the carina.									
Enteric tube noted in the stomach.									
Bilateral hazy interstitial opacities. Clinical and radiologic follow up recommend.									
Reading Location: SR-AWAN									
Dictated By: Awan, Q	adus								
Dictated Date/Time:	5/21/2023 11:49 AM								
Electronically Signe	d By: Awan, Qadus								
Signed Date/Time: 5/21/2023 11:50 AM									
Narrative									
05/21/2023 11:50 AM EDT									

Narrative EXAM: XR CHEST 1 VIEW 71045. INDICATION: ng tube placement TECHNIQUE: Chest single view COMPARISON: May 20, 2023. FINDINGS: Limited portable upright technique. Endotracheal tube 6 cm above the carina. Enteric tube noted in the stomach. Bilateral hazy interstitial opacities. There is no large pleural effusion. Of note, the left costophrenic angle is not imaged. There is no pneumothorax detected. The cardiomediastinal silhouette is within normal limits. There is no acute osseous abnormality.

Procedure Note

Qadus Awan, MD - 05/21/2023

Procedure Note
Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.
INDICATION: ng tube placement
TECHNIQUE: Chest single view
COMPARISON: May 20, 2023.
FINDINGS:
Limited portable upright technique.
Endotracheal tube 6 cm above the carina.
Enteric tube noted in the stomach.
Bilateral hazy interstitial opacities.
There is no large pleural effusion. Of note, the left costophrenic angle is not imaged.
There is no pneumothorax detected.
The cardiomediastinal silhouette is within normal limits.
There is no acute osseous abnormality.
IMPRESSION:
Limited portable upright technique.
Endotracheal tube 6 cm above the carina.
Enteric tube noted in the stomach.
Bilateral hazy interstitial opacities. Clinical and radiologic follow up recommend.
Reading Location: SR-AWAN
Dictated By: Awan, Qadus
Dictated Date/Time: 5/21/2023 11:49 AM
Electronically Signed By: Awan, Qadus
Signed Date/Time: 5/21/2023 11:50 AM

 Authorizing Provider
 Result Type

 Alexandra Rabarsky NP
 IMG XR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/21/2023 8:28 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose, Poc	214 (H)	74 - 100 mg/dL		05/21/2023 8:55 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Unknown			05/21/202 EDT	23 8:28 AM	05/21/2023 8:55 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	270 (H)	74 - 100 mg/dL		05/21/2023 5:33 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/21/202 EDT	23 5:07 AM	05/21/2023 5:33 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	

- MERCY HOSPITAL OF BUFFALO

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/21/2023 4:53 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	19.3 (H)	4.5 - 11.0 10*3/uL		05/21/2023 5:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range Test Met	Analysis hod Time	Performed At	Pathologist Signature
RBC	3.75 (L)	4.50 - 6.50 10*6/uL		3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.1 (L)	14.0 - 18.0 g/ dL	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	33.7 (L)	40.0 - 54.0 %	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.8	80.0 - 94.0 fL	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.5	26.0 - 34.0 pg	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.9	31.0 - 37.0 g/ dL	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	12.9	11.5 - 14.5 %	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	255	145 - 450 10*3/uL	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	9.9	7.4 - 10.4 fL	05/21/202 5:34 AM EDT	3 CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	Analysis	Analysis
Component	Value	Range Test Method	Time Performed At Pathologist Signature	
Neutrophils Relative	84 (H)	50 - 75 %	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Lymphocytes Relative	8 (L)	20 - 40 %	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Monocytes Relative	7	>2 - <10 %	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Eosinophils Relative	1	<=8 %	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Basophils Relative	0	<=2 %	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Neutrophils Absolute	16.2 (H)	2.0 - 8.2 1000/uL	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Lymphocytes Absolute	1.5	0.8 - 4.4 1000/uL	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Monocytes Absolute	1.4 (H)	0.1 - 1.1 1000/uL	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL	05/21/2023 CATHOLIC 5:34 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	5:34 AM

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/21/2023 5:34 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/21/202 EDT	3 4:53 AM	05/21/2023 5:23 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) TRIGLY	CERIDES - Fin	al result	(05/21/2023 4:53 AN	/ EDT) Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Triglycerides	173 (H)	35 - 149 mg/dL		05/21/2023 2:04 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
· · · · · · · · · · · · · · · · · · ·	- 199 mg/dl	35 - 149		2:04 PM	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN	
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500	- 199 mg/dl	35 - 149 mg/dL	Collection Method /	2:04 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500 Specimen (Source)	- 199 mg/dl mg/dl Anatomical Lo Laterality	35 - 149 mg/dL	Volume	2:04 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500	- 199 mg/dl mg/dl Anatomical Lo	35 - 149 mg/dL		2:04 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500 Specimen (Source)	- 199 mg/dl mg/dl Anatomical Lo Laterality Venous blood	35 - 149 mg/dL	Volume Venipuncture /	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500 Specimen (Source) Blood	- 199 mg/dl mg/dl Anatomical Lo Laterality Venous blood	35 - 149 mg/dL	Volume Venipuncture /	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/d1 Borderline High 150 High 200 - 499 mg/d1 Very High > or = 500 Specimen (Source) Blood Narrative	- 199 mg/dl mg/dl Anatomical Lo Laterality Venous blood specimen / Ur	35 - 149 mg/dL	Volume Venipuncture /	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500 Specimen (Source) Blood	- 199 mg/dl mg/dl Anatomical Lo Laterality Venous blood	35 - 149 mg/dL	Volume Venipuncture / Unknown	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/dl	 - 199 mg/dl mg/dl Anatomical Loc Laterality Venous blood specimen / Ur Result Type 	35 - 149 mg/dL	Volume Venipuncture / Unknown	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/d1 Borderline High 150 High 200 - 499 mg/d1 Very High > or = 500 Specimen (Source) Blood Narrative Authorizing Provider	 - 199 mg/dl mg/dl Anatomical Loc Laterality Venous blood specimen / Ur Result Type 	35 - 149 mg/dL	Volume Venipuncture / Unknown	2:04 PM EDT Collection 05/21/202	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM
Triglycerides Comment: Normal <150 mg/dl	 - 199 mg/dl mg/dl Anatomical Loc Laterality Venous blood specimen / Ur Result Type LAB BLOOD O 	35 - 149 mg/dL	Volume Venipuncture / Unknown	2:04 PM EDT Collection 05/21/202 EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Received Time 05/21/2023 5:22 AM

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.0	1.7 - 2.5 mg/dL		05/21/2023 5:58 AM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection	11me 23 4:53 AM	Received Time 05/21/2023 5:22 AM
5.000	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
CK - Final result (05/21/ Component CPK, Total	Value 80	Ref Range 38 - 174 U/L	Test Method	Analysis Time 05/21/2023 5:58 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 4:53 AM	05/21/2023 5:22 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) BASIC	METABOLIC PA	ANEL - Fi	nal result (05/21/20	23 4:53 AM	EDT)	

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Glucose	267 (H)	74 - 100 mg/dL	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	37 (H)	8 - 27 mg/dL	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	1.11	0.80 - 1.30 mg/ dL	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	33.3 (H)	10.0 - 20.1	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	139	136 - 145 mmol/L	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.1	3.5 - 5.5 mmol/L	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	108 (H)	98 - 107 mmol/L	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	23	21 - 31 mmol/L	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	8	3 - 11	05/21/2023 CATHOLIC 5:58 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Calcium	7.7 (L)	8.6 - 10.3 mg/ dL		05/21/2023 5:58 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	75.1 (L)	>=90.0 mL/min/ 1.73 m2		05/21/2023 5:58 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022,	Colculation	based on	the Chronic Kidney			
Disease Epidemiology						
without adjustment f						
without aujustillerit i	or race					
-	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Anatomical Lo Laterality	cation /	Volume	Collection		Received Time
-	Anatomical Lo				Time 23 4:53 AM	Received Time 05/21/2023 5:22 AM EDT
Specimen (Source)	Anatomical Lo Laterality Venous blood		Volume Venipuncture /	05/21/202		05/21/2023 5:22 AM
Specimen (Source) Blood	Anatomical Lo Laterality Venous blood		Volume Venipuncture /	05/21/202		05/21/2023 5:22 AM
Specimen (Source) Blood Narrative	Anatomical Lo Laterality Venous blood specimen / Un		Volume Venipuncture /	05/21/202		05/21/2023 5:22 AM
Specimen (Source) Blood	Anatomical Lo Laterality Venous blood	known	Volume Venipuncture / Unknown	05/21/202		05/21/2023 5:22 AM
Specimen (Source) Blood Narrative Authorizing Provider	Anatomical Lo Laterality Venous blood specimen / Un Result Type	known	Volume Venipuncture / Unknown	05/21/202		05/21/2023 5:22 AM
Specimen (Source) Blood Narrative Authorizing Provider Marwan Saoud MD Performing	Anatomical Lo Laterality Venous blood specimen / Un Result Type LAB BLOOD O	known	Volume Venipuncture / Unknown	05/21/202 EDT	23 4:53 AM	05/21/2023 5:22 AM
Specimen (Source) Blood Narrative Authorizing Provider Marwan Saoud MD Performing Organization	Anatomical Lo Laterality Venous blood specimen / Un Result Type LAB BLOOD O Address	known RDERABLE	Volume Venipuncture / Unknown S City/State/ZIP Code	05/21/202 EDT Phone Nu	23 4:53 AM	05/21/2023 5:22 AM
Specimen (Source) Blood Narrative Authorizing Provider Marwan Saoud MD Performing	Anatomical Lo Laterality Venous blood specimen / Un Result Type LAB BLOOD O	known RDERABLE	Volume Venipuncture / Unknown	05/21/202 EDT	23 4:53 AM	05/21/2023 5:22 AM

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/21/2023 1:14 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	230 (H)	74 - 100 mg/dL		05/21/2023 4:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Lo	ocation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source)	Laterality	•	volume			
Blood	Capillary bloc specimen / U			05/21/202 EDT	23 1:14 AM	05/21/2023 4:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Re	d.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 265 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/20/2023 9:53 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U				23 9:36 PM	05/20/2023 9:53 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Re	d.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/20/2023 5:21 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	220 (H)	74 - 100 mg/dL		05/22/2023 7:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/20/202 EDT	23 5:21 PM	05/22/2023 7:28 AM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization CATHOLIC HEALTH			City/State/ZIP Code	Phone Nu		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res	sult (05/20/202	23 3:42 PN	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.1	1.7 - 2.5 mg/dL		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/20/202 EDT	3 3:42 PM	05/20/2023 4:33 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Derferming						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
				22.2.42.014		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/20/2023 3:42 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	250 (H)	74 - 100 mg/dL		05/20/2023 4:52 PM EDT		
BUN	35 (H)	8 - 27 mg/dL		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.04	0.80 - 1.30 mg/ dL		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	33.7 (H)	10.0 - 20.1		05/20/2023 4:52 PM EDT		
Sodium	142	136 - 145 mmol/L		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.4	3.5 - 5.5 mmol/L		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	111 (H)	98 - 107 mmol/L		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	24	21 - 31 mmol/L		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	7	3 - 11		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	81.2 (L)	>=90.0 mL/min/ 1.73 m2		05/20/2023 4:52 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 3:42 PM	05/20/2023 4:33 PM EDT

Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD	ORDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott F	Rd.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE ME	TER UNSC	LICITED RESULTS - F	inal result (05/20/2023	11:21 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	203 (H)	74 - 100 mg/dL		05/20/2023 11:58 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical L	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blo specimen / U			05/20/202 EDT	23 11:21 AM	05/20/2023 11:57 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT C	OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott F	Rd.	Buffalo, NY 14220, US	716-828-2	2413	
XR CHEST 1 VIEW (XR C	HEST 1 VIEW	/ 71045) -	Final result (05/20/202	9.39 AM F	TDT)	
Anatomical Region	Lateral		Modality	10 0.00 / (14) 1		
Chest				d Radiograph	у	
	Anatomical L	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time

05/20/2023 9:42 AM

EDT

Impressions

05/20/2023 9:43 AM EDT

Impressions

Increased basal atelectasis.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/20/2023 9:42 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/20/2023 9:43 AM

Narrative 05/20/2023 9:43 AM EDT EXAM: XR CHEST 1 VIEW 71045.

INDICATION: ETT position, pneumonia

TECHNIQUE: Chest single view COMPARISON: 5/18/2023.

FINDINGS: No significant enlargement of the cardiomediastinal silhouette.

Increased hazy basilar opacities. Elevated diaphragms, small lung volumes. Patchy dense perihilar opacities. No pleural effusion or pneumothorax seen.

Endotracheal tube tip projects over the midthoracic trachea. Enteric catheter tip obscured by overlying wires and leads.

Procedure Note

Charles Chung, MD - 05/20/2023

Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.

INDICATION: ETT position, pneumonia

TECHNIQUE: Chest single view COMPARISON: 5/18/2023.

FINDINGS: No significant enlargement of the cardiomediastinal silhouette.

Increased hazy basilar opacities. Elevated diaphragms, small lung volumes. Patchy dense perihilar opacities. No pleural effusion or pneumothorax seen.

Endotracheal tube tip projects over the midthoracic trachea. Enteric catheter tip obscured by overlying wires and leads.

IMPRESSION: Increased basal atelectasis.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/20/2023 9:42 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/20/2023 9:43 AM

Authorizing Provider	Result Type					
Marwan Saoud MD	IMG XR PROCI	EDURES				
HEPARIN ANTIXA - Fina	al result (05/20		0 AM EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Heparin, Unfractionated	0.38	0.30 - 0.70 U/ mL		05/20/2023 7:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Lo	cation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source)	Laterality					
Blood	Venous blood specimen / Un		Venipuncture / Unknown	05/20/202 EDT	23 7:00 AM	05/20/2023 7:09 AM EDT
Narrative						
Authorizing Provider	Result Type					
Robert Gianfagna MD	LAB BLOOD O	RDERABLE	S			
-						
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Rd	1	Buffalo, NY 14220, US	716-828-2	112	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/20/2023 6:04 AM EDT)

- MERCY HOSPITAL OF

BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	203 (H)	74 - 100 mg/dL		05/20/2023 6:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Seurce)	Anatomical Lo	cation /	Collection Method /	Collection	Time	Dessived Time
Specimen (Source)	Laterality		Volume			Received Time
Blood	Capillary blood specimen / Un			05/20/202 EDT	23 6:04 AM	05/20/2023 6:31 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/20/2023 4:55 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count	18.6 (H)	4.5 - 11.0 10*3/uL		05/20/2023 5:04 AM EDT		
RBC	3.89 (L)	4.50 - 6.50 10*6/uL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	11.4 (L)	14.0 - 18.0 g/ dL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	34.7 (L)	40.0 - 54.0 %		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.2	80.0 - 94.0 fL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.2	26.0 - 34.0 pg		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.7	31.0 - 37.0 g/ dL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.0	11.5 - 14.5 %		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	248	145 - 450 10*3/uL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
MPV	9.2	7.4 - 10.4 fL	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	77 (H)	50 - 75 %	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	12 (L)	20 - 40 %	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	8	>2 - <10 %	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	2	<=8 %	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	14.3 (H)	2.0 - 8.2 1000/uL	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	2.2	0.8 - 4.4 1000/uL	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	1.5 (H)	0.1 - 1.1 1000/uL	05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.4	0.0 - 0.6 1000/uL		05/20/2023 5:04 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/20/2023 5:04 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/20/202 EDT	3 4:55 AM	05/20/2023 5:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
MAGNESIUM - Final res	sult (05/20/202		M EDT)	Anglusia		
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.0	1.7 - 2.5 mg/dL		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/20/202 EDT	3 4:55 AM	05/20/2023 5:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		

LACTIC ACID, SERUM (L	ACTIC ACID, P	LASMA) -	Final result (05/20/20	023 4:55 AM	EDT)				
	Ref Analysis								
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature			
Lactic Acid	1.0	0.5 - 2.0 mmol/L		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time			
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/20/202 EDT	3 4:55 AM	05/20/2023 5:01 AM EDT			
Narrative									
Authorizing Provider	Result Type								
Raj Thapar MD	LAB BLOOD O	RDERABLE	S						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber				
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413				

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/20/2023 4:55 AM EDT)

Component	Value	Ref Range Test Method	Analysis Time Performed A	At Pathologist Signature
Glucose	188 (H)	74 - 100 mg/dL	05/20/2023 CATHOLIC 5:18 AM HEALTH EDT LABORATOF SERVICES - MERCY HOSPITAL C BUFFALO	λΥ
BUN	36 (H)	8 - 27 mg/dL	05/20/2023 CATHOLIC 5:18 AM HEALTH EDT LABORATOF SERVICES - MERCY HOSPITAL C BUFFALO	
Creatinine, Serum	0.95	0.80 - 1.30 mg/ dL	05/20/2023 CATHOLIC 5:18 AM HEALTH EDT LABORATOF SERVICES - MERCY HOSPITAL C BUFFALO	
Bun/Creatinine Ratio	37.9 (H)	10.0 - 20.1	05/20/2023 CATHOLIC 5:18 AM HEALTH EDT LABORATOF SERVICES - MERCY HOSPITAL C BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	146 (H)	136 - 145 mmol/L			CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.7	3.5 - 5.5 mmol/L		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	115 (H)	98 - 107 mmol/L		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	25	21 - 31 mmol/L		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	6	3 - 11		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/20/2023 5:18 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati	on (CKD-E	-			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/20/202 EDT	23 4:55 AM	05/20/2023 5:01 AM EDT
Narrative						
Authorizing Dravidar	Docult Turne					
Authorizing Provider Raj Thapar MD	Result Type LAB BLOOD O	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSC Ref	DLICITED RESULTS - F	inal result (Analysis	05/20/2023	12:09 AM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	236 (H)	74 - 100 mg/dL		05/20/2023 12:35 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/20/202 EDT	3 12:09 AM	05/20/2023 12:35 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
HEPARIN ANTIXA - Fina	al result (05/19	/2023 11: Ref	:35 PM EDT)	Applycic		
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Heparin, Unfractionated	0.42	0.30 - 0.70 U/ mL		05/19/2023 11:57 PM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/19/202 EDT	3 11:35 PM	05/19/2023 11:46 PM EDT
Narrative						
Authorizing Provider	Result Type					
Authorizing Provider Marwan Saoud MD	Result Type LAB BLOOD O	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	Ι.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	DLICITED RESULTS - F	inal result (Analysis	05/19/2023	5:03 PM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	171 (H)	74 - 100 mg/dL		05/19/2023 5:41 PM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/19/202 EDT	3 5:03 PM	05/19/2023 5:41 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Derfermine						
Performing Organization	Address					
	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	l.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rc		Buffalo, NY 14220, US			
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	/2023 4:4	Buffalo, NY 14220, US	716-828-2	413	Pathologist Signature
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina	565 Abbott Ro Il result (05/19 Value	/2023 4:4 Ref	Buffalo, NY 14220, US	716-828-2 Analysis	Performed At	Pathologist Signature
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component	565 Abbott Ro Il result (05/19 Value 0.37	/2023 4:4 Ref Range 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US	716-828-2 Analysis Time 05/19/2023 5:05 PM	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	Pathologist Signature
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component	565 Abbott Ro Il result (05/19 Value	/2023 4:4 Ref Range 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US	716-828-2 Analysis Time 05/19/2023 5:05 PM	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component Heparin, Unfractionated	565 Abbott Rc Il result (05/19 Value 0.37 Anatomical Lo	/2023 4:4 Ref 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US O PM EDT) Test Method	716-828-2 Analysis Time 05/19/2023 5:05 PM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component Heparin, Unfractionated	565 Abbott Rc Il result (05/19 Value 0.37 Anatomical Lo Laterality Venous blood	/2023 4:4 Ref 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US O PM EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/19/2023 5:05 PM EDT Collection 05/19/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/19/2023 4:48 PM
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component Heparin, Unfractionated	565 Abbott Rc Il result (05/19 Value 0.37 Anatomical Lo Laterality Venous blood	/2023 4:4 Ref 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US O PM EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/19/2023 5:05 PM EDT Collection 05/19/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/19/2023 4:48 PM
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component Heparin, Unfractionated	565 Abbott Rc Il result (05/19 Value 0.37 Anatomical Lo Laterality Venous blood	/2023 4:4 Ref 0.30 - 0.70 U/ mL	Buffalo, NY 14220, US O PM EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/19/2023 5:05 PM EDT Collection 05/19/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/19/2023 4:48 PM
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO HEPARIN ANTIXA - Fina Component Heparin, Unfractionated Specimen (Source) Blood Narrative	565 Abbott Ro I result (05/19 Value 0.37 Anatomical Lo Laterality Venous blood specimen / Un	/2023 4:4 Ref Range 0.30 - 0.70 U/ mL cation /	Buffalo, NY 14220, US O PM EDT) Test Method Collection Method / Volume Venipuncture / Unknown	716-828-2 Analysis Time 05/19/2023 5:05 PM EDT Collection 05/19/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/19/2023 4:48 PM

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) HEPARI	N ANTIXA -	Final resu	lt (05/19/2023 11:55	AM EDT)		
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Heparin, Unfractionated	0.93 (H)	0.30 - 0.70 U/ mL		05/19/2023 12:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/19/202 EDT	3 11:55 AM	05/19/2023 11:59 AM EDT
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB BLOOD C		:ς			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSC Ref	DLICITED RESULTS - F	inal result (Analysis	05/19/2023	11:27 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	174 (H)	74 - 100 mg/dL		05/19/2023 12:41 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/19/202 EDT	23 11:27 AM	05/19/2023 12:41 PM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UN	SOLICITED RES	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	I.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	227 (H)	74 - 100 mg/dL		05/19/2023 12:41 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/19/202 EDT	23 6:31 AM	05/19/2023 12:41 PM EDT
Narrative						
Authorizing Provider	Result Type					
	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Authorizing Provider	21	CARE TES	T DOCKED DEVICE UNS	OLICITED RES		
Authorizing Provider Marwan Saoud MD Performing	LAB POINT OF				mber	

(ABNORMAL) HEPARIN ANTIXA - Final result (05/19/2023 6:16 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Heparin, Unfractionated	<0.04 (L)	0.30 - 0.70 U/ mL		05/19/2023 7:38 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/19/202 EDT	23 6:16 AM	05/19/2023 6:29 AM EDT
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB BLOOD O	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	2413	
APTT - Final result (05/	19/2023 6:16 A					
Component	Value	Ref Range	Test Method	Analysis Time	Dorformed At	Pathologist Signature
APTT, Plasma	30.7	25.9 -		05/19/2023		
	30.7	40.5 s		7:01 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /		23 6:16 AM	05/19/2023 6:29 AM
biood	specimen / Un	Iknown	Unknown	EDT		EDT
Narrative						
Indifative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	Ι.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) PROTIN	IE-INR (PROT		(PT/INR)) - Final res		2023 6:16 AN	I EDT)
Component	Value	Ref	To at Matha al	Analysis	Deufeure ed At	Dethele viet Cinneture
Component Prothrombin Time	Value	Range 9.3 -	Test Method	Time		Pathologist Signature
Prothrombin Time	14.7 (H)	9.3 - 13.5 sec		05/19/2023 7:01 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
INR	1.3 (H)	0.9 - 1.2 Ratio		05/19/2023 7:01 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/19/2023 6:16 AM EDT	05/19/2023 6:29 AM EDT
Narrative				

Authorizing Provider	Result Type			
Crystal Ammerman PA	LAB BLOOD ORDERABL	ES		
Performing				
Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
LIS LIPPER EXTREMITY		UPPER EXTREMITY VEN		RAL 93970) - Edited
Result - FINAL (05/19/2				
Anatomical Region	Laterality	Modality		
Upper Extremities	Bilateral	Ultrasound		
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/19/2023 3:58 AM EDT	
Addenda				
Addendum on 05/19/20	023 4:03 AM EDT			
******* ADDENDUM #1	****			
Findings discussed v	via Epic chat with PA	Crystal M Ammerman a	t the time of	
this dictation. 5/19)/2023 4:03 AM			
Reading Location: S	R-CHUNG			
Dictated By: CHUNG,	CHARLES			
Dictated Date/Time:	5/19/2023 4:03 AM			
Addended By: CHUNG,	CHARLES			
Addended Date/Time:	5/19/2023 4:03 AM			
Impressions 05/19/2023 4:00 AM E	DT Is in the cephalic ve	ing bilatanally		
		silic and left subcla	vian-iugular veins	
Reading Location: S	-		vian-jugurar verns.	
Dictated By: CHUNG,				
Dictated Date/Time:				
	ed By: CHUNG, CHARLES			
Signed Date/Time: 5	-			
Signed Date/Time. J	/ IJ/ 2023 4.00 AM			
Narrative 05/19/2023 4:00 AM E	DT			
03/13/2023 4.00 AM E	וט.			

Narrative

******* ORIGINAL REPORT *******

EXAM: US UPPER EXTREMITY VENOUS DOPPLER BILATERAL 93970.

INDICATION: persistent fever, rule out dvt

TECHNIQUE: Venous Doppler ultrasound of the both upper extremities. COMPARISON: None.

FINDINGS:

The major deep veins of the both upper extremities were examined using real-time compression gray scale ultrasound, color Doppler ultrasound, and augmentation with spectral analysis.

Bilateral cephalic veins are noncompressible, does not demonstrate flow on color Doppler or increased velocity on augmentation by spectral analysis.

The right basilic, left subclavian and left jugular vein are partially compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

The remaining interrogated veins are compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

Procedure Note

Charles Chung, MD - 05/19/2023

Formatting of this note might be different from the original. ******** ORIGINAL REPORT *******

EXAM: US UPPER EXTREMITY VENOUS DOPPLER BILATERAL 93970.

INDICATION: persistent fever, rule out dvt

TECHNIQUE: Venous Doppler ultrasound of the both upper extremities. COMPARISON: None.

FINDINGS:

The major deep veins of the both upper extremities were examined using real-time compression gray scale ultrasound, color Doppler ultrasound, and augmentation with spectral analysis.

Bilateral cephalic veins are noncompressible, does not demonstrate flow on color Doppler or increased velocity on augmentation by spectral analysis.

The right basilic, left subclavian and left jugular vein are partially compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

The remaining interrogated veins are compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

IMPRESSION:

1. Occlusive thrombus in the cephalic veins bilaterally.

2. Nonocclusive thrombus in the right basilic and left subclavian-jugular veins.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/19/2023 3:58 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/19/2023 4:00 AM

Authorizing Provider Result Type

Crystal Ammerman PA IMG US PROCEDURES

Anatomical Region	Laterality	Modality		
Lower Extremities	Bilateral	Ultrasound		
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/19/2023 3:57 AM EDT	

Impressions

05/19/2023 3:58 AM EDT

1. No evidence for deep vein thrombosis in the lower extremities.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/19/2023 3:57 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/19/2023 3:58 AM

Narrative

05/19/2023 3:58 AM EDT

EXAM: US LOWER EXTREMITY VENOUS DOPPLER BILATERAL 93970.

INDICATION: persistent fever, rule out dvt

TECHNIQUE: Venous Doppler ultrasound of the both lower extremities.

COMPARISON: None.

FINDINGS:

The major deep veins of the both lower extremities were examined using real-time compression gray scale ultrasound, color Doppler ultrasound, and augmentation with spectral analysis.

The interrogated veins are compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

Procedure Note

Charles Chung, MD - 05/19/2023 Formatting of this note might be different from the original. EXAM: US LOWER EXTREMITY VENOUS DOPPLER BILATERAL 93970.

INDICATION: persistent fever, rule out dvt

TECHNIQUE: Venous Doppler ultrasound of the both lower extremities. COMPARISON: None.

FINDINGS:

The major deep veins of the both lower extremities were examined using real-time compression gray scale ultrasound, color Doppler ultrasound, and augmentation with spectral analysis.

The interrogated veins are compressible, demonstrate flow on color Doppler with increased velocity on augmentation by spectral analysis.

IMPRESSION: 1. No evidence for deep vein thrombosis in the lower extremities.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/19/2023 3:57 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/19/2023 3:58 AM

Authorizing Provider	Result Type					
Crystal Ammerman PA	IMG US PROCEDURES					
			(05 /10 /2022 2.50 ANA)			
Anatomical Region	D (US ABDOMEN LIMITE Laterality	Modality - Final result	(05/19/2023 2:58 AM	EDI)		
Abdomen	Lateranty	Ultrasound	1			
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time		
			05/19/2023 3:56 AM EDT			
Impressions 05/19/2023 3:57 AM	FDT					
1. Unremarkable abd						
Incidentally discov	ered gallbladder poly follow up (unless Ind	ps: jan Pakistani or Ecu	uadorian)			
7-9 mm: annual foll						
Reading Location:	SR-CHUNG					
Dictated By: CHUNG,	CHARLES					
Dictated Date/Time:	5/19/2023 3:56 AM					
Electronically Sign	ed By: CHUNG, CHARLES					
Signed Date/Time:	5/19/2023 3:57 AM					
Narrative						
05/19/2023 3:57 AM EXAM: US ABDOMEN LI						
INDICATION: persist	ent fever, rule out c	holecystitis				
TECHNIQUE: Realtime COMPARISON: None.	grayscale complete t	ransabdominal ultrasc	ound of the right upp	per quadrant.		
FINDINGS: Liver: Normal in si	ze and echogenicity w	ithout a focal lesior	ı visible			
	hologic gallbladder w s sign. Contracted ga		holecystic fluid, o	r gallstones seen. No		
Common Bile Duct: 3 mm						
Pancreas: Mostly o	bscured by bowel gas					
Right Kidney: mm in	length. No hydroneph	rosis or mass seen.				
Aorta/IVC: Unremark	able in the visualize	d area				
Free fluid: No asci	tes seen. Small right	pleural effusion.				

Procedure Note

Charles Chung, MD - 05/19/2023

Procedure Note

Formatting of this note might be different from the original. EXAM: US ABDOMEN LIMITED 76705.

INDICATION: persistent fever, rule out cholecystitis

TECHNIQUE: Realtime grayscale complete transabdominal ultrasound of the right upper quadrant. COMPARISON: None.

FINDINGS:

Liver: Normal in size and echogenicity without a focal lesion visible

Gallbladder: No pathologic gallbladder wall thickening, pericholecystic fluid, or gallstones seen. No sonographic Murphy's sign. Contracted gallbladder.

Common Bile Duct: 3 mm

Pancreas: Mostly obscured by bowel gas

Right Kidney: mm in length. No hydronephrosis or mass seen.

Aorta/IVC: Unremarkable in the visualized area

Free fluid: No ascites seen. Small right pleural effusion.

IMPRESSION:

1. Unremarkable abdominal ultrasound.

Incidentally discovered gallbladder polyps:

< 7 mm: no further follow up (unless Indian, Pakistani or Ecuadorian)

7-9 mm: annual follow up

> 9 mm: surgical consultation recommended

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/19/2023 3:56 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/19/2023 3:57 AM

 Authorizing Provider
 Result Type

 Crystal Ammerman PA
 IMG US PROCEDURES

(ABNORMAL) URINALYSIS WITH MICROSCOPIC REFLEX - Final result (05/19/2023 2:53 AM EDT)

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Urine Source	Urine, Catheter			05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Urine Color	Yellow	Colorless, Straw, Yellow		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Urine Appearance	Clear	Clear, Slt Hazy, Hazy, Slt Cloudy		05/19/2023 3:50 AM EDT		
Glucose, Urine	250 (A)	Negative mg/dL		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Ketones, Urine	Negative	Negative, Trace mg/dL		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Blood, Urine	Large (A)	Negative		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Urine	30 (A)	Negative mg/dL		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Nitrites, Urine	Negative	Negative		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bilirubin, Urine	Negative	Negative		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specific Gravity	1.020	1.006 - 1.029		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
рН, Urine	6.0	5.0 - 8.0		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Urobilinogen, Urine	0.2	0.2, 1.0, <2.0 Ehrlich'U/ dL		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Leukocyte Esterase	Negative	Negative		05/19/2023 3:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo	cation /	Collection Method / Volume	Collection	Time	Received Time
Specimen (Source)	Laterality					
Urine	•		Urine Random / Unknown	05/19/2023 2:53 AM EDT		05/19/2023 3:23 AM EDT
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB URINE OR	DERABLES				
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) microscopic reflex (MICROSCOPIC REFLEX) - Final result (05/19/2023 2:53 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Red Blood Cells, Urine	31-50 (A)	None Seen, 0-2 /hpf		05/19/2023 3:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
White Blood Cells, Urine	0-2	None Seen, 0-2 /hpf		05/19/2023 3:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bacteria	Rare (A)	None Seen / hpf		05/19/2023 3:52 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Urine	Urine specime urinary condui Unknown		Urine Random / Unknown	05/19/202 EDT	3 2:53 AM	05/19/2023 3:23 AM EDT

NIa	rra	tivo	
ING	1110	itive	

Authorizing Provider	Result Type		
Crystal Ammerman PA	LAB URINE ORDERABLES	5	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CULTURE, RESPIRATORY - Final result (05/19/2023 2:44 AM EDT)

	, 11201 1101 1	Ref	un result (05, 15, 202	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Culture, Respiratory	Normal flora absent. Culture yields:			05/21/2023 10:43 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Culture, Respiratory Comment: The organis preliminary verified repo		result has	been updated. These re	05/21/2023 10:43 AM EDT esults have bee	HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	Few White			05/21/2023		
	Blood Cells seen.			10:43 AM EDT	HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	<=25 Epithelial cells per low power field			05/21/2023 10:43 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	No Organisms seen			05/21/2023 10:43 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Respiratory (Sputum)	Lateranty		volume		23 2:44 AM	05/19/2023 3:23 AM EDT
1						

Authorizing ProviderResult TypeCrystal Ammerman PALAB MICROBIOLOGY - GENERAL ORDERABLESPerforming
OrganizationAddressCity/State/ZIP CodePhone NumberCATHOLIC HEALTH
LABORATORY SERVICES
- SISTERS OF CHARITY
MAIN STREET2157 Main St.Buffalo, NY 14214, US716-862-1150

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/19/2023 2:11 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/19/2023 2:27 AM EDT		
RBC	4.27 (L)	4.50 - 6.50 10*6/uL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	12.5 (L)	14.0 - 18.0 g/ dL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	38.3 (L)	40.0 - 54.0 %		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.9	80.0 - 94.0 fL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.3	26.0 - 34.0 pg		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.6	31.0 - 37.0 g/ dL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Component RDW	13.0	Range Test Method 11.5 - - 14.5 % -	TimePerformed AtPathologist Signature05/19/2023CATHOLIC2:27 AMHEALTHEDTLABORATORYSERVICES -MERCYHOSPITAL OFBUFFALO
Platelets	266	145 - 450 10*3/uL	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MPV	8.8	7.4 - 10.4 fL	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	78 (H)	50 - 75 %	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	11 (L)	20 - 40 %	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	10 (H)	>2 - <10 %	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	1	<=8 %	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	12.0 (H)	2.0 - 8.2 1000/uL	05/19/2023 CATHOLIC 2:27 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lymphocytes Absolute	1.7	0.8 - 4.4 1000/uL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.5 (H)	0.1 - 1.1 1000/uL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.2	0.0 - 0.6 1000/uL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.2	0.0 - 0.2 1000/uL		05/19/2023 2:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 2:11 AM	05/19/2023 2:18 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mbor	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
CULTURE, BLOOD - Fina	al result (05/19		1 AM EDT)			
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/24/2023 7:02 AM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/19/202 EDT	3 2:11 AM	05/19/2023 2:18 AM EDT

Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA		DLOGY - G	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH	2157 Main St.		Buffalo, NY 14214, US	716-862-1		
LABORATORY SERVICES			, , ,			
- SISTERS OF CHARITY MAIN STREET						
CULTURE, BLOOD - Fina	al result (05/19		1 AM EDT)	A ve a la vet a		
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth			05/24/2023	CATHOLIC	
	after 5 days			7:02 AM	HEALTH	
	incubation.			EDT	LABORATORY SERVICES -	
					SISTERS OF	
					CHARITY	
					MAIN STREET	
	Anatomical Lo	cation /	Collection Method /	Callestian	Τ	Dessional Times
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection Time 05/19/2023 2:11 AM		Received Time 05/19/2023 2:18 AM
blood	specimen / Un	Iknown	Unknown	EDT	J 2.11 AW	EDT
NI						
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB MICROBIO	DLOGY - G	ENERAL ORDERABLES			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
LABORATORY SERVICES - SISTERS OF CHARITY						
MAIN STREET						
MAGNESIUM - Final res	ult (05/19/202	D2 2·11 AI				
	suit (03/13/202	Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	1.9	1.7 - 2.5		05/19/2023	CATHOLIC	
		mg/dL		4:39 AM EDT	HEALTH LABORATORY	

			HOSPITAL O BUFFALO	F
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/19/2023 2:11 AM EDT	05/19/2023 2:18 AM EDT
Narrative				

SERVICES -MERCY

Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413		2413			
LACTIC ACID, SERUM (L	ACTIC ACID, P	LASMA) - Ref	- Final result (05/19/20)23 2:11 AM Analysis	EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lactic Acid	1.4	0.5 - 2.0 mmol/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/19/202 EDT	23 2:11 AM	05/19/2023 2:18 AM EDT
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/7ID Code	Phone Nu	mbor	
CATHOLIC HEALTH	565 Abbott Rd		City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			Buildio, NT 14220, US	110-020-2	C1+.	

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/19/2023 2:11 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
pH, Venous	7.41	7.31 - 7.41		05/19/2023 2:26 AM EDT		
pCO2 Venous	42.0	40.0 - 52.0 mmHg		05/19/2023 2:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	55.0 (H)	30.0 - 50.0 mmHg		05/19/2023 2:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

			Ref		Analysis		
,	Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
	HCO3, Venous	26.6	22.0 - 28.0 mmol/L		05/19/2023 2:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	O2 Sat, Venous	88	60 - 90 %		05/19/2023 2:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Base Excess, Venous	1.7			05/19/2023 2:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
		Anatomical Lo	cation /	Collection Method /			
,	Specimen (Source)	Laterality		Volume	Collection		Received Time
	Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/19/202 EDT	3 2:11 AM	05/19/2023 2:23 AM EDT
	Authorizing Provider	Result Type					
	Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
	Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
	CATHOLIC HEALTH	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			Banalo, NY 14220, 03	10 020-2		

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/19/2023 2:11 AM EDT)

(Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	237 (H)	74 - 100 mg/dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	41 (H)	8 - 27 mg/dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Creatinine, Serum	1.13	0.80 - 1.30 mg/ dL		05/19/2023 2:46 AM EDT		
Bun/Creatinine Ratio	36.3 (H)	10.0 - 20.1		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	149 (H)	136 - 145 mmol/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.1	3.5 - 5.5 mmol/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	116 (H)	98 - 107 mmol/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	26	21 - 31 mmol/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	7	3 - 11		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.4 (L)	8.6 - 10.3 mg/ dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	28	13 - 39 U/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alanine Aminotransferase (ALT)	44	7 - 52 U/ L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	70	34 - 104 U/L		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.5 (L)	6.1 - 7.9 g/dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	2.9 (L)	3.3 - 4.8 g/dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.1	1.1 - 2.8		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	0.8	0.3 - 1.0 mg/dL		05/19/2023 2:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR Comment:	73.5 (L)	>=90.0 mL/min/ 1.73 m2		05/19/2023 2:46 AM EDT		
Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio	on (CKD-E	PI) equation refit			
Specimer (Second)	Anatomical Lo	cation /	Collection Method /	Cellert	Time	Dessived Time
Specimen (Source) Blood	Laterality Venous blood specimen / Un	known	Volume Venipuncture / Unknown	Collection 05/19/202 EDT	3 2:11 AM	Received Time 05/19/2023 2:18 AM EDT
Narrative						
Authorizing Provider Crystal Ammerman PA	Result Type LAB BLOOD O	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413		413			
(ABNORMAL) POCT G	IUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	05/18/2023	11:58 PM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	238 (H)	74 - 100 mg/dL		05/19/2023 12:22 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			05/18/202 EDT	3 11:58 PM	05/19/2023 12:22 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Deufermainen						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
PHOSPHORUS - Final re	esult (05/18/20)23 8:21 F Ref	PM EDT)			
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Phosphorous	2.7	2.5 - 5.0 mg/dL		05/18/2023 11:24 PM EDT		
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/18/2023 8:21 PM EDT		05/18/2023 8:27 PM EDT
Narrative						
Authorizing Provider	Result Type					
Crystal Ammerman PA	LAB BLOOD O	RDERABLE	S			

Performing										
Organization	Address		City/State/ZIP Code	Phone Nu						
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413					
MAGNESIUM - Final result (05/18/2023 8:21 PM EDT)										
	Juit (00) 10/201	Ref		Analysis						
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature				
Magnesium	2.0	1.7 - 2.5 mg/dL		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO					
	Anatomical Lo	cation /	Collection Method /							
Specimen (Source)	Laterality		Volume	Collection Time		Received Time				
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/18/2023 8:21 PM EDT		05/18/2023 8:27 PM EDT				
Narrative										
Authorizing Provider	Result Type									
Crystal Ammerman PA	LAB BLOOD O	RDERABLE	S							
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2						
(ABNORMAL) BASIC N	METABOLIC P	ANEL - Fi Ref	nal result (05/18/20)	23 8:21 PM Analysis	EDT)					

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	239 (H)	74 - 100 mg/dL		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	39 (H)	8 - 27 mg/dL		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.03	0.80 - 1.30 mg/ dL		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	37.9 (H)	10.0 - 20.1		05/18/2023 9:15 PM EDT		
Sodium	149 (H)	136 - 145 mmol/L		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.2	3.5 - 5.5 mmol/L		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	114 (H)	98 - 107 mmol/L		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	27	21 - 31 mmol/L		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	8	3 - 11		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.5 (L)	8.6 - 10.3 mg/ dL		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	82.1 (L)	>=90.0 mL/min/ 1.73 m2		05/18/2023 9:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 8:21 PM	05/18/2023 8:27 PM EDT

Narrative			
Authorizing Provider	Result Type		
Crystal Ammerman PA	LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/18/2023 5:37 PM EDT)

Company	Value	Ref	To at Matha d	Analysis	Deuteurs ed At	Dath als sist Cise at us
Component Glucose, Poc	Value 213 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/18/2023 6:07 PM EDT		Pathologist Signature
	Anatomical Lo	ocation /	Collection Method /	Callesting	T :	
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Unknown			05/18/202 EDT	3 5:37 PM	05/18/2023 6:07 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/18/2023 4:41 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	150 (H)	74 - 100 mg/dL		05/18/2023 5:55 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	25	8 - 27 mg/dL		05/18/2023 5:55 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

ComponentValueRangeTest MethodTimePerformed At Pathologist SignatureCreatinine, Serum0.63 (L)0.80 ·(L) </th <th></th> <th></th> <th>Ref</th> <th></th> <th>Analysis</th> <th></th> <th></th>			Ref		Analysis		
1.30 mg/ dL555 PM EDTHEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOBuryCreatinine Ratio39.7 (H)10.0 -55.5 PM 20.1CATHOLIC SERVICES - MERCY HOSPITAL OF BUFFALOSodium149 (H)136 -55.5 PM 145HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOSodium149 (H)136 -65.1 R/2023 RUFALOFCATHOLIC HOSPITAL OF BUFFALOPotassium3.3 (L)3.5 - 5.5 mmol/L05/18/2023 SERVICES - MERCY HOSPITAL OF BUFFALOPotassium3.3 (L)3.5 - 5.5 mmol/L05/18/2023 RUFCES - MERCY MERCY HOSPITAL OF BUFFALOPotassium3.3 (L)3.5 - 5.5 mmol/L05/18/2023 RUFCES - MERCY <b< td=""><td>Component</td><td>Value</td><td>Range</td><td>Test Method</td><td>Time</td><td>Performed At</td><td>Pathologist Signature</td></b<>	Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
20.15.55 PM EDT LABORATORY SERVICES - MECY HOSPITAL OF BUFFALO149 (H) 136 - 145 mmo/L136 - 5.55 PM EDT MERY HABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HOSPITAL OF BUFFALOPotassium3.3 (L) mmo/L3.5 - 5.5 mmo/L05/18/2023 SERVICES - MERY HALTH LABORATORY SERVICES - MERY HOSPITAL OF BUFFALOPotassium3.3 (L) mmo/L3.5 - 5.5 mmo/L05/18/2023 SERVICES - MERY HOSPITAL OF BUFFALOComment: Spectime moderately hemolyzed, result may be affected. Recollection may be appropriate. Specimem moderately hemolyzed, result may be affected. Recollection may be appropriate.05/18/2023 SCRVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HALTH LABORATORY SERVICES - MERY HOSPITAL OF BUFFALOCO217 (L) 21 - 31 mmo/L21 - 31 mmo/L05/18/2023 SCRVICES - MERY HOSPITAL OF BUFFALOCO312 (L) MIDIA3 - 11 UABORATORY SERVICES - MERY HOSPITAL OF BUFFALO05/18/2023 CATHOLIC HALTH LABORATORY SERVICES - MERY HOSPITAL OF BUFFALOCalcium5.0 (LL) UABORATORY SERVICES - MERY UABORATORY SERVICES - MERY MERY HALTH LABORATORY SERVICES - MERY MERY HALTH LABORATORY SERVICES - MERY MERY HALTH <b< td=""><td>Creatinine, Serum</td><td>0.63 (L)</td><td>1.30 mg/</td><td></td><td>5:55 PM</td><td>HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF</td><td></td></b<>	Creatinine, Serum	0.63 (L)	1.30 mg/		5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
145 mmol/L555 PMHEALTH LABORATORY SERVICES - MERCYPotassium3.3 (L)3.5 - 5.5 mmol/L555 PMHEALTH LABORATORY SERVICES - MERCYPotassium3.3 (L)3.5 - 5.5 mmol/L05/18/2023 SERVICES - MERCYCATHOLIC HEALTH 	Bun/Creatinine Ratio	39.7 (H)			5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Comment: Specimen moderately hemolyzed, result may be affected. Recollection may be appropriate. Specimen moderately hemolyzed, result may be affected. Recollection may be appropriate.Siss PM MERCY MCSPITAL OF BUFFALOHEALTH LABORATORY SERVICES - MERCY HCALTH HEALTH 	Sodium	149 (H)	145		5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Specimen moderately hemolyzed, result may be affected. Recollection may be appropriate.Specimen moderately hemolyzed, result may be affected. Recollection may be appropriate.Chloride126 (H)98 - 107 mmol/L05/18/2023 SERVICES - MERCY HEALTH EDT05/18/2023 LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOCO217 (L)21 - 31 	Potassium	3.3 (L)			5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
mmol/L5:55 PM EDTHEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOCO217 (L)21 - 31 mmol/L05/18/2023 S:55 PM LABORATORY SERVICES - MERCY HOSPITAL OF 	Specimen moderately Recollection may be Specimen moderately	appropriate. hemolyzed, r					
mmol/L5:55 PM EDT HOSPITAL OF BUFFALOHEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOAnion Gap63 - 1105/18/2023 SERVICES - 	Chloride	126 (H)			5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Signed ServicesSigned ServicesHealth LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOCalcium5.0 (LL)8.6 - 10.3 mg/ dL05/18/2023 Signed Signed Si	CO2	17 (L)			5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
10.3 mg/ 5:55 PM HEALTH dL EDT LABORATORY SERVICES - MERCY HOSPITAL OF	Anion Gap	6	3 - 11		5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
	Calcium	5.0 (LL)	10.3 mg/		5:55 PM	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	

-		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/18/2023 5:55 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment:						
Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratic	on (CKD-E	PI) equation refit			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /	05/18/202	3 4:41 PM	05/18/2023 5:33 PM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Nutrative						
Authorizing Provider	Result Type		с			
Raj Thapar MD	LAB BLOOD O	RDERABLE	5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
BUFFALO						
CT CHEST WO IV CONT	RAST (CT CHE	ST WO IV	CONTRAST 71250) -	Final result (05/18/2023 3	:31 PM EDT)
Anatomical Region	Lateralit	У	Modality			
Chest			Computed	d Tomograph	y	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
				05/18/202	3 3:37 PM	
				EDT		
Impressions						
05/18/2023 3:46 PM E	DT					
Significant emphysematous changes. Small bilateral pleural effusions. Bilateral lower lobe airspace opacities, and to a lesser extent in the right upper lobe. Pneumonia is considered. Attention on follow-up CT chest evaluation in 3 months post treatment is recommended to evaluate for resolution.						
Bilateral rib fractures noted. No pneumothorax detected.						
Endotracheal and enteric tubes noted.						
Reading Location: SR-AWAN						
Dictated By: Awan, Qadus						
Dictated Date/Time: 5/18/2023 3:37 PM						
Electronically Signed By: Awan, Qadus						
Signed Date/Time: 5/18/2023 3:46 PM						
Radimetrics Dose Rep CTDIvol: 22.1 - 39.5	ort^Up-to-dat mGy. DLP: 14	te CT equ 138 mGy-c	ipment and radiation m.	n dose redu	ction techni	ques were employed.
Narrative 05/18/2023 3:46 PM E	DT					

Narrative

CT CHEST WITHOUT CONTRAST: 5/18/2023 3:27 PM

CLINICAL HISTORY: 62 years of age, Male, pneumonia, resp failure.

COMPARISON: None.

PROCEDURE COMMENTS: CT of the chest was performed without IV contrast.

Dose reduction techniques were employed to modulate kVp and mA depending on patient body size. Multiplanar reformats were reviewed.

FINDINGS:

Medical devices: Endotracheal tube with the distal trachea. Enteric tube in the the stomach.

Lymph nodes: Limited evaluation without IV contrast. Scattered prominent mediastinal lymph nodes noted.

Vasculature: Limited evaluation without IV contrast. Aorta and main pulmonary artery diameters are within normal range.

Heart: Mild coronary artery calcification. No pericardial effusion.

Lung parenchyma/pleura: Significant emphysematous changes. Small bilateral pleural effusions. Bilateral lower lobe airspace opacities, and to a lesser extent in the right upper lobe. Pneumonia is considered.

Airways: Mild bronchiectasis and bronchial wall thickening

Chest wall and spine: Left 4-7th anterior rib fractures noted. Right 4-7th anterior rib fractures noted. No pneumothorax detected.

Upper abdomen: Limited noncontrast evaluation of the upper abdomen demonstrates no definite acute abnormality.

Procedure Note

Qadus Awan, MD - 05/18/2023

Procedure Note

Formatting of this note might be different from the original. CT CHEST WITHOUT CONTRAST: 5/18/2023 3:27 PM

CLINICAL HISTORY: 62 years of age, Male, pneumonia, resp failure.

COMPARISON: None.

PROCEDURE COMMENTS: CT of the chest was performed without IV contrast.

Dose reduction techniques were employed to modulate kVp and mA depending on patient body size. Multiplanar reformats were reviewed.

FINDINGS:

Medical devices: Endotracheal tube with the distal trachea. Enteric tube in the the stomach.

Lymph nodes: Limited evaluation without IV contrast. Scattered prominent mediastinal lymph nodes noted.

Vasculature: Limited evaluation without IV contrast. Aorta and main pulmonary artery diameters are within normal range.

Heart: Mild coronary artery calcification. No pericardial effusion.

Lung parenchyma/pleura: Significant emphysematous changes. Small bilateral pleural effusions. Bilateral lower lobe airspace opacities, and to a lesser extent in the right upper lobe. Pneumonia is considered.

Airways: Mild bronchiectasis and bronchial wall thickening

Chest wall and spine: Left 4-7th anterior rib fractures noted. Right 4-7th anterior rib fractures noted. No pneumothorax detected.

Upper abdomen: Limited noncontrast evaluation of the upper abdomen demonstrates no definite acute abnormality.

IMPRESSION:

Significant emphysematous changes. Small bilateral pleural effusions. Bilateral lower lobe airspace opacities, and to a lesser extent in the right upper lobe. Pneumonia is considered. Attention on follow-up CT chest evaluation in 3 months post treatment is recommended to evaluate for resolution.

Bilateral rib fractures noted. No pneumothorax detected.

Endotracheal and enteric tubes noted.

Reading Location: SR-AWAN

Dictated By: Awan, Qadus

Dictated Date/Time: 5/18/2023 3:37 PM

Electronically Signed By: Awan, Qadus

Signed Date/Time: 5/18/2023 3:46 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 22.1 - 39.5 mGy. DLP: 1438 mGy-cm.

Authorizing Provider	Result Type
Marwan Saoud MD	IMG CT PROCEDURES

CT HEAD WO IV CONTRAST (CT HEAD WO IV CONTRAST 70450) - Final result (05/18/2023 3:31 PM EDT)

Anatomical Region	Laterality	Modality		,
lead Computed Tomography				
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/18/2023 3:33 PM	

FDT

Impressions 05/18/2023 3:37 PM EDT

No intracranial hemorrhage, midline shift or mass effect.

Due to its inherent limitations, a "negative" noncontrast CT of the brain examination should not preclude the performance of additional imaging or workup (e.g. MRI of the Brain, Lumbar Puncture, etc.) for further evaluation, if clinically warranted.

Reading Location: SR-AWAN

Dictated By: Awan, Qadus

Dictated Date/Time: 5/18/2023 3:33 PM

Electronically Signed By: Awan, Qadus

Signed Date/Time: 5/18/2023 3:37 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 22.1 - 39.5 mGy. DLP: 1438 mGy-cm.

Narrative

05/18/2023 3:37 PM EDT CLINICAL HISTORY: Encephalopathy, status post ACLS, anoxic injury

COMPARISON: 5/11/2023

PROCEDURE COMMENTS: CT of the head was performed without administration IV contrast.

Dose reduction techniques were utilized based on patient's body weight and habitus.

FINDINGS:

There is no intracranial hemorrhage, midline shift or mass effect. There is no extra-axial fluid collection.

The ventricles and sulci are normal in size and there is no evidence of hydrocephalus.

The visualized globes and orbits are unremarkable.

Mucosal thickening in the paranasal sinuses. Patchy opacity in the mastoid air cells.

There is no depressed skull fracture.

The visualized soft tissues are unremarkable.

Procedure Note

Qadus Awan, MD - 05/18/2023

Procedure Note

Formatting of this note might be different from the original. CLINICAL HISTORY: Encephalopathy, status post ACLS, anoxic injury

COMPARISON: 5/11/2023

PROCEDURE COMMENTS: CT of the head was performed without administration IV contrast.

Dose reduction techniques were utilized based on patient's body weight and habitus.

FINDINGS:

There is no intracranial hemorrhage, midline shift or mass effect. There is no extra-axial fluid collection.

The ventricles and sulci are normal in size and there is no evidence of hydrocephalus.

The visualized globes and orbits are unremarkable.

Mucosal thickening in the paranasal sinuses. Patchy opacity in the mastoid air cells.

There is no depressed skull fracture.

The visualized soft tissues are unremarkable.

IMPRESSION:

No intracranial hemorrhage, midline shift or mass effect.

Due to its inherent limitations, a "negative" noncontrast CT of the brain examination should not preclude the performance of additional imaging or workup (e.g. MRI of the Brain, Lumbar Puncture, etc.) for further evaluation, if clinically warranted.

Reading Location: SR-AWAN

Dictated By: Awan, Qadus

Dictated Date/Time: 5/18/2023 3:33 PM

Electronically Signed By: Awan, Qadus

Signed Date/Time: 5/18/2023 3:37 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 22.1 - 39.5 mGy. DLP: 1438 mGy-cm.

Authorizing Provider	Result Type
Marwan Saoud MD	IMG CT PROCEDURES

ECG 12-LEAD - Final result (05/18/2023 2:45 PM EDT)

	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Narrative				
Authorizing Provider	Result Type			
Raj Thapar MD	ECG ORDERABLES			
Performing				
Organization	Address	City/State/ZIP Code	Phone Number	
EPIPHANY				

(ABNORMAL) POCT G	ILUCOSE ME	TER UNSC	LICITED RESULTS - F	inal result (05/18/2023	1:17 PM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	202 (H)	74 - 100 mg/dL		05/19/2023 12:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical I Laterality	_ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blo specimen / U			05/18/202 EDT	23 1:17 PM	05/19/2023 12:25 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT (OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott I	Rd.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	iLUCOSE ME	T ER UNSC Ref Range	DLICITED RESULTS - F Test Method	Final result (Analysis Time	-	11:12 AM EDT) Pathologist Signature
Glucose, Poc	176 (H)	74 - 100		05/18/2023		
		mg/dL		11:31 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical I	_ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Unknown			05/18/202 EDT	23 11:12 AM	05/18/2023 11:31 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD		OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	

CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	

XR CHEST 1 VIEW (XR CHEST 1 VIEW 71045) - Final result (05/18/2023 9:36 AM EDT)

Anatomical Region	Laterality
Chest	

Modality

	Anatomical Location /	Collection Method	/	
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/18/2023 9:39 AM EDT	
			LUI	
Impressions				
05/18/2023 9:39 AM 1. No acute cardio				
Reading Location:	SR-LAMARCA2			
Dictated By: Lamar				
	: 5/18/2023 9:39 AM			
	ned By: Lamarca, Antho	ny		
Signed Date/Time:	5/18/2023 9:39 AM			
Narrative				
05/18/2023 9:39 AM CLINICAL HISTORY:				
TECHNIQUE: AP upri	ght chest.			
COMPARISON: 5/16/2	023.			
FINDINGS: Lungs/pleura: Unre	markable. No pleural e	ffusion or pneumot	:horax.	
	e. No cardiomegaly.			
Bones/joints: Unre	markable.			
Other: Endotrachea	I and nasogastric tube	s in radiographica	ally satisfactory posit	.10 n.
Procedure Note				
Anthony Lamarca, M	D - 05/18/2023			
Formatting of this note CLINICAL HISTORY: ET	e might be different from th tube placement.	ne original.		
TECHNIQUE: AP uprigl	ht chest.			
COMPARISON: 5/16/2	023.			
FINDINGS:				
Lungs/pleura: Unrema	rkable. No pleural effusion	or pneumothorax.		
Heart: Unremarkable. I Mediastinum: Unrema				
Bones/joints: Unremar	kable.			
Other: Endotracheal ar	nd nasogastric tubes in radi	ographically satisfacto	ory position.	
IMPRESSION: 1. No acute cardiopuln	nonary process			
Reading Location: SR-I				
Dictated By: Lamarca,				
Dictated Date/Time: 5/				
Electronically Signed B				
Signed Date/Time: 5/1	8/2023 9:39 AM			
Authorizing Provider	Result Type			
Raj Thapar MD	IMG XR PROCEDURES			

(ABNORMAL) POCT G	LUCOSE ME	TER UNSO	LICITED RESULTS - F	inal result (05/18/2023	8:27 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	168 (H)	74 - 100 mg/dL		05/18/2023 8:45 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	· · · · · ·	od	volume			
Blood	Capillary blo specimen / L			05/18/202 EDT	23 8:27 AM	05/18/2023 8:45 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT C	OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott F	₹d.	Buffalo, NY 14220, US	716-828-2	2413	
INTUBATION (Intubatio Narrative	n) - Final res	ult (05/18/2	2023 8:24 AM EDT)			
Authorizing Provider	Result Type					
Raj Thapar MD	IN CLINIC/BE	DSIDE ORD	ERABLES			
ECG 12-LEAD - Final res	Anatomical L		Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Narrative						
Authorizing Provider	Result Type					
Hannah Gawlak	ECG ORDERA	ABLES				
Performing						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
EPIPHANY						

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/18/2023 5:24 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose, Poc	163 (H)	74 - 100 mg/dL		05/18/2023 5:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Specimen (Source)	Anatomical Loc Laterality	ation /	Collection Method / Volume	Collection	Timo	Received Time
Blood	Capillary blood specimen / Unk		volume	05/18/202 EDT		05/18/2023 5:46 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF (CARE TES	T DOCKED DEVICE UNS	OLICITED RES	ULTS	
Performing			City (Chata /ZID Carda	Phone Nu		
Organization CATHOLIC HEALTH	Address 565 Abbott Rd.		City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Sos Abbott Na.		Bulluio, NY 14220, 03	110 020 2	-15	
50117120						
MAGNESIUM - Final res	sult (05/18/2023	3 5:00 AI	M EDT)			
Campanant		Ref	Teat Mathad	Analysis	Deufeure ed At	Dath allo sist Cisco at us
Component Magnesium		Range 1.7 - 2.5	Test Method	Time 05/18/2023		Pathologist Signature
Magnesium		n.7 - 2.5 mg/dL		5:47 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loc Laterality	ation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unk	nown	Venipuncture / Unknown	05/18/2023 5:00 AM EDT		05/18/2023 5:12 AM EDT
Narrative						
Authorizing Provider	Result Type					
Brendan Frawley PA	LAB BLOOD OR	DERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/18/2023 5:00 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose	188 (H)	74 - 100 mg/dL		05/18/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
BUN	31 (H)	8 - 27 mg/dL	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.82	0.80 - 1.30 mg/ dL	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	37.8 (H)	10.0 - 20.1	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	149 (H)	136 - 145 mmol/L	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.1	3.5 - 5.5 mmol/L	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	114 (H)	98 - 107 mmol/L	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	27	21 - 31 mmol/L	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	8	3 - 11	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Calcium	8.6	8.6 - 10.3 mg/ dL	05/18/2023 CATHOLIC 5:47 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
	>90.0	>=90.0 mL/min/ 1.73 m2		05/18/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment for	Collaboratio					
	Anatomical Loc	ation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
	Venous blood specimen / Unl	known	Venipuncture / Unknown	05/18/202 EDT	3 5:00 AM	05/18/2023 5:12 AM EDT
Narrative						
Authorizing Provider	Result Type					
Brendan Frawley PA	LAB BLOOD OF	RDERABLE	S			
Performing	Address		City/State/ZIP Code	Phone Nu	mber	
0	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/18/2023 3:04 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.38 (L)	4.50 - 6.50 10*6/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	13.0 (L)	14.0 - 18.0 g/ dL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	38.8 (L)	40.0 - 54.0 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
MCV	88.5	80.0 - 94.0 fL		05/18/2023 3:11 AM EDT		
МСН	29.7	26.0 - 34.0 pg		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.6	31.0 - 37.0 g/ dL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.1	11.5 - 14.5 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	283	145 - 450 10*3/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	9.1	7.4 - 10.4 fL		05/18/2023 3:11 AM EDT		
Neutrophils Relative	75	50 - 75 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Relative	12 (L)	20 - 40 %		05/18/2023 3:11 AM EDT		
Monocytes Relative	12 (H)	>2 - <10 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis	-	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Relative	2	<=8 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Relative	1	<=2 %		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Neutrophils Absolute	11.1 (H)	2.0 - 8.2 1000/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.8	0.8 - 4.4 1000/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.8 (H)	0.1 - 1.1 1000/uL		05/18/2023 3:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL		05/18/2023 3:11 AM EDT		
Basophils Absolute	0.1	0.0 - 0.2 1000/uL		05/18/2023 3:11 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 3:04 AM	05/18/2023 3:08 AM EDT
Narrative						
Authorizing Drovidor	Decult Tupo					
Authorizing Provider Marwan Saoud MD	Result Type LAB BLOOD O	RDERABLE	S			

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/18/2023 3:04 AM EDT)

		Ref		Analysis	5, 10, 2025 5.	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
рН, Venous	7.44 (H)	7.31 - 7.41		05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	46.0	40.0 - 52.0 mmHg		05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	60.0 (H)	30.0 - 50.0 mmHg		05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	31.2 (H)	22.0 - 28.0 mmol/L		05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	91 (H)	60 - 90 %		05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	6.1			05/18/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/18/202 EDT	23 3:04 AM	05/18/2023 3:08 AM EDT
Authorizing Provider	Result Type					
Christine Poharatnyj NP	LAB BLOOD C	RDERABLE	S			
'						

Performing	Address			Dhana Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 178 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/18/2023 4:12 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/17/202 EDT	23 11:43 PM	05/18/2023 4:12 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	- CARE TES	T DOCKED DEVICE UNS	OLICITED RES	OLIS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/17/2023 6:33 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	201 (H)	74 - 100 mg/dL		05/17/2023 6:50 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/17/202 EDT	23 6:33 PM	05/17/2023 6:50 PM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 143 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/18/2023 4:12 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/17/202 EDT	23 5:00 PM	05/18/2023 4:12 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/17/2023 11:29 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	217 (H)	74 - 100 mg/dL		05/17/2023 11:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical L	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U			05/17/202 EDT	23 11:29 AM	05/17/2023 11:50 AM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UN	Solicited res	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
BUFFALO						
C DIFF PANEL (CLOSTRI	DIUM DIFFICIL	.E PANEL) Ref	- Final result (05/17/2	2023 10:53 A Analysis	M EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Clostridium Difficile	Negative	Negative		05/17/2023 12:48 PM EDT		
With a Negative pred will not be performe		-	repeat testing			
C. difficile toxin A (GDH) were tested us immunoassay. The C. for use with fecal s diarrhea. The perfor test have not been e from colonic washing enemas.	ing a rapid m difficile pan pecimens from mance charact stablished wi	embrane el was d patient eristics th speci	enzyme eveloped s with of this mens obtained			
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Stool	Rectal contents Unknown	s /	Non-blood Collection / Unknown	/ 05/17/202 EDT	3 10:53 AM	05/17/2023 11:27 AM EDT
Narrative						
Authorizing Dupuidou	De audt Turs a					
Authorizing Provider Raj Thapar MD	Result Type		STOOLS ORDERABLES			
		IDS AND .	STOOLS ONDERABLES			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	
CULTURE, SINGLE ORG	ANISM - Final ı		/17/2023 10:53 AM EE			
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Culture, Single Org.	Negative for MRSA		MIC	05/18/2023 5:23 PM	CATHOLIC HEALTH	

EDT

LABORATORY SERVICES -SISTERS OF CHARITY MAIN STREET

Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Swab (Nares for MRSA)	,		Non-blood Collection , Unknown		23 10:53 AM	05/17/2023 11:27 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB MICROBI	OLOGY - G	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
(ABNORMAL) POCT G		Ref		inal result (Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	173 (H)	74 - 100 mg/dL		05/17/2023 6:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /		- .	
Specimen (Source)	Laterality	-l	Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			EDT	23 5:48 AM	05/17/2023 6:10 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OI	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/17/2023 4:23 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	12.5 (H)	4.5 - 11.0 10*3/uL		05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range Test Met	Analysis hod Time	Parformad At	Pathologist Signature
RBC	4.43 (L)	4.50 - 6.50 10*6/uL		CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	13.2 (L)	14.0 - 18.0 g/ dL	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	39.6 (L)	40.0 - 54.0 %	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.4	80.0 - 94.0 fL	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.7	26.0 - 34.0 pg	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.3	31.0 - 37.0 g/ dL	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.1	11.5 - 14.5 %	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	236	145 - 450 10*3/uL	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.3	7.4 - 10.4 fL	05/17/2023 4:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref	Analysis	Analysis
Component	Value	Range Test Method	Time Performed At Pathologist Signature	
Neutrophils Relative	74	50 - 75 %	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Lymphocytes Relative	12 (L)	20 - 40 %	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Monocytes Relative	12 (H)	>2 - <10 %	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Eosinophils Relative	2	<=8 %	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Basophils Relative	0	<=2 %	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Neutrophils Absolute	9.3 (H)	2.0 - 8.2 1000/uL	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Lymphocytes Absolute	1.5	0.8 - 4.4 1000/uL	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Monocytes Absolute	1.5 (H)	0.1 - 1.1 1000/uL	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM
Eosinophils Absolute	0.3	0.0 - 0.6 1000/uL	05/17/2023 CATHOLIC 4:51 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	4:51 AM

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/17/2023 4:51 AM EDT		
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/17/202 EDT	23 4:23 AM	05/17/2023 4:39 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD OF	RDERABLE	S			
Doutounit						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
PHOSPHORUS - Final re Component	Value	Ref Range	M EDT) Test Method	Analysis Time		Pathologist Signature
Phosphorous	3.3	2.5 - 5.0 mg/dL		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/17/202 EDT	23 4:23 AM	05/17/2023 4:39 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD OF	RDERABLF	S			
			-			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd	•	Buffalo, NY 14220, US	716-828-2	2413	
BUFFALO						

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/17/2023 4:23 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
рН, Venous	7.42 (H)	7.31 - 7.41		05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	47.0	40.0 - 52.0 mmHg		05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	84.0 (H)	30.0 - 50.0 mmHg		05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	30.5 (H)	22.0 - 28.0 mmol/L		05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	97 (H)	60 - 90 %		05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	5.1			05/17/2023 4:41 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Seurce)	Anatomical Lo	cation /	Collection Method /	Collection	Time	Dessived Time
Specimen (Source) Blood	Laterality Venous blood specimen / Ur	known	Volume Venipuncture / Unknown	Collection 05/17/202 EDT	23 4:23 AM	Received Time 05/17/2023 4:39 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	l.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/17/2023 4:23 AM EDT)

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Glucose	173 (H)	74 - 100 mg/dL	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	29 (H)	8 - 27 mg/dL	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	0.93	0.80 - 1.30 mg/ dL	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	31.2 (H)	10.0 - 20.1	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	149 (H)	136 - 145 mmol/L	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	3.7	3.5 - 5.5 mmol/L	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	114 (H)	98 - 107 mmol/L	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	29	21 - 31 mmol/L	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	6	3 - 11	05/17/2023 CATHOLIC 5:12 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Calcium	8.6	8.6 - 10.3 mg/ dL		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Aspartate Aminotranferase (AST)	35	13 - 39 U/L		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Alanine Aminotransferase (ALT)	64 (H)	7 - 52 U/ L		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Alkaline Phosphatase	74	34 - 104 U/L		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Protein, Total	5.7 (L)	6.1 - 7.9 g/dL		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Albumin	3.1 (L)	3.3 - 4.8 g/dL		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Albumin/Globulin Ratio	1.2	1.1 - 2.8		05/17/2023 5:12 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Total Bilirubin	0.8	0.3 - 1.0 mg/dL		05/17/2023 5:12 AM EDT	
GFR	>90.0	>=90.0 mL/min/ 1.73 m2		05/17/2023 5:12 AM EDT	

	Ref		Analysis						
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature			
Comment:									
Effective 5/11/2022,			-						
Disease Epidemiology Collaboration (CKD-EPI) equation refit									
without adjustment f			Callestian Mathead /						
Specimen (Source)	Anatomical Location /		Collection Method / Volume	Collection Time		Received Time			
Blood	Laterality		Venipuncture /	05/17/2023 4:23 AM					
ыоод	Venous blood specimen / Unknown		Jnknown EDT		.5 4.25 AIVI	05/17/2023 4:39 AM EDT			
			UTKHOWH						
Narrative									
Authorizing Provider	Result Type								
Marwan Saoud MD	LAB BLOOD ORDERABLES								
Performing									
Organization	Address		City/State/ZIP Code	Phone Number					
CATHOLIC HEALTH	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2413					
LABORATORY SERVICES									
- MERCY HOSPITAL OF									
BUFFALO									
(ABNORMAL) POCT G				inal recult (05/16/2022	11.27 DM EDT)			
(ADINORIVIAL) POCT G		Ref	LICITED RESULTS - F		05/10/2025				
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature			
Glucose, Poc	218 (H)	74 - 100			CATHOLIC				
Glucose, Poc		74 - 100			CALINOLIC				
					μεδιτή				
		mg/dL		11:57 PM	HEALTH I ABORATORY				
					LABORATORY				
				11:57 PM					
				11:57 PM	LABORATORY SERVICES -				
				11:57 PM	LABORATORY SERVICES - MERCY				
		mg/dL		11:57 PM	LABORATORY SERVICES - MERCY HOSPITAL OF				
	Anatomical Lo	mg/dL	Collection Method /	11:57 PM EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
Specimen (Source)	Anatomical Lo Laterality	mg/dL	Collection Method / Volume	11:57 PM EDT Collection	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time			
Specimen (Source) Blood	Anatomical Lo Laterality Capillary blood	mg/dL cation /	1	Collection 05/16/202	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time 05/16/2023 11:57 PM			
	Anatomical Lo Laterality	mg/dL cation /	1	11:57 PM EDT Collection	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time			
Blood	Anatomical Lo Laterality Capillary blood	mg/dL cation /	1	Collection 05/16/202	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time 05/16/2023 11:57 PM			
	Anatomical Lo Laterality Capillary blood	mg/dL cation /	1	Collection 05/16/202	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time 05/16/2023 11:57 PM			
Blood	Anatomical Lo Laterality Capillary blood	mg/dL cation /	1	Collection 05/16/202	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time 05/16/2023 11:57 PM			
Blood	Anatomical Lo Laterality Capillary blood specimen / Un	mg/dL cation /	1	Collection 05/16/202	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider	Anatomical Lo Laterality Capillary blood specimen / Un Result Type	mg/dL dation /	Volume	11:57 PM EDT Collection 05/16/202 EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood	Anatomical Lo Laterality Capillary blood specimen / Un Result Type	mg/dL dation /	1	11:57 PM EDT Collection 05/16/202 EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD	Anatomical Lo Laterality Capillary blood specimen / Un Result Type	mg/dL dation /	Volume	11:57 PM EDT Collection 05/16/202 EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD Performing	Anatomical Lo Laterality Capillary blood specimen / Un Result Type	mg/dL dation /	Volume	11:57 PM EDT Collection 05/16/202 EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD Performing Organization	Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF Address	mg/dL dation /	Volume T DOCKED DEVICE UNS City/State/ZIP Code	11:57 PM EDT Collection 05/16/202 EDT OLICITED RES Phone Nu	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD Performing	Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF	mg/dL dation /	Volume	11:57 PM EDT Collection 05/16/202 EDT OLICITED RES	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD Performing Organization CATHOLIC HEALTH	Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF Address	mg/dL dation /	Volume T DOCKED DEVICE UNS City/State/ZIP Code	11:57 PM EDT Collection 05/16/202 EDT OLICITED RES Phone Nu	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			
Blood Narrative Authorizing Provider Marwan Saoud MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES	Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF Address	mg/dL dation /	Volume T DOCKED DEVICE UNS City/State/ZIP Code	11:57 PM EDT Collection 05/16/202 EDT OLICITED RES Phone Nu	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 11:37 PM	Received Time 05/16/2023 11:57 PM			

(ABNORMAL) High Sensitivty Troponin (HIGH SENSITIVTY TROPONIN) - Final result (05/16/2023 6:06 PM EDT)

Component		Ref		Analysis	Doutours of At	Dath allo sist Cismature	
Component High Sensitivity Troponin	Value 454 (H)	Range 0 - 20 pg/mL	Test Method	Time 05/16/2023 7:30 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time		Received Time	
Blood	Venous blood specimen / Unknown		Venipuncture / Unknown	05/16/2023 6:06 PM EDT		05/16/2023 6:53 PM EDT	
Narrative							
Authorizing Provider	Result Type						
Divya Gumber MD	Result Type LAB BLOOD ORDERABLES						
Performing	Address		City/State/ZID Code	Phone Nu	mbor		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott F	₹d.	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2			
ECG 12-LEAD - Final res	ult (05/16/20 Anatomical L Laterality			Collection	Time	Received Time	
Narrative	Lateranty		Volume	concetion			
Authorizing Provider	Result Type						
Divya Gumber MD	ECG ORDERA	ABLES					
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber		
EPIPHANY							
(ABNORMAL) POCT G	LUCOSE ME	TER UNSC Ref	DLICITED RESULTS - F	inal result (Analysis	05/16/2023	5:12 PM EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature	
Glucose, Poc	159 (H)	74 - 100 mg/dL		05/16/2023 5:31 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO		
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time		Received Time	
Blood	Capillary blood specimen / Unknown			05/16/2023 5:12 PM EDT		05/16/2023 5:31 PM EDT	
Narrative							

Authorizing Provider	Result Type						
Marwan Saoud MD	LAB POINT OF CARE TES	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS					
Performing							
Organization	Address	City/State/ZIP Code	Phone Number				
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413				
LABORATORY SERVICES							
- MERCY HOSPITAL OF							
BUFFALO							

(ABNORMAL) URINALYSIS WITH MICROSCOPIC REFLEX - Final result (05/16/2023 3:40 PM EDT)

		Ref		Analysi		
Component	Value	Range	Test Method	Time	Performed At Pathologist Sigi	nature
Urine Source	Urine, Random			05/16/ 5:22 PM EDT		
Urine Color	Yellow	Colorless, Straw, Yellow		05/16/ 5:22 PN EDT		
Urine Appearance	Clear	Clear, Slt Hazy, Hazy, Slt Cloudy		05/16/ 5:22 PN EDT	2023 CATHOLIC 1 HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Glucose, Urine	100 (A)	Negative mg/dL		05/16/ 5:22 PN EDT	2023 CATHOLIC 1 HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Ketones, Urine	Negative	Negative, Trace mg/dL		05/16/ 5:22 PN EDT	2023 CATHOLIC 1 HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Blood, Urine	Moderate (A)	Negative		05/16/ 5:22 PN EDT		
Protein, Urine	30 (A)	Negative mg/dL		05/16/ 5:22 PN EDT		

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Nitrites, Urine	Negative	Negative		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bilirubin, Urine	Negative	Negative		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specific Gravity	1.020	1.006 - 1.029		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pH, Urine	6.5	5.0 - 8.0		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Urobilinogen, Urine	0.2	0.2, 1.0, <2.0 Ehrlich'U/ dL		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Leukocyte Esterase	Negative	Negative		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Urine (Urine, Random)			Urine Random / Unknown	EDT	23 3:40 PM	05/16/2023 4:05 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB URINE OR	DERABLES				
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) microscopic reflex (MICROSCOPIC REFLEX) - Final result (05/16/2023 3:40 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Red Blood Cells, Urine	31-50 (A) None Seen, 0-2 /hpf			05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
White Blood Cells, Urine	0-2	None Seen, 0-2 /hpf		05/16/2023 5:22 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Urine (Urine, Random)			Urine Random / Unknown	05/16/202 EDT	23 3:40 PM	05/16/2023 4:05 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB URINE OR	DERABLES				
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/16/2023 3:40 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	177 (H)	74 - 100 mg/dL		05/16/2023 4:26 PM EDT		
BUN	30 (H)	8 - 27 mg/dL		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	0.98	0.80 - 1.30 mg/ dL		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	30.6 (H)	10.0 - 20.1		05/16/2023 4:26 PM EDT		
Sodium	149 (H)	136 - 145 mmol/L		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.8	3.5 - 5.5 mmol/L		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	113 (H)	98 - 107 mmol/L		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	29	21 - 31 mmol/L		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	7	3 - 11		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.6	8.6 - 10.3 mg/ dL		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	87.2 (L)	>=90.0 mL/min/ 1.73 m2		05/16/2023 4:26 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 3:40 PM	05/16/2023 4:05 PM EDT

Narrative				
Authorizing Provider	Result Type			
Marwan Saoud MD	LAB BLOOD ORDERABLI	ES		
Deufermeinen				
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
LABORATORY SERVICES - MERCY HOSPITAL OF				
BUFFALO				
XR CHEST 1 VIEW (XR C	HEST 1 VIEW 71045) -	Final result (05/16/2023	2:58 PM EDT)	
Anatomical Region	Laterality	Modality		
Chest		Computed	Radiography	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
	ž		05/16/2023 3:07 PM	
			EDT	
Impressions				
05/16/2023 3:09 PM E	DT			
Enteric tube project	s in good position, a	as detailed.		
Mild interstitial pr infection can appear		c. Pulmonary intersti	tial edema and viral	upper respiratory
Reading Location: S	-			
-				
Dictated By: Folan,				
Dictated Date/Time:	5/16/2023 3:07 PM			
Electronically Signe	d By: Folan, Thomas			
Signed Date/Time: 5	/16/2023 3:09 РМ			
Norrativo				
Narrative 05/16/2023 3:09 PM E	DT			
EXAM: XR CHEST 1 VIE	w 71045.			
CLINICAL HISTORY: Ch	eck tube placement.			
TECHNIQUE: AP uprigh	t chest.			
COMPARISON: Chest ra	diograph dated 5/16/2	2023, earlier the same	e day.	
FINDINGS:				
Enteric tube extends radiograph.	beneath the diaphra	gm with distal tip cou	ursing off the inferi	or margin of the
Heart projects withi	n the confines of no	rmal for size.		
Mild interstitial pr	ominence.			
No focal airspace co	nsolidations.			
No sizable pleural e	ffusion or evidence of	of pneumothorax.		
No evident acute oss	eous abnormality.			

Procedure Note
Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.
CLINICAL HISTORY: Check tube placement.
TECHNIQUE: AP upright chest.
COMPARISON: Chest radiograph dated 5/16/2023, earlier the same day.
FINDINGS:
Enteric tube extends beneath the diaphragm with distal tip coursing off the inferior margin of the radiograph.
Heart projects within the confines of normal for size.
Mild interstitial prominence.
No focal airspace consolidations.
No sizable pleural effusion or evidence of pneumothorax.
No evident acute osseous abnormality.
IMPRESSION:
Enteric tube projects in good position, as detailed.
Mild interstitial prominence, nonspecific. Pulmonary interstitial edema and viral upper respiratory infection can appear similarly.
Reading Location: SR-FOLAN
Dictated By: Folan, Thomas
Dictated Date/Time: 5/16/2023 3:07 PM
Electronically Signed By: Folan, Thomas
Signed Date/Time: 5/16/2023 3:09 PM

 Authorizing Provider
 Result Type

 Erin Mouyeos NP
 IMG XR PROCEDURES

TRANSTHORACIC ECHO (TTE) LIMITED W/ CONTRAST (05/16/2023 2:10 PM EDT)

		Ref		Analysis		Pathologist
Component	Value	Range	Test Method	Time	Performed At	Signature
BSA	2.34	m2			CVSYNGODYNAMICSECHO	
2D EF	62	%			CVSYNGODYNAMICSECHO)
LV Diastolic Volume (BP)	141.1	mL			CVSYNGODYNAMICSECHC	
LV Systolic Volume (BP)	61.6	mL			CVSYNGODYNAMICSECHC	
Simpson BP	56	%			CVSYNGODYNAMICSECHO	
LVIDD	4.08	7.42 - 10.31 cm			CVSYNGODYNAMICSECHC	
LVIDS	2.72	4.29 - 6.50 cm			CVSYNGODYNAMICSECHC	
IVSd	1.28	0.6 - 1.1 cm			CVSYNGODYNAMICSECHC)
LVPWd	1.27	0.6 - 1.1 cm			CVSYNGODYNAMICSECHC	
FS	33	28 - 44 %			CVSYNGODYNAMICSECHC	

		Ref		Analysis		Pathologist			
Component	Value	Range	Test Method	Time	Performed At	Signature			
Est. RA pres	3.0	mmHg			CVSYNGODYNAMICS	SECHO			
LV Diastolic Volume Index (BP)	60.3	mL/m2			CVSYNGODYNAMICS	SECHO			
LV Systolic Volume Index (BP)	26.3	mL/m2			CVSYNGODYNAMICS	SECHO			
ZLVIDS	-5.25				CVSYNGODYNAMICS	SECHO			
ZLVIDD	-7.63				CVSYNGODYNAMICS	SECHO			
A2C EF	58	%			CVSYNGODYNAMICS	SECHO			
Main PA dia	33.3	cm			CVSYNGODYNAMICS	SECHO			
RV-dias basal d	3.6	cm			CVSYNGODYNAMICS	SECHO			
Anatomical Region	l	aterality		Modality					
				Ultrasound					
Specimen (Source)	Anator Lateral	nical Locatio ity	n / Collection Volume	Method /	Collection Time	Received Time			
Narrative									
 Left ventricular systolic function is low normal with an ejection fraction of 50-55%. The following segments are hypokinetic: basal inferoseptal, basal inferior and basal inferolateral. All other segments are normal. Right ventricular systolic function is normal. Left ventricle shows mild concentric hypertrophy. When compared to the prior study on 5/11/23 (very difficult study on my review), the segmental wall motion abnormalities may have been possibly present on the prior study. Left Ventricle Left ventricle cavity size appears normal. There is mild concentric hypertrophy. Left ventricular systolic function is low normal with an ejection fraction of 50-55%. 									
Right Ventricle Right ventricle c	avity size	e appears r	normal. Systol	ic function	is normal.				
						the study. The study atus and body habitus.			
ECG The ECG shows nor	mal sinus	rhythm.							
Prior Study Prior TTE study available for comparison. Prior study date: 5/11/2023.									
Prior TTE study available for comparison. Prior study date: 5/11/2023. Wall Scoring Baseline Score Index: 1.18 The following segments are hypokinetic: basal inferoseptal, basal inferior and basal inferolateral. All other segments are normal.									
Authorizing Provider	Result	Туре							
Raj Thapar MD		IO PROCEDU	JRES						

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/16/2023 11:46 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
Glucose, Poc	167 (H)	74 - 100 mg/dL		05/16/2023 12:13 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	1	Received Time
Blood	Capillary blood specimen / Unknown	volume	05/16/2023 11:4 EDT	46 AM	05/16/2023 12:13 PM EDT
Narrative					
Authorizing Provider	Result Type				
Marwan Saoud MD	LAB POINT OF CARE TES	T DOCKED DEVICE UNSO	LICITED RESULTS		
Performing					
Organization	Address	City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413		
MRSA/SA BC - Final res	ult (05/16/2023 10:48 A Ref	M EDT)	Analysis		
Component	Value Range	Test Method		rformed At	Pathologist Signature
STAPHYLOCOCCUS AUREUS, PCR	Negative Negative	CEPHEID GENEXPERT	05/17/2023 CA 12:10 PM HE EDT LAI SEF SIS CH MA	THOLIC ALTH BORATOR\ RVICES - TERS OF ARITY	
Comment: Negative for S. aure amplification of pos Results to be confirm		rect			
METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS, PCR	Negative Negative	CEPHEID GENEXPERT	EDT LAI SEF SIS CH MA	ALTH Boratory Rvices - Ters of Arity	1
Comment: Negative for MRSA nu amplification of pos Results to be confir	itive blood culture.				
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	9	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/16/2023 10:4 EDT		05/16/2023 11:57 AM EDT
TVATTALIVE					
Authorizing Provider	Result Type				
Raj Thapar MD	LAB BODY FLUIDS AND	STOOLS ORDERABLES			

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1150

(ABNORMAL) CULTURE, BLOOD ANAEROBIC - Final result (05/16/2023 10:48 AM EDT)

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Culture, Blood Anaerobic	Culture POSITIVE on Day 2. (AA)			05/18/2023 9:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET
Culture, Blood Anaerobic	Staphylococcus epidermidis (A)		MIC	05/18/2023 9:51 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET

Comment:

Susceptibility will not be performed because the clinical significance of coagulase negative Staphylococci isolated from a single blood culture is undetermined. Please consult Microbiology if further work-up is needed.

This isolate from a single blood culture suggests contamination. Please review blood culture procedure for venipuncture site preperation.

The organism value for this result has been updated. These results have been appended to the previously preliminary verified report.

Gram Stain

Gram positive cocci in

clusters (AA)

05/18/2023 CATHOLIC 9:51 AM HEALTH EDT LABORATORY SERVICES -SISTERS OF CHARITY MAIN STREET

Comment: This is an appended report. These results have been appended to a previously preliminary verified report.

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/16/2023 10:48 AM EDT	05/16/2023 11:57 AM EDT
Narrative				
Authorizing Provider	Result Type			
Raj Thapar MD	LAB MICROBIOLOGY - C	ENERAL ORDERABLES		
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1150	

Component BLOOD CULTURE	Value Culture POSITIVE on Day 1. (AA)	Ref Range	Test Method	Analysis Time 05/18/2023 9:50 AM EDT	Performed At Pathologist Signature CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET
BLOOD CULTURE	Staphylococcus capitis (A)		MIC	05/18/2023 9:50 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET
Comment:					

Susceptibility will not be performed because the clinical significance of coagulase negative Staphylococci isolated from a single blood culture is undetermined. Please consult Microbiology if further work-up is needed.

This isolate from a single blood culture suggests contamination. Please review blood culture procedure for venipuncture site preperation.

The organism value for this result has been updated. These results have been appended to the previously preliminary verified report.

Gram Stain	Gram positive cocci in clusters (AA)		05/18/2023 9:50 AM EDT	CATHOLIC HEALTH LABORATOR SERVICES - SISTERS OF CHARITY MAIN STREET	(
Comment: This is an ap	pended report. These res		l to a previou	sly preliminary	verified report.
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/16/202 EDT	3 10:48 AM	05/16/2023 11:57 AM EDT
Narrative					
Authorizing Provider	Result Type				
Raj Thapar MD	LAB MICROBIOLOGY - G	SENERAL ORDERABLES			
Performing Organization	Address	City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1	150	

(ABNORMAL) CULTURE, RESPIRATORY - Final result (05/16/2023 10:39 AM EDT)

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Culture, Respiratory	Normal flora absent. Culture yields:		MIC	05/18/2023 11:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET

Component	Value	Ref Range	Test Method	Analysis Time	Porformed At	Pathologist Signature
Culture, Respiratory Comment: The organisi	Many Colonies Serratia marcescens (A) m value for this		MIC	05/18/2023 11:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
preliminary verified repo Gram Stain	Moderate White Blood Cells seen.			05/18/2023 11:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	<=25 Epithelial cells per low power field			05/18/2023 11:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	Moderate Gram negative bacilli			05/18/2023 11:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Respiratory (Trachael Aspirate)				05/16/202 EDT	3 10:39 AM	05/16/2023 11:57 AM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type)LOGY - G	ENERAL ORDERABLES			
Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY	Address 2157 Main St.		City/State/ZIP Code Buffalo, NY 14214, U	Phone Nu S 716-862-1		
MAIN STREET	EROBIC - Final	result (05	/16/2023 10 [.] 38 AM	EDT)		

CULTURE, BLOOD ANAEROBIC - Final result (05/16/2023 10:38 AM EDT)

Component		Ref	Tast Mathad	Analysis	Derfermed At	Dath alogist Cignature
Component Culture, Blood Anaerobic	Value No growth after 5 days incubation.	Range	Test Method	Time 05/21/2023 4:01 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN	Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/16/202 EDT	23 10:38 AM	05/16/2023 11:57 AM EDT
Narrative						
Authorizing Provider	Decult Turpe					
Authorizing Provider Raj Thapar MD	Result Type)LOGY - G	ENERAL ORDERABLES			
Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	Address 2157 Main St.		City/State/ZIP Code Buffalo, NY 14214, US	Phone Nu 716-862-1		
CULTURE, BLOOD - Fina _Component	al result (05/16 Value	/2023 10 Ref Range	:38 AM EDT) Test Method	Analysis Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/21/2023 4:01 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection 05/16/202	11me 23 10:38 AM	Received Time 05/16/2023 11:57 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Raj Thapar MD	LAR MICKOBIC	jlogy - G	ENERAL ORDERABLES			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1		
XR CHEST 1 VIEW (XR C				23 10:21 AM	EDT)	
Anatomical Region	Lateralit	У	Modality Computed	d Radiograph	v	
			computer		,	

	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/16/2023 10:22 AM EDT	
Impressions				
05/16/2023 10:23 AM 1. No acute cardiop				
Reading Location:	SR-LAMARCA2			
Dictated By: Lamarc	a, Anthony			
Dictated Date/Time:	5/16/2023 10:22 AM			
Electronically Sign	ned By: Lamarca, Antho	ny		
Signed Date/Time:	5/16/2023 10:23 AM			
Narrative				
05/16/2023 10:23 AM CLINICAL HISTORY: r				
TECHNIQUE: AP uprig	pht chest.			
COMPARISON: 5/12/20	023.			
	tisfactory position. . No cardiomegaly. Arkable.			d nasogastric tubes in
Procedure Note				
Anthony Lamarca, MI	might be different from th	ne original.		
TECHNIQUE: AP uprigh	t chest.			
COMPARISON: 5/12/20	023.			
FINDINGS: Lungs/pleura: Unremar satisfactory position. Co Heart: Unremarkable. N Mediastinum: Unremar Bones/joints: Unremark Other: None.	lo cardiomegaly. kable.	or pneumothorax. Endot	racheal and nasogastric t	ubes in radiographically
IMPRESSION: 1. No acute cardiopulm	ionary process.			
Reading Location: SR-L	AMARCA2			
Dictated By: Lamarca, A	nthony			

Dictated Date/Time: 5/16/2023 10:22 AM

Electronically Signed By: Lamarca, Anthony

Signed Date/Time: 5/16/2023 10:23 AM

(ABNORMAL) POCT G	LUCOSE METI	ER UNSO	LICITED RESULTS - F	inal result (05/16/2023	7:21 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	155 (H)	74 - 100 mg/dL		05/16/2023 2:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/16/202 EDT	3 7:21 AM	05/16/2023 2:40 PM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
Performing	Address		City/State/ZID Code	Phone Nu	mbor	
Organization CATHOLIC HEALTH	565 Abbott Rd		City/State/ZIP Code Buffalo, NY 14220, US			
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			bunalo, ivi 14220, 03	10 020 2		
TSH WITH REFLEX TO F		Ref		Analysis	Devíouse d At	Dethals sist Circusture
Component Thursid Chinaulating	Value	Range	Test Method	Time		Pathologist Signature
Thyroid Stimulating Hormone	2.47	0.34 - 5.60 uIU/mL		05/16/2023 8:56 AM EDT	HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /		3 3:45 AM	05/16/2023 4:48 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD OF	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/16/2023 3:45 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature	2
WBC (White Blood Cell) Count	10.5	4.5 - 11.0 10*3/uL		05/16/2023 4:57 AM EDT		1
RBC	3.54 (L)	4.50 - 6.50 10*6/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	10.6 (L)	14.0 - 18.0 g/ dL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	31.7 (L)	40.0 - 54.0 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	89.6	80.0 - 94.0 fL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	30.0	26.0 - 34.0 pg		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.4	31.0 - 37.0 g/ dL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.0	11.5 - 14.5 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	145	145 - 450 10*3/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
MPV	9.2	7.4 - 10.4 fL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	71	50 - 75 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	15 (L)	20 - 40 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	13 (H)	>2 - <10 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	1	<=8 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	7.5	2.0 - 8.2 1000/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.6	0.8 - 4.4 1000/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	1.4 (H)	0.1 - 1.1 1000/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.1	0.0 - 0.6 1000/uL		05/16/2023 4:57 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/16/2023 4:57 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/16/202 EDT	3 3:45 AM	05/16/2023 4:48 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD OI	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
MAGNESIUM - Final res	sult (05/16/202		M EDT)	A 1 '		
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.0	1.7 - 2.5 mg/dL		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/16/202 EDT	3 3:45 AM	05/16/2023 4:48 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		
BUFFALO						

(ABNORMAL) BLOOD	GAS ARTERI		D GAS, ARTERIAL) -		(05/16/2023	3:45 AM EDT)
Component		Ref	To at Matha a	Analysis	Deuteursed At	Dath allo aist Cinnature
Component pH, Arterial	Value 7.39	Range 7.35 -	Test Method	Time 05/16/2023	CATHOLIC	Pathologist Signature
ph, Alteria	1.59	7.35 - 7.45		4:50 AM	HEALTH	
				EDT	LABORATORY	
					SERVICES -	
					MERCY HOSPITAL OF	
					BUFFALO	
pCO2, Arterial	52 (H)	35 - 45		05/16/2023		
		mmHg		4:50 AM EDT	HEALTH LABORATORY	
				EDI	SERVICES -	
					MERCY	
					HOSPITAL OF	
pO2, Arterial	47 (L)	75 - 100		05/16/2023	BUFFALO	
p02, Artenar	47 (L)	mmHg		4:50 AM	HEALTH	
		-		EDT	LABORATORY	
					SERVICES - MERCY	
					HOSPITAL OF	
					BUFFALO	
HCO3, Arterial	31.5 (H)	20.0 - 28.0		05/16/2023 4:50 AM	CATHOLIC HEALTH	
		28.0 mmol/L		4.50 AIVI EDT	LABORATORY	
					SERVICES -	
					MERCY	
					HOSPITAL OF BUFFALO	
O2 Sat, Arterial	79.2 (L)	95.0 -		05/16/2023		
		98.0 %		4:50 AM	HEALTH	
				EDT	LABORATORY SERVICES -	
					MERCY	
					HOSPITAL OF	
Base Excess, Arterial	5.2 (H)	-2.0 - 3.0		05/16/2023	BUFFALO	
base Excess, Arteria	5.2 (11)	none		4:50 AM	HEALTH	
				EDT	LABORATORY	
					SERVICES - MERCY	
					HOSPITAL OF	
					BUFFALO	
Temperature	37.0			05/16/2023 4:50 AM	CATHOLIC HEALTH	
				EDT	LABORATORY	
					SERVICES -	
					MERCY HOSPITAL OF	
					BUFFALO	
Specimen (Source)	Anatomical Lo Laterality		Collection Method / Volume	Collection		Received Time
Blood	Arterial blood specimen / Ur		Arterial Puncture / Unknown	05/16/202 EDT	23 3:45 AM	05/16/2023 4:49 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD C	RDERABLE	S			

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/16/2023 3:45 AM EDT)

(ADNORIVIAL) CONIF		Ref	Analysis		
Component	Value	Range Test Method		Performed At	Pathologist Signature
Glucose	148 (H)	74 - 100 mg/dL	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	31 (H)	8 - 27 mg/dL	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.02	0.80 - 1.30 mg/ dL	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Bun/Creatinine Ratio	30.4 (H)	10.0 - 20.1	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	150 (H)	136 - 145 mmol/L	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.9	3.5 - 5.5 mmol/L	05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	113 (H)	98 - 107 mmol/L	05/16/2023 5:24 AM EDT		
CO2	31	21 - 31 mmol/L	05/16/2023 5:24 AM EDT		

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Anion Gap	6	3 - 11		05/16/2023 5:24 AM EDT		<u>ranologist orginatare</u>
Calcium	8.5 (L)	8.6 - 10.3 mg/ dL		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	54 (H)	13 - 39 U/L		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	85 (H)	7 - 52 U/ L		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	73	34 - 104 U/L		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.6 (L)	6.1 - 7.9 g/dL		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	3.1 (L)	3.3 - 4.8 g/dL		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.2	1.1 - 2.8		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	0.9	0.3 - 1.0 mg/dL		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
GFR	83.1 (L)	>=90.0 mL/min/ 1.73 m2		05/16/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment:						
Effective 5/11/2022,			•			
Disease Epidemiology without adjustment f		n (CKD-E	PI) equation refit			
in choice dugus chience i	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality	,	Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/16/202 EDT	3 3:45 AM	05/16/2023 4:48 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/16/2023 12:06 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	151 (H)	74 - 100 mg/dL		05/16/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/16/202 EDT	23 12:06 AM	05/16/2023 6:16 AM EDT
Narrative						
Authorizing Provider	Result Type					
Marwan Saoud MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/15/2023 4:27 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	127 (H)	74 - 100 mg/dL		05/15/2023 4:49 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	<u> </u>
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U		volume		23 4:27 PM	05/15/2023 4:49 PM EDT
Narrative						
Authorizing Drovider	Decult Turne					
Authorizing Provider Marwan Saoud MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott R	d.	Buffalo, NY 14220, US	716-828-2		
- MERCY HOSPITAL OF BUFFALO						
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT G		Ref		Analysis		
- MERCY HOSPITAL OF BUFFALO	Value 141 (H)		DLICITED RESULTS - F Test Method		Performed At	12:16 PM EDT) Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component Glucose, Poc	Value 141 (H) Anatomical Lo	Ref Range 74 - 100 mg/dL	Test Method Collection Method /	Analysis Time 05/15/2023 12:40 PM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component	Value 141 (H)	Ref Range 74 - 100 mg/dL	Test Method	Analysis Time 05/15/2023 12:40 PM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component Glucose, Poc	Value 141 (H) Anatomical Lo Laterality Capillary bloc	Ref Range 74 - 100 mg/dL	Test Method Collection Method /	Analysis Time 05/15/2023 12:40 PM EDT Collection 05/15/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/15/2023 12:40 PM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component Glucose, Poc Specimen (Source) Blood Narrative	Value 141 (H) Anatomical Lo Laterality Capillary bloc specimen / U	Ref Range 74 - 100 mg/dL	Test Method Collection Method /	Analysis Time 05/15/2023 12:40 PM EDT Collection 05/15/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/15/2023 12:40 PM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component Glucose, Poc Specimen (Source) Blood	Value 141 (H) Anatomical Lo Laterality Capillary bloc specimen / U Result Type	Ref Range 74 - 100 mg/dL	Test Method Collection Method /	Analysis Time 05/15/2023 12:40 PM EDT Collection 05/15/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 12:16 PM	Pathologist Signature Received Time 05/15/2023 12:40 PM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) POCT GI Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider	Value 141 (H) Anatomical Lo Laterality Capillary bloc specimen / U Result Type	Ref Range 74 - 100 mg/dL	Test Method Collection Method / Volume	Analysis Time 05/15/2023 12:40 PM EDT Collection 05/15/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 12:16 PM	Pathologist Signature Received Time 05/15/2023 12:40 PM

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	161 (H)	74 - 100 mg/dL		05/15/2023 8:54 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			05/15/202 EDT	23 8:30 AM	05/15/2023 8:54 AM EDT
Narrative						
Authorizing Provider Marwan Saoud MD	Result Type	CARE TES	T DOCKED DEVICE UNS		SUITS	
		C/ 11/2 1 20			0210	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSC Ref Range	LICITED RESULTS - F Test Method	inal result (Analysis Time	-	4:00 AM EDT) Pathologist Signature
Glucose, Poc	142 (H)	74 - 100 mg/dL		05/15/2023 4:17 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood Narrative	Capillary bloo specimen / Ur		Volume		23 4:00 AM	05/15/2023 4:17 AM EDT
Authorizing Provider Valeri Kraskovsky MD	Result Type LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) CBC W/	′autodiff (CB	C WITH /	AUTODIFF) - Final res	sult (05/15/	2023 3:22 AM	M EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/15/2023 4:21 AM EDT	
RBC	4.31 (L)	4.50 - 6.50 10*6/uL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	12.9 (L)	14.0 - 18.0 g/ dL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	38.5 (L)	40.0 - 54.0 %		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MCV	89.4	80.0 - 94.0 fL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСН	29.9	26.0 - 34.0 pg		05/15/2023 4:21 AM EDT	
МСНС	33.4	31.0 - 37.0 g/ dL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RDW	13.5	11.5 - 14.5 %		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Platelets	148	145 - 450 10*3/uL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref	Analysis	
Component	Value	Range Test Method	Time	Performed At Pathologist Signature
MPV	9.1	7.4 - 10.4 fL	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	78 (H)	50 - 75 %	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	12 (L)	20 - 40 %	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	10 (H)	>2 - <10 %	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	1	<=8 %	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	10.8 (H)	2.0 - 8.2 1000/uL	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.7	0.8 - 4.4 1000/uL	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	1.4 (H)	0.1 - 1.1 1000/uL	05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.1	0.0 - 0.6 1000/uL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/15/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Un		Arterial Puncture / Unknown	05/15/202 EDT	3 3:22 AM	05/15/2023 4:06 AM EDT
Narrative						
Authorizing Drouider	Pocult Tupo					
Authorizing Provider Valeri Kraskovsky MD	Result Type	RDFRARI F	S			
	1/10/01/00/0		5			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	1.	Buffalo, NY 14220, US	716-828-2		
PHOSPHORUS - Final re	esult (05/15/20		M EDT)			
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Phosphorous	3.5	2.5 - 5.0 mg/dL		05/15/2023 4:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Un	Iknown	Arterial Puncture / Unknown		3 3:22 AM	05/15/2023 4:06 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Performing	Address		City/Ctata/710 Cada	Phone Nu	mhor	
Organization CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott Rd	ł.	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		
- MERCY HOSPITAL OF BUFFALO						

MAGNESIUM - Final res	sult (05/15/202	23 3:22 AI	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	2.1	1.7 - 2.5 mg/dL		05/15/2023 4:27 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Un	known	Arterial Puncture / Unknown	05/15/202 EDT	23 3:22 AM	05/15/2023 4:00 AM EDT
Narrative						
Authorizing Provider	Result Type					
Andrew Peterson PA	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2	2413	
MAGNESIUM - Final res	sult (05/15/202 Value	23 3:22 Al Ref Range	M EDT) Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.1	1.7 - 2.5		05/15/2023		
		mg/dL		4:46 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source) Blood	Laterality Arterial blood		Volume Arterial Puncture /	Collection	Time 23 3:22 AM	Received Time 05/15/2023 4:06 AM
ыооа	specimen / Un	Iknown	Unknown	EDT	5 5.22 AIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	Ι.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) BLOOD	GAS VENOUS	5 (BLOOD) GAS, VENOUS) - Fir	nal result (0	5/15/2023 3:	22 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
рН, Venous	7.42 (H)	7.31 - 7.41		05/15/2023 4:07 AM EDT		
pCO2 Venous	47.0	40.0 - 52.0 mmHg		05/15/2023 4:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	145.0 (H)	30.0 - 50.0 mmHg		05/15/2023 4:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	30.5 (H)	22.0 - 28.0 mmol/L		05/15/2023 4:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	99 (H)	60 - 90 %		05/15/2023 4:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	5.1			05/15/2023 4:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source) Blood	Laterality Venous blood specimen / Un	known	Volume Arterial Puncture / Unknown	Collection 05/15/202 EDT	Time 23 3:22 AM	Received Time 05/15/2023 4:01 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABL	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	I.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/15/2023 3:22 AM EDT)

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Glucose	148 (H)	74 - 100 mg/dL	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	30 (H)	8 - 27 mg/dL	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	1.07	0.80 - 1.30 mg/ dL	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	28.0 (H)	10.0 - 20.1	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	148 (H)	136 - 145 mmol/L	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	3.9	3.5 - 5.5 mmol/L	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	112 (H)	98 - 107 mmol/L	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	29	21 - 31 mmol/L	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Anion Gap	7	3 - 11	05/15/2023 CATHOLIC 4:46 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Calcium	8.2 (L)	8.6 - 10.3 mg/ dL		05/15/2023 4:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR Comment:	78.5 (L)	>=90.0 mL/min/ 1.73 m2		05/15/2023 4:46 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Effective 5/11/2022,	Calculation	hased on	the chronic Kidney			
Disease Epidemiology			-			
without adjustment f						
	Anatomical Lo	cation /	Collection Method /		 .	D . I.T.
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Arterial blood specimen / Un	known	Arterial Puncture / Unknown	EDT	3 3:22 AM	05/15/2023 4:06 AM EDT
Narrative						
Authorizing Provider	Result Type					
Authorizing Provider Valeri Kraskovsky MD	Result Type	RDERABLE	S			
Valeri Kraskovsky MD	21	RDERABLE	S			
	21	RDERABLE	S City/State/ZIP Code	Phone Nu	mber	
Valeri Kraskovsky MD Performing	LAB BLOOD O			Phone Nu 716-828-2		

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/15/2023 1:51 AM EDT)

Value	Ref Bange	Test Method	Analysis Time	Performed At	Pathologist Signature
132 (H)	74 - 100 mg/dL				Tathologist orginatare
Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
			05/15/202 EDT	:3 1:51 AM	05/15/2023 2:08 AM EDT
Result Type LAB POINT OF	- CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
-	Anatomical Lo Laterality Capillary bloo specimen / Ur Result Type	ValueRange132 (H)74 - 100 mg/dLAnatomical	ValueRangeTest Method132 (H)74 - 100 <bbr></bbr> mg/dLFrankAnatomical Location / LateralityCollection Method / VolumeCapillary blood specimen / UnknownSolution (Collection Method / Note)	Value Range Test Method Time 132 (H) 74 - 100 mg/dL 05/15/2023 2:08 AM EDT Anatomical Location / Laterality Collection Method / Volume Collection Capillary blood specimen / Unknown 05/15/202 EDT	ValueRangeTest MethodTimePerformed At132 (H)74 - 100 mg/dL05/15/2023CATHOLIC 2:08 AMCATHOLIC 2:08 AM2:08 AMHEALTH EDTLABORATORY SERVICES - MERCY HOSPITAL OF BUFFALOAnatomical Location / LateralityCollection Method / VolumeCollection TimeCapillary blood specimen / Unknown05/15/2023 1:51 AM EDT05/15/2023 1:51 AM EDT

Performing				
Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
ECG 12-LEAD - Final res	ult (05/15/2023 1:48 Al Anatomical Location /	VI EDT) Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
Narrative				
Authorizing Provider	Result Type			
Andrew Peterson PA	ECG ORDERABLES			
Performing Organization	Address	City/State/ZIP Code	Phone Number	
EPIPHANY				
AM EDT) Anatomical Region Brain Specimen (Source)	Laterality Anatomical Location / Laterality	Modality Magnetic R Collection Method / Volume	esonance Collection Time	Received Time
	Lateranty	volume	05/15/2023 1:51 AM EDT	Received fille
	laterally with some a	dditional foci in the Findings compatible		
Reading Location: S	R-ZIEMBIEC			
Dictated By: Ziembie	c, Asha			
Dictated Date/Time:				
Electronically Signe	-			
Signed Date/Time: 5	/15/2023 1:56 AM			
Narrative 05/15/2023 1:56 AM E	DT			

Narrative EXAM: MR BRAIN W AND WO IV CONTRAST 70553 INDICATION: status post cardiac arrest, unclear down time. Exam to help with neuroprognostication COMPARISON: Head CT 5/11/2023 **TECHNIQUE:** Multiplanar, multisequence MRI is performed of the brain without and with IV contrast. A total of 20 cc of ProHance IV contrast were used. FINDINGS: There is restricted diffusion involving the cortex of the bilateral frontal lobes and portions of the parietal and temporal lobes. There are a few scattered foci of restricted diffusion within the left caudate nucleus and tracking along the periventricular white matter. Few additional scattered foci of restricted diffusion at the gray-white matter junction in the bilateral frontal and left parietal lobes. Few tiny foci of restricted diffusion in the bilateral cerebellar hemispheres. Associated edema along the cortex bilaterally and in the left basal ganglia. No midline shift of structures. No extra-axial fluid collections. No hydrocephalus.

No abnormal enhancement.

Mucosal thickening of the paranasal sinuses. The major flow voids are present.

Procedure Note

Asha Ziembiec, MD - 05/15/2023

Procedure Note

Formatting of this note might be different from the original.

EXAM:

MR BRAIN W AND WO IV CONTRAST 70553

INDICATION:

status post cardiac arrest, unclear down time. Exam to help with neuroprognostication

COMPARISON: Head CT 5/11/2023

TECHNIQUE:

Multiplanar, multisequence MRI is performed of the brain without and with IV contrast. A total of 20 cc of ProHance IV contrast were used.

FINDINGS:

There is restricted diffusion involving the cortex of the bilateral frontal lobes and portions of the parietal and temporal lobes. There are a few scattered foci of restricted diffusion within the left caudate nucleus and tracking along the periventricular white matter. Few additional scattered foci of restricted diffusion at the gray-white matter junction in the bilateral frontal and left parietal lobes. Few tiny foci of restricted diffusion in the bilateral cerebellar hemispheres. Associated edema along the cortex bilaterally and in the left basal ganglia.

No midline shift of structures. No extra-axial fluid collections. No hydrocephalus.

No abnormal enhancement.

Mucosal thickening of the paranasal sinuses. The major flow voids are present.

IMPRESSION:

Cortical ischemia bilaterally with some additional foci in the cerebellar hemispheres and left basal ganglia and periventricular white matter. Findings compatible with history of anoxic brain injury.

Reading Location: SR-ZIEMBIEC

Dictated By: Ziembiec, Asha

Dictated Date/Time: 5/15/2023 1:51 AM

Electronically Signed By: Ziembiec, Asha

Signed Date/Time: 5/15/2023 1:56 AM

Authorizing Provider	Result Type
Valeri Kraskovsky MD	IMG MRI PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/14/2023 8:48 PM EDT)

Specimen (Source) Blood	Anatomical Laterality Capillary blo specimen / J	od	Collection Method / Volume	BUFFALO Collection Time 05/14/2023 8:48 PM EDT		Received Time 05/14/2023 9:05 PM EDT
Glucose, Poc	192 (H)	74 - 100 mg/dL		05/14/2023 9:05 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature

Authorizing Provider	Result Type							
Valeri Kraskovsky MD	LAB POINT OF CARE TES	AB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS						
Performing Organization	Address	City/State/ZIP Code	Phone Number					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413					
(ABNORMAL) POCT G	LUCOSE METER UNSO	LICITED RESULTS - Fin	al result (05/14/2023 4:28 PM EDT)					

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	133 (H)	74 - 100 mg/dL		05/14/2023 4:44 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un			05/14/2023 4:28 PM EDT		05/14/2023 4:44 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	Ι.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/14/2023 11:57 AM EDT)

				i mai resure (03/14/2023	
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	171 (H)	74 - 100		05/14/2023		
		mg/dL		12:53 PM	HEALTH	
				EDT	LABORATORY SERVICES -	
					MERCY	
					HOSPITAL OF	
					BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	lime	Received Time
Blood	Capillary bloo				23 11:57 AM	05/14/2023 12:53 PM
	specimen / Ur	nknown		EDT		EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	F CARE TES	T DOCKED DEVICE UN	ISOLICITED RES	SULTS	

Performing				Dhara Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	AddressCity/State/ZIP CodePhone Number565 Abbott Rd.Buffalo, NY 14220, US716-828-2413					
(ABNORMAL) POCT G		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	128 (H)	74 - 100 mg/dL		05/14/2023 9:28 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method / Volume		- .	Received Time
Specimen (Source) Blood	Laterality Capillary bloo specimen / Ur		volume	Collection Time 05/14/2023 8:50 AM EDT		05/14/2023 9:28 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OI	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/14/2023 4:37 AM EDT)

		Ref		Analysis				
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature		
Glucose, Poc	156 (H)	156 (H) 74 - 100 05/14/2023 (mg/dL 7:07 AM EDT		CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO				
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time		Received Time		
Blood	Capillary blood specimen / Unknown			05/14/2023 4:37 AM EDT		05/14/2023 7:07 AM EDT		
Narrative								
Authorizing Provider Valeri Kraskovsky MD	Result Type				1 II TS			
Valeti Kraskovsky MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS							

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/14/2023 2:59 AM EDT)

(ADNORIVIAL) CDC VV		Ref		Analysis	2025 2.35 AW EDT	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature	ć
WBC (White Blood Cell) Count	20.4 (H)	4.5 - 11.0 10*3/uL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RBC	4.51	4.50 - 6.50 10*6/uL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	13.3 (L)	14.0 - 18.0 g/ dL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hematocrit	39.9 (L)	40.0 - 54.0 %		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	88.4	80.0 - 94.0 fL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСН	29.5	26.0 - 34.0 pg		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	33.3	31.0 - 37.0 g/ dL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.2	11.5 - 14.5 %		05/14/2023 3:13 AM EDT		

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Platelets	149	145 - 450 10*3/uL	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MPV	8.7	7.4 - 10.4 fL	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	86 (H)	50 - 75 %	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	6 (L)	20 - 40 %	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	7	>2 - <10 %	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	0	<=8 %	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	17.5 (H)	2.0 - 8.2 1000/uL	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.2	0.8 - 4.4 1000/uL	05/14/2023 CATHOLIC 3:13 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Absolute	1.4 (H)	0.1 - 1.1 1000/uL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.0	0.0 - 0.6 1000/uL		05/14/2023 3:13 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/14/2023 3:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	known	Venipuncture / Unknown		3 2:59 AM	05/14/2023 3:06 AM EDT
Narrative						
	D 1. T					
Authorizing Provider	Result Type					
Authorizing Provider Valeri Kraskovsky MD	Result Type	RDERABLE	S			
Valeri Kraskovsky MD		RDERABLE	S			
Valeri Kraskovsky MD Performing		RDERABLE		Phone Nu	mber	
Valeri Kraskovsky MD	LAB BLOOD O		S <u>City/State/ZIP Code</u> Buffalo, NY 14220, US	Phone Nu 716-828-2		
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re	LAB BLOOD O Address 565 Abbott Rc	I. 023 2:59 <i>A</i> Ref	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 Analysis	413	
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re Component	LAB BLOOD O Address 565 Abbott Rc esult (05/14/20 Value	I.)23 2:59 A Ref Range	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 Analysis Time	413 Performed At	Pathologist Signature
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re	LAB BLOOD O Address 565 Abbott Rc	I. 023 2:59 <i>A</i> Ref	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2 Analysis	413	Pathologist Signature
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	LAB BLOOD O Address 565 Abbott Rc esult (05/14/20 Value 3.3	l. 23 2:59 A Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US AM EDT) Test Method Collection Method /	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	LAB BLOOD O Address 565 Abbott Ro esult (05/14/20 Value 3.3 Anatomical Lo Laterality	l. 23 2:59 A Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US M EDT) Test Method Collection Method / Volume	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	LAB BLOOD O Address 565 Abbott Rc esult (05/14/20 Value 3.3	l. D23 2:59 / Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US AM EDT) Test Method Collection Method /	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	LAB BLOOD O Address 565 Abbott Rc Value 3.3 Anatomical Lo Laterality Venous blood	l. D23 2:59 / Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US M EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT Collection 05/14/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/14/2023 3:06 AM
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re Component Phosphorous Specimen (Source) Blood	LAB BLOOD O Address 565 Abbott Rc Value 3.3 Anatomical Lo Laterality Venous blood	l. D23 2:59 / Ref Range 2.5 - 5.0 mg/dL	City/State/ZIP Code Buffalo, NY 14220, US M EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT Collection 05/14/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/14/2023 3:06 AM
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re Component Phosphorous Specimen (Source) Blood Narrative Authorizing Provider	LAB BLOOD O Address 565 Abbott Ro esult (05/14/20 Value 3.3 Anatomical Lo Laterality Venous blood specimen / Ur Result Type	l. D23 2:59 / Ref Range 2.5 - 5.0 mg/dL cation /	City/State/ZIP Code Buffalo, NY 14220, US M EDT) Test Method Collection Method / Volume Venipuncture / Unknown	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT Collection 05/14/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/14/2023 3:06 AM
Valeri Kraskovsky MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re Component Phosphorous Specimen (Source) Blood Narrative	LAB BLOOD O Address 565 Abbott Rc Value 3.3 Anatomical Lo Laterality Venous blood specimen / Ur	l. D23 2:59 / Ref Range 2.5 - 5.0 mg/dL cation /	City/State/ZIP Code Buffalo, NY 14220, US M EDT) Test Method Collection Method / Volume Venipuncture / Unknown	716-828-2 Analysis Time 05/14/2023 3:25 AM EDT Collection 05/14/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/14/2023 3:06 AM

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	uffalo, NY 14220, US 716-828-2413		
(ABNORMAL) MAGNE	ESIUM - Final	result (0	5/14/2023 2:59 AM E	EDT)		
`		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.7 (H)	1.7 - 2.5 mg/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/14/202 EDT	23 2:59 AM	05/14/2023 3:06 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Daufauraina						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/14/2023 2:59 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
pH, Venous	7.38	7.31 - 7.41		05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	51.0	40.0 - 52.0 mmHg		05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	52.0 (H)	30.0 - 50.0 mmHg		05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
HCO3, Venous	30.2 (H)	22.0 - 28.0 mmol/L		05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	87	60 - 90 %		05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	3.9			05/14/2023 3:10 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/14/202 EDT		05/14/2023 3:07 AM EDT
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD OF	RDERABLE	S			
Porforming						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/14/2023 2:59 AM EDT)

				· · · · · · · · · · · · · · · · · · ·	
		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Glucose	165 (H)	74 - 100 mg/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	33 (H)	8 - 27 mg/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Creatinine, Serum	1.18	0.80 - 1.30 mg/ dL		05/14/2023 3:25 AM EDT		
Bun/Creatinine Ratio	28.0 (H)	10.0 - 20.1		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	149 (H)	136 - 145 mmol/L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.2	3.5 - 5.5 mmol/L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	113 (H)	98 - 107 mmol/L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	30	21 - 31 mmol/L		05/14/2023 3:25 AM EDT		
Anion Gap	6	3 - 11		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	8.0 (L)	8.6 - 10.3 mg/ dL	,	05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	122 (H)	13 - 39 U/L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alanine Aminotransferase (ALT)	165 (H)	7 - 52 U/ L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	65	34 - 104 U/L		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.5 (L)	6.1 - 7.9 g/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	3.2 (L)	3.3 - 4.8 g/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.4	1.1 - 2.8		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	1.2 (H)	0.3 - 1.0 mg/dL		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	69.8 (L)	>=90.0 mL/min/ 1.73 m2		05/14/2023 3:25 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaborati		-	/		
	Anatomical Lo	cation /	Collection Method /		Time	Dessitive of The
Specimen (Source) Blood	Laterality Venous blood specimen / Ur	Iknown	Volume Venipuncture / Unknown	Collection 05/14/202 EDT	3 2:59 AM	Received Time 05/14/2023 3:06 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	d.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 152 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/14/2023 1:25 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/14/202 EDT	3 1:03 AM	05/14/2023 1:25 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/13/2023 8:15 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	138 (H)	74 - 100 mg/dL		05/13/2023 8:33 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			05/13/202 EDT	23 8:15 PM	05/13/2023 8:33 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	Solicited Res	SULTS	

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	J.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 157 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/13/2023 6:03 PM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/13/202 EDT	3 4:37 PM	05/13/2023 6:03 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type		T DOCKED DEVICE UNS			
Performing	Address	CARE TES		Phone Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/13/2023 1:02 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	155 (H)	74 - 100 mg/dL		05/13/2023 1:27 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Lo	ocation /	Collection Method /	Collection	Time	Dessived Time
Specimen (Source)	Laterality		Volume	Collection Time		Received Time
Blood	Capillary bloc specimen / U			05/13/202 EDT	23 1:02 PM	05/13/2023 1:27 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UN	SOLICITED RES	GULTS	

Performing	A dalama an			Dhara Nu		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	d.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		-
Component Glucose, Poc	Value 163 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/13/2023 8:54 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/13/202 EDT	23 8:37 AM	05/13/2023 8:54 AM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type	F CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	
				ingly any let	05 (12 (2022	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/13/2023 5:00 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	178 (H)	74 - 100 mg/dL		05/13/2023 6:03 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / U		Volume		23 5:00 AM	05/13/2023 6:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT O	F CARE TES	ST DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/13/2023 4:55 AM EDT)

		Ref		Analysis	2023 4.33 AM LDT)
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	22.1 (H)	4.5 - 11.0 10*3/uL		05/13/2023 5:24 AM EDT	
RBC	4.86	4.50 - 6.50 10*6/uL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	14.2	14.0 - 18.0 g/ dL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	42.6	40.0 - 54.0 %		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MCV	87.6	80.0 - 94.0 fL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСН	29.1	26.0 - 34.0 pg		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСНС	33.2	31.0 - 37.0 g/ dL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RDW	13.3	11.5 - 14.5 %		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
Platelets	163	145 - 450 10*3/uL	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MPV	8.4	7.4 - 10.4 fL	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	86 (H)	50 - 75 %	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	6 (L)	20 - 40 %	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	8	>2 - <10 %	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	0	<=8 %	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	1	<=2 %	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	19.0 (H)	2.0 - 8.2 1000/uL	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.3	0.8 - 4.4 1000/uL	05/13/2023 CATHOLIC 5:24 AM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Monocytes Absolute	1.8 (H)	0.1 - 1.1 1000/uL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Eosinophils Absolute	0.0	0.0 - 0.6 1000/uL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.2	0.0 - 0.2 1000/uL		05/13/2023 5:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Un	Iknown	Venipuncture / Unknown		3 4:55 AM	05/13/2023 5:08 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
,						
Performing	Address		City/State/7IP Code	Phone Nu	mber	
Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Rc		City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re	565 Abbott Rc esult (05/13/20	I. D23 4:55 A Ref	Buffalo, NY 14220, US	716-828-2 Analysis	413	
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re Component	565 Abbott Rc esult (05/13/20 Value	I.)23 4:55 A Ref Range	Buffalo, NY 14220, US	716-828-2 Analysis Time	Performed At	Pathologist Signature
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re	565 Abbott Rc esult (05/13/20	I. D23 4:55 A Ref	Buffalo, NY 14220, US	716-828-2 Analysis	413	Pathologist Signature
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Ro esult (05/13/20 <u>Value</u> 4.0 Anatomical Lo	l. D23 4:55 A Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method /	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Rc esult (05/13/20 Value 4.0 Anatomical Lo Laterality	l. D23 4:55 A Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method / Volume	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Ro esult (05/13/20 <u>Value</u> 4.0 Anatomical Lo	l. D23 4:55 / Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method /	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Rc esult (05/13/20 Value 4.0 Anatomical Lo Laterality Arterial blood	l. D23 4:55 / Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT Collection 05/13/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/13/2023 5:08 AM
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Rc esult (05/13/20 Value 4.0 Anatomical Lo Laterality Arterial blood	l. D23 4:55 / Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method / Volume Venipuncture /	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT Collection 05/13/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/13/2023 5:08 AM
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO PHOSPHORUS - Final re <u>Component</u> Phosphorous	565 Abbott Rc esult (05/13/20 Value 4.0 Anatomical Lo Laterality Arterial blood	l. D23 4:55 / Ref Range 2.5 - 5.0 mg/dL	Buffalo, NY 14220, US AM EDT) Test Method Collection Method / Volume Venipuncture / Unknown	716-828-2 Analysis Time 05/13/2023 5:26 AM EDT Collection 05/13/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time	Received Time 05/13/2023 5:08 AM

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	ł.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) MAGNE	SIUM - Final	result (0) Ref	5/13/2023 4:55 AM E	DT) Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	2.9 (H)	1.7 - 2.5 mg/dL		05/13/2023 5:26 AM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Ur	Iknown	Venipuncture / Unknown	05/13/202 EDT	23 4:55 AM	05/13/2023 5:08 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/13/2023 4:55 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
pH, Venous	7.43 (H)	7.31 - 7.41		05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	43.0	40.0 - 52.0 mmHg		05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	119.0 (H)	30.0 - 50.0 mmHg		05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
HCO3, Venous	28.5 (H)	22.0 - 28.0 mmol/L		05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	99 (H)	60 - 90 %		05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	3.7			05/13/2023 5:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Arterial Puncture / Unknown	05/13/202 EDT	23 4:55 AM	05/13/2023 5:05 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/13/2023 4:55 AM EDT)

(Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose	188 (H)	74 - 100 mg/dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	30 (H)	8 - 27 mg/dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Creatinine, Serum	1.56 (H)	0.80 - 1.30 mg/ dL		05/13/2023 5:26 AM EDT		
Bun/Creatinine Ratio	19.2	10.0 - 20.1		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Sodium	145	136 - 145 mmol/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	4.2	3.5 - 5.5 mmol/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	112 (H)	98 - 107 mmol/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	27	21 - 31 mmol/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	6	3 - 11		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.9 (L)	8.6 - 10.3 mg/ dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	215 (H)	13 - 39 U/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alanine Aminotransferase (ALT)	225 (H)	7 - 52 U/ L		05/13/2023 5:26 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alkaline Phosphatase	61	34 - 104 U/L		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.3 (L)	6.1 - 7.9 g/dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	3.0 (L)	3.3 - 4.8 g/dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.3	1.1 - 2.8		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	1.5 (H)	0.3 - 1.0 mg/dL		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	49.9 (L)	>=90.0 mL/min/ 1.73 m2		05/13/2023 5:26 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati			,		
	Anatomical Lo	cation /	Collection Method /		Time	Descrived T '
Specimen (Source) Blood	Laterality Arterial blood specimen / Ur	known	Volume Venipuncture / Unknown	Collection 05/13/202 EDT	1ime 23 4:55 AM	Received Time 05/13/2023 5:08 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
-						

Performing						
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Ro	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		
(ABNORMAL) POCT G		Ref		Analysis		
Component Glucose, Poc	Value 182 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/13/2023 4:50 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				3 4:33 AM	05/13/2023 4:50 AM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type		T DOCKED DEVICE UNS		11175	
Performing Organization	Address	CARE TES	City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/13/2023 12:10 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	199 (H)	74 - 100 mg/dL		05/13/2023 12:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Lo	ocation /	Collection Method /	Collection	Time	Dessived Time
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			05/13/202 EDT	3 12:10 AM	05/13/2023 12:31 AM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type	CARE TES	T DOCKED DEVICE UNS	Solicited Res	SULTS	

Performing Organization	Address		City/State/ZIP Code	Dhono Nu	mhar	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	Phone Number 716-828-2413		
(ABNORMAL) POCT G	LUCOSE MET		LICITED RESULTS - F		05/12/2023	8:33 PM EDT)
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	163 (H)	74 - 100 mg/dL		05/12/2023 11:58 PM EDT		
	Anatomical Lo	ocation /	Collection Method /		 .	D . I.T.
Specimen (Source) Blood	Laterality Capillary blood specimen / Unknown		Volume	Collection 05/12/202 EDT	11me 23 8:33 PM	Received Time 05/12/2023 11:58 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	
				inal result (0E /12 /2022	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/12/2023 4:26 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	146 (H)	74 - 100 mg/dL		05/12/2023 4:51 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Timo	Received Time
	,		volume			
Blood	Capillary bloc specimen / U			05/12/202 EDT	23 4:26 PM	05/12/2023 4:51 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	

Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
XR CHEST 1 VIEW (XR C Anatomical Region	CHEST 1 VIEW 71045) - Laterality	Final result (05/12/2023 Modality	3:54 PM EDT)	
Chest			Radiography	
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/12/2023 3:56 PM EDT	
Impressions				
05/12/2023 3:59 PM E 1. The patient is in	tubated, the tip of [.]	the endotracheal tube ht improvement in aera		
Reading Location: B	MRADPACS01			
Dictated By: Joyce,	Gerald			
Dictated Date/Time:	5/12/2023 3:56 PM			
Electronically Signe	d By: Joyce, Gerald			
Signed Date/Time: 5	/12/2023 3:59 PM			
Narrative 05/12/2023 3:59 PM E	DT			
HISTORY: 62-year-old	male with hypoxia			
EXAM: Chest 5/12/202	3, 3:41 PM			
COMPARISON: 5/11/20	23.			
FINDINGS:				
carina. The left IJ catheter	-	endotracheal tube is t hemidiaphragm.	positioned approxima	ately 4 cm above the
Heart: Normal. Mediastinum: Normal. Vasculature: Normal. Lungs: Ill-defined i compared to the prev Pleural effusion: No Pneumothorax: None. Skeleton: Unremarkab	ious exam. ne	ht upper lobe is obser	rved, aeration has s	lightly improved
Procedure Note				
Gerald Joyce, MD - 05/	12/2023			

Procedure Note

Formatting of this note might be different from the original.

HISTORY: 62-year-old male with hypoxia

EXAM: Chest 5/12/2023, 3:41 PM

COMPARISON: 5/11/2023.

FINDINGS:

The patient is intubated, the tip of the endotracheal tube is positioned approximately 4 cm above the carina. The left IJ catheter remains in place. A nasogastric tube extends below the left hemidiaphragm.

Heart: Normal. Mediastinum: Normal. Vasculature: Normal. Lungs: III-defined infiltrate in the right upper lobe is observed, aeration has slightly improved compared to the previous exam. Pleural effusion: None Pneumothorax: None. Skeleton: Unremarkable.

IMPRESSION:

1. The patient is intubated, the tip of the endotracheal tube is positioned 4 cm above the carina.

2. Right upper lobe infiltrate with slight improvement in aeration compared to the prior exam.

Reading Location: BMRADPACS01

Dictated By: Joyce, Gerald

Dictated Date/Time: 5/12/2023 3:56 PM

Electronically Signed By: Joyce, Gerald

Signed Date/Time: 5/12/2023 3:59 PM

Authorizing Provider	Result Type
Valeri Kraskovsky MD	IMG XR PROCEDURES

(ABNORMAL) CBC - Final result (05/12/2023 3:23 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
WBC	26.3 (H)	4.5 - 11.0 10*3/uL		05/12/2023 3:46 PM EDT		
RBC	5.13	4.50 - 6.50 10*6/uL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Hemoglobin	15.1	14.0 - 18.0 g/ dL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Hematocrit	44.7	40.0 - 54.0 %		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCV	87.1	80.0 - 94.0 fL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.4	26.0 - 34.0 pg		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCHC	33.7	31.0 - 37.0 g/ dL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.1	11.5 - 14.5 %		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	168	145 - 450 10*3/uL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.6	7.4 - 10.4 fL		05/12/2023 3:46 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 3:23 PM	05/12/2023 3:36 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD C	RDERABLE	S			

Performing			
Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/12/2023 3:23 PM EDT)

(ADNORIVIAL) BLOOL		Ref		Analysis	5/12/2025 5.	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
рН, Venous	7.42 (H)	7.31 - 7.41		05/12/2023 3:40 PM EDT		
pCO2 Venous	38.0 (L)	40.0 - 52.0 mmHg		05/12/2023 3:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	79.0 (H)	30.0 - 50.0 mmHg		05/12/2023 3:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	24.6	22.0 - 28.0 mmol/L		05/12/2023 3:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	97 (H)	60 - 90 %		05/12/2023 3:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	0.3			05/12/2023 3:40 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ui		Venipuncture / Unknown	05/12/202 EDT	23 3:23 PM	05/12/2023 3:38 PM EDT
Authorizing Durit	Descilt					
Authorizing Provider Valeri Kraskovsky MD	Result Type LAB BLOOD C	RDERABLE	ES			

CATHOLIC HEALTH 565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413 LABORATORY SERVICES - MERCY HOSPITAL OF	Performing Organization	Address	City/State/ZIP Code	Phone Number
BUFFALO	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	565 Abbott Rd.	, ,	

(ABNORMAL) BASIC METABOLIC PANEL - Final result (05/12/2023 3:23 PM EDT)

		Ref	Analysis
Component	Value	Range Test Method	Time Performed At Pathologist Signature
Glucose	152 (H)	74 - 100 mg/dL	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
BUN	26	8 - 27 mg/dL	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Creatinine, Serum	1.56 (H)	0.80 - 1.30 mg/ dL	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Bun/Creatinine Ratio	16.7	10.0 - 20.1	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Sodium	143	136 - 145 mmol/L	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Potassium	4.5	3.5 - 5.5 mmol/L	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Chloride	112 (H)	98 - 107 mmol/L	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
CO2	26	21 - 31 mmol/L	05/12/2023 CATHOLIC 3:59 PM HEALTH EDT LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Anion Gap	5	3 - 11		05/12/2023 3:59 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.7 (L)	8.6 - 10.3 mg/ dL		05/12/2023 3:59 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	49.9 (L)	>=90.0 mL/min/ 1.73 m2		05/12/2023 3:59 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	/ Collaborati		-			
	Anatomical Lo	ocation /	Collection Method /	Callestian	Τ	De estive d'Time e
Specimen (Source) Blood	Laterality Venous blood		Volume Venipuncture /	Collection Time 05/12/2023 3:23 PM		Received Time 05/12/2023 3:36 PM
ыооа	specimen / Ur		Unknown	EDT		EDT
Narrative						
Authorizing Provider	Posult Typo					
Valeri Kraskovsky MD	LAB BLOOD C		ς			
valen klaskovsky wie			5			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G		Ref		Analysis		-
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	158 (H)	74 - 100 mg/dL		05/12/2023 11:58 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				23 11:48 AM	05/12/2023 11:58 PM EDT
Narrative						

Authorizing Provider	Result Type							
Valeri Kraskovsky MD		LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS						
Performing Organization	Address	City/State/ZIP Code	Phone Nu	mber				
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	565 Abbott Rd. Buffalo, NY 14220, US 716-828-2413						
CULTURE, SINGLE ORG	ANISM - Final result ((Ref)5/12/2023 8:10 AM EDT) Analysis					
Component	Value Range	Test Method	Time	Performed At	Pathologist Signature			
Culture, Single Org.	Negative for MRSA	MIC	05/13/2023 1:21 PM EDT					
	Anatomical Location /							
Specimen (Source)	Laterality	Volume	Collection	-	Received Time			
Swab (Nares for MRSA)		Non-blood Collection / Unknown	05/12/202 EDT	3 8:10 AM	05/12/2023 8:22 AM EDT			
Narrative								
Authorizing Provider	Result Type							
Valeri Kraskovsky MD	LAB MICROBIOLOGY -	GENERAL ORDERABLES						
Performing								
Organization	Address	City/State/ZIP Code	Phone Nu					
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1	150				

(ABNORMAL) TRIGLYCERIDES - Final result (05/12/2023 8:10 AM EDT)

Component	Ref Value Ran		Test Method	Analysis Time	Performed At	Pathologist Signature
Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/dl Very High > or = 500	472 (H) 35 - mg, − 199 mg/dl	- 149		05/12/2023 11:17 AM EDT		
Specimen (Source)	Anatomical Locatio Laterality	on /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Unknow	wn	Venipuncture / Unknown	05/12/202 EDT	23 8:10 AM	05/12/2023 8:23 AM EDT
Narrative						

Authorizing Provider Valeri Kraskovsky MD	Result Type LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1150

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/12/2023 8:10 AM EDT)

		Ref		Analysis	5, 12, 2025 0.	10 / III 1 0 /)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
pH, Venous	7.30 (L)	7.31 - 7.41		05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	42.0	40.0 - 52.0 mmHg		05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	60.0 (H)	30.0 - 50.0 mmHg		05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	20.7 (L)	22.0 - 28.0 mmol/L		05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	92 (H)	60 - 90 %		05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	-5.5			05/12/2023 8:31 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method , Volume	/ Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 8:10 AM	05/12/2023 8:25 AM EDT
Narrative						

Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB BLOOD O	RDERABLE	S			
Performing	A					
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F	inal result (Analysis	(05/12/2023	7:40 AM EDT)
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	198 (H)	74 - 100 mg/dL		05/12/2023 5:49 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur				23 7:40 AM	05/12/2023 5:49 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	I.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/12/2023 4:10 AM EDT)

Comment) /= l	Ref		Analysis	Deufeure el At	Dath also sist Cisus struct
Component Glucose, Poc	Value 112 (H)	Range 74 - 100 mg/dL	Test Method	Time 05/12/2023 9:14 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloc specimen / Ui			05/12/202 EDT	23 4:10 AM	05/12/2023 9:14 AM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type LAB POINT O	F CARE TES	T DOCKED DEVICE UNS	Solicited Res	SULTS	

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
LACTIC ACID, SERUM (L	ACTIC ACID, P	PLASMA) - Ref	- Final result (05/12/20	023 3:31 AM Analysis	EDT)	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lactic Acid	1.4	0.5 - 2.0 mmol/L		05/12/2023 4:21 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un		Venipuncture / Unknown		23 3:31 AM	05/12/2023 4:06 AM EDT
Narrative						
Authorizing Provider	Result Type					
Alyssa Dasilva PA	LAB BLOOD OI	RDERABLE	S			
			-			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mhor	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
PHOSPHORUS - Final re	esult (05/12/2()23 3:29 <i>F</i>	AM EDT)			
		Ref		Analysis		
Component	Value	Range 2.5 - 5.0	Test Method	Time		Pathologist Signature
Phosphorous	3.8	2.5 - 5.0 mg/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un		Venipuncture / Unknown	05/12/202 EDT	23 3:29 AM	05/12/2023 3:51 AM EDT
Narrative						
Authorizing Provider	Result Type		-			
Alyssa Dasilva PA	LAB BLOOD OI	RDERABLE	S			

Performing						
Organization	Address		City/State/ZIP Code	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2	2413	
MAGNESIUM - Final res	sult (05/12/202	23 3:29 AI	M EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Magnesium	1.9	1.7 - 2.5 mg/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/12/2023 3:29 AM EDT		05/12/2023 3:51 AM EDT
Narrative						
Authorizing Provider	Result Type					
Alyssa Dasilva PA	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) COMPR	REHENSIVE MI	ETABOLI	C PANEL - Final resul	t (05/12/20	23 3:29 AM I	EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose	140 (H)	74 - 100 mg/dL		05/12/2023 4:24 AM EDT		
BUN	28 (H)	8 - 27 mg/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.88 (H)	0.80 - 1.30 mg/ dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Bun/Creatinine Ratio	14.9	10.0 - 20.1		05/12/2023 4:24 AM EDT		
Sodium	143	136 - 145 mmol/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Potassium	3.6	3.5 - 5.5 mmol/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	110 (H)	98 - 107 mmol/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	20 (L)	21 - 31 mmol/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	13 (H)	3 - 11		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.7 (L)	8.6 - 10.3 mg/ dL	/	05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST)	447 (H)	13 - 39 U/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	349 (H)	7 - 52 U/ L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alkaline Phosphatase	66	34 - 104 U/L		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.2 (L)	6.1 - 7.9 g/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	3.0 (L)	3.3 - 4.8 g/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.4	1.1 - 2.8		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	1.1 (H)	0.3 - 1.0 mg/dL		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	39.9 (L)	>=90.0 mL/min/ 1.73 m2		05/12/2023 4:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology				,		
without adjustment f		antinu (Collection Mathead /			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown		23 3:29 AM	05/12/2023 3:51 AM EDT
Narrative						
Authorizing Provider	Result Type					
Alyssa Dasilva PA	LAB BLOOD O	RDERABLE	S			
Performing	Address			Dhaw - N	ma ha a r	
Organization CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Address 565 Abbott Rc	I.	City/State/ZIP Code Buffalo, NY 14220, US	Phone Nu 716-828-2		

(ABNORMAL) POCT G	LUCOSE M	ETER UNSC	LICITED RESULTS - I	Final result (05/12/2023	3:25 AM EDT)
		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	71 (L)	74 - 100 mg/dL		05/12/2023 9:14 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Laterality	Location /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blo specimen /				23 3:25 AM	05/12/2023 9:14 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS					
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott	Rd.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE M I	ETER UNSC Ref Range	DLICITED RESULTS - I	F inal result (Analysis Time	-	2:01 AM EDT) Pathologist Signature
Glucose, Poc	128 (H)	74 - 100	lest method	05/12/2023		
	.20 (11)	mg/dL		3:35 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical	Location /	Collection Method /			
Specimen (Source)	Latorality	-	Volume	Collection	Time	Received Time

	-		EDT	LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Location /	Collection Method /	Callestian	Time	De estive di Tirre e
Specimen (Source)	Laterality	Volume	Collection		Received Time
Blood	Capillary blood specimen / Unknown		05/12/202 EDT	3 2:01 AM	05/12/2023 3:35 AM EDT
Narrative					
Authorizing Davidou	Desult				
Authorizing Provider	Result Type				
Valeri Kraskovsky MD Performing	LAB POINT OF CARE TES	T DOCKED DEVICE UNSC	OLICITED RES	SULTS	
Organization	Address	City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/12/2023 1:15 AM EDT)

Comment		Ref		Analysis	Deufeure el At	Dath als sist Ciss store
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	120 (H)	74 - 100 mg/dL		05/12/2023 1:32 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection Time		Received Time
Blood	Capillary blood specimen / Unknown			05/12/2023 1:15 AM EDT		05/12/2023 1:32 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			,			
POCT GLUCOSE METER	UNSOLICITED Value	RESULTS Ref Range	- Final result (05/12/2 Test Method	2023 12:23 A Analysis Time		Pathologist Signature
Glucose, Poc	92	74 - 100	lest Method		CATHOLIC	
Glucose, Poc	92	mg/dL		12:40 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Loo	cation /	Collection Method /			D . 1 .
Specimen (Source)	Laterality	1	Volume	Collection		Received Time
Blood	Capillary blood specimen / Un			EDT	3 12:23 AM	05/12/2023 12:40 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) POCT G	LUCOSE METI	ER UNSO	LICITED RESULTS - F	inal result (05/11/2023	11:03 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	113 (H)	74 - 100 mg/dL		05/12/2023 1:46 AM EDT		
Specimen (Source)	Anatomical L Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blo specimen / L		Volume		23 11:03 PM	05/12/2023 1:46 AM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT C	OF CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULIS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES	565 Abbott F	Rd.	Buffalo, NY 14220, US	716-828-2	2413	
- MERCY HOSPITAL OF BUFFALO						
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC		Ref	-	Analysis		-
- MERCY HOSPITAL OF BUFFALO	ACID, SERU Value 2.5 (HH)	-	C ACID, PLASMA) - Fi Test Method		Performed At	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC	Value	Ref Range 0.5 - 2.0 mmol/L	-	Analysis Time 05/11/2023 11:29 PM	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC Component Lactic Acid Specimen (Source) Blood	Value 2.5 (HH) Anatomical L	Ref Range 0.5 - 2.0 mmol/L	Test Method Collection Method /	Analysis Time 05/11/2023 11:29 PM EDT Collection	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC Component Lactic Acid	Value 2.5 (HH) Anatomical L Laterality Venous bloo	Ref Range 0.5 - 2.0 mmol/L	Test Method Collection Method / Volume Venipuncture /	Analysis Time 05/11/2023 11:29 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/11/2023 11:07 PM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC Component Lactic Acid Specimen (Source) Blood	Value 2.5 (HH) Anatomical L Laterality Venous bloo	Ref Range 0.5 - 2.0 mmol/L	Test Method Collection Method / Volume Venipuncture / Unknown	Analysis Time 05/11/2023 11:29 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/11/2023 11:07 PM
- MERCY HOSPITAL OF BUFFALO (ABNORMAL) LACTIC Component Lactic Acid Specimen (Source) Blood Narrative Authorizing Provider	Value 2.5 (HH) Anatomical L Laterality Venous bloo specimen / L Result Type	Ref Range 0.5 - 2.0 mmol/L	Test Method Collection Method / Volume Venipuncture / Unknown	Analysis Time 05/11/2023 11:29 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 23 10:32 PM	Pathologist Signature Received Time 05/11/2023 11:07 PM

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count		4.5 - 11.0 10*3/uL		05/12/2023 4:11 AM EDT	
RBC	5.46	4.50 - 6.50 10*6/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	16.0	14.0 - 18.0 g/ dL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	47.3	40.0 - 54.0 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
MCV	86.7	80.0 - 94.0 fL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСН	29.3	26.0 - 34.0 pg		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
МСНС	33.8	31.0 - 37.0 g/ dL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
RDW	13.0	11.5 - 14.5 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Platelets	224	145 - 450 10*3/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis	
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
MPV	8.2	7.4 - 10.4 fL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Relative	84 (H)	50 - 75 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Relative	6 (L)	20 - 40 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Relative	10 (H)	>2 - <10 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Eosinophils Relative	0	<=8 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Basophils Relative	0	<=2 %		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Neutrophils Absolute	26.4 (H)	2.0 - 8.2 1000/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Lymphocytes Absolute	1.9	0.8 - 4.4 1000/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Monocytes Absolute	3.1 (H)	0.1 - 1.1 1000/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Eosinophils Absolute	0.0	0.0 - 0.6 1000/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Basophils Absolute	0.0	0.0 - 0.2 1000/uL		05/12/2023 4:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/11/202 EDT	3 10:30 PM	05/12/2023 3:50 AM EDT
Narrative						
Authorizing Provider	Result Type					
Alyssa Dasilva PA	LAB BLOOD O	RDERABLE	S			
			-			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
DOTINEO						
5011/120						
	LUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result (05/11/2023	9:58 PM EDT)
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO Ref	LICITED RESULTS - F		05/11/2023	9:58 PM EDT)
	LUCOSE MET		LICITED RESULTS - F Test Method	Analysis Time	Performed At	9:58 PM EDT) Pathologist Signature
(ABNORMAL) POCT G		Ref		Analysis		
(ABNORMAL) POCT G	Value	Ref Range 74 - 100 mg/dL		Analysis Time 05/11/2023 10:15 PM	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
(ABNORMAL) POCT G	Value 143 (H)	Ref Range 74 - 100 mg/dL	Test Method	Analysis Time 05/11/2023 10:15 PM	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
(ABNORMAL) POCT G Component Glucose, Poc	Value 143 (H) Anatomical Lo	Ref Range 74 - 100 mg/dL cation /	Test Method Collection Method /	Analysis Time 05/11/2023 10:15 PM EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature
(ABNORMAL) POCT G Component Glucose, Poc	Value 143 (H) Anatomical Lo Laterality Capillary blood	Ref Range 74 - 100 mg/dL cation /	Test Method Collection Method /	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood	Value 143 (H) Anatomical Lo Laterality Capillary blood	Ref Range 74 - 100 mg/dL cation /	Test Method Collection Method /	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un	Ref Range 74 - 100 mg/dL cation /	Test Method Collection Method /	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un Result Type	Ref Range 74 - 100 mg/dL cation / d known	Test Method Collection Method / Volume	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 9:58 PM	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un Result Type	Ref Range 74 - 100 mg/dL cation / d known	Test Method Collection Method /	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 9:58 PM	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider Valeri Kraskovsky MD Performing	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF	Ref Range 74 - 100 mg/dL cation / d known	Test Method Collection Method / Volume	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 9:58 PM	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider Valeri Kraskovsky MD Performing Organization	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF Address	Ref Range 74 - 100 mg/dL cation / d known	Test Method Collection Method / Volume T DOCKED DEVICE UNS	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202 EDT OLICITED RES Phone Nu	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 9:58 PM	Pathologist Signature Received Time 05/11/2023 10:15 PM
(ABNORMAL) POCT G Component Glucose, Poc Specimen (Source) Blood Narrative Authorizing Provider Valeri Kraskovsky MD Performing	Value 143 (H) Anatomical Lo Laterality Capillary blood specimen / Un Result Type LAB POINT OF	Ref Range 74 - 100 mg/dL cation / d known	Test Method Collection Method / Volume	Analysis Time 05/11/2023 10:15 PM EDT Collection 05/11/202 EDT	Performed At CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO Time 3 9:58 PM	Pathologist Signature Received Time 05/11/2023 10:15 PM

(ABNORMAL) POCT G	ILUCOSE ME	ETER UNSC	LICITED RESULTS - I	Final result ((05/11/2023	9:01 PM EDT)
C		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Glucose, Poc	184 (H)	74 - 100 mg/dL		05/11/2023 10:15 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical	Location /	Collection Method /	Callestian	T :	
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blo specimen / l			05/11/202 EDT	23 9:01 PM	05/11/2023 10:15 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT	OF CARE TES	T DOCKED DEVICE UNS	SOLICITED RES	SULTS	
Performing	0			Dia ara Nu		
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott	Ka.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	iLUCOSE MI Value	TER UNSC Ref Range	DLICITED RESULTS - I	F inal result (Analysis Time		8:02 PM EDT) Pathologist Signature
Glucose, Poc	201 (H)	74 - 100		05/11/2023		
	201 (11)	mg/dL		9:27 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimon (Source)	Anatomical	Location /	Collection Method / Volume	Collection	Timo	Received Time
Specimen (Source)	Laterality	ad	voluitie			
Blood	Capillary blo specimen / l			05/11/202 EDT	23 8:02 PM	05/11/2023 9:27 PM EDT

Narrative

 Authorizing Provider
 Result Type

 Valeri Kraskovsky MD
 LAB POINT OF CARE TEST DOCKED DEVICE UNSOLICITED RESULTS

 Performing
 Device of the second second

Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/11/2023 7:03 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	253 (H)	74 - 100 mg/dL		05/11/2023 10:15 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection		Received Time
Blood	Capillary blood specimen / Un				23 7:03 PM	05/11/2023 10:15 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type		T DOCKED DEVICE UNS		ти и тс	
,		CARE TES	T DOCKED DEVICE UNS	OLICITED RES	OLIS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSO Ref Range	LICITED RESULTS - F Test Method	final result (Analysis Time		6:11 PM EDT) Pathologist Signature
Glucose, Poc	294 (H)	74 - 100 mg/dL		05/11/2023 10:15 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary blood specimen / Un		volume		23 6:11 PM	05/11/2023 10:15 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD	Result Type	CARETES	T DOCKED DEVICE UNS			
					0215	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET	ER UNSO	LICITED RESULTS - F	inal result (05/11/2023	5:22 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	393 (H)	74 - 100 mg/dL		05/11/2023 6:11 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	<u> </u>
Specimen (Source)	Anatomical Lo	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Laterality Capillary bloo specimen / Ur		volume		23 5:22 PM	05/11/2023 6:11 PM EDT
Narrative						
Authorizing Provider	Result Type					
Valeri Kraskovsky MD	LAB POINT OF	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) POCT G	LUCOSE MET Value	ER UNSC Ref Range	DLICITED RESULTS - F Test Method	inal result (Analysis Time		4:16 PM EDT) Pathologist Signature
Glucose, Poc	>400 (HH)	74 - 100 mg/dL		05/11/2023 5:25 PM EDT		
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source) Blood	Laterality Capillary bloo specimen / Ur		Volume	Collection 05/11/202 EDT	11me 23 4:16 PM	Received Time 05/11/2023 5:25 PM EDT
Narrative						
Authorizing Drevider	Descult Trues					
Authorizing Provider Valeri Kraskovsky MD	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413	
(ABNORMAL) BLOOD	GAS VENOU	S (BLOOE) GAS, VENOUS) - Fir	nal result (0	5/11/2023 3:	13 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
рН, Venous	7.28 (L)	7.31 - 7.41		05/11/2023 3:56 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pCO2 Venous	45.0	40.0 - 52.0 mmHg		05/11/2023 3:56 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Venous	47.0	30.0 - 50.0 mmHg		05/11/2023 3:56 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Venous	21.1 (L)	22.0 - 28.0 mmol/L		05/11/2023 3:56 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Venous	81	60 - 90 %		05/11/2023 3:56 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Venous	-5.6			05/11/2023 3:56 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	known	Venipuncture / Unknown		23 3:13 PM	05/11/2023 3:56 PM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	l.	Buffalo, NY 14220, US	716-828-2		

		Ref		Analysis		
Component	Value	Range	Test Method		Performed At	Pathologist Signature
Glucose, Poc	>400 (HH			05/11/2023 3:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomica	al Location /	Collection Method /		00117120	
Specimen (Source)	Laterality		Volume	Collection -	Time	Received Time
Blood	Capillary b specimen	blood / Unknown		05/11/2023 EDT	3 2:59 PM	05/11/2023 3:16 PM EDT
Narrative						
Authorizing Provider	Result Typ	e				
Valeri Kraskovsky MD	LAB POIN	T OF CARE TES	ST DOCKED DEVICE UN	SOLICITED RESU	JLTS	
Porforming						
Performing Organization	Address		City/State/ZIP Code	Phone Nun	nber	
CATHOLIC HEALTH LABORATORY SERVICE - MERCY HOSPITAL OF BUFFALO	565 Abbo [.] ES	tt Rd.	Buffalo, NY 14220, US			
TRANSTHORACIC EC		Ref	CONTRAST (05/11/20 Analysis t Method Time			Pathologist Signature
BSA		m2			DYNAMICSEC	
2D EF		%			DYNAMICSEC	
LV Diastolic Volume (BP)		mL			DYNAMICSEC	
LV Systolic Volume (BP)	38.3	mL		CVSYNGO	DYNAMICSEC	НО
Simpson BP	56	%		CVSYNGO	DYNAMICSEC	НО
LVIDD		7.42 -			DYNAMICSEC	
		10.31 cm				
LVIDS		4.29 - 6.50 cm		CVSYNGO	DYNAMICSEC	НО
IVSd		0.6 - 1.1 cm		CVSYNGO	DYNAMICSEC	НО
LVPWd		0.6 - 1.1 cm		CVSYNGO	DYNAMICSEC	НО
FS		28 - 44 %		CVSYNGO	DYNAMICSEC	НО
MV E' Tissue Velocity Lateral	9.6	cm/s		CVSYNGO	DYNAMICSEC	НО
E/A ratio	0.74			CVSYNGO	DYNAMICSEC	НО
E wave deceleration time	205.0	msec		CVSYNGO	DYNAMICSEC	НО
MV peak E vel	40.7	cm/s		CVSYNGO	DYNAMICSEC	НО
MV peak A vel		cm/s			DYNAMICSEC	
Est. RA pres		mmHg			DYNAMICSEC	
MV mean grad		mmHg			DYNAMICSEC	
MV peak grad		mmHg			DYNAMICSEC	
MV stenosis pressure		ms			DYNAMICSEC	
1/2 time MV valve area p 1/2		cm2			DYNAMICSEC	

CVSYNGODYNAMICSECHO

MV valve area p 1/2 3.67

method

cm2

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature		
Inferior Vena Cava Diameter	2.6	cm			CVSYNGODYNAMIC	5		
LV Diastolic Volume	37.1	mL/m2			CVSYNGODYNAMIC	SECHO		
Index (BP) LV Systolic Volume	16.4	mL/m2			CVSYNGODYNAMIC	SECHO		
Index (BP) ZLVIDS	-4.61				CVSYNGODYNAMIC			
ZLVIDD	-4.01				CVSYNGODYNAMIC			
A2C EF	56	%			CVSYNGODYNAMIC			
Main PA dia	22.2				CVSYNGODYNAMIC			
	4.25	cm						
E/E' ratio Anatomical Region		aterality		Modality	CVSYNGODYNAMIC	SECHO		
	L	ateranty		Ultrasound	4			
				Olliasound	u			
	Anatom	nical Locatio	on / Collection	n Method /				
Specimen (Source)	Laterali		Volume	r method y	Collection Time	Received Time		
		<u> </u>						
Narrative 05/11/2023 3:18 Pr This result has a		nt that i	s not availab	le.				
 Technically ver 	ry difficu	lt study						
 Left Ventricle with an ejection 	: Left ven fraction o	tricular f approx	systolic funct	tion appears	s to be normal			
 Right ventricu 	lar systol	ic functi	on is normal.					
• There is a triv	vial peric	ardial ef	fusion.					
systolic function	appears t	o be norm	al with an eje	ection fract	LV wall thickness. L tion of approx 55 +/ contrast. LV diastol	/- 5 %. Regional wall		
Right Ventricle Right ventricle ca	ovitv cizo	2000205	normal Syster	lic function	ic normal			
_	avity Size	appears	normat. Systo		i is normai.			
Left Atrium Left atrium was no	ot well vi	sualized.						
Right Atrium Right atrium cavi [.]	ty size is	normal.						
IVC/SVC IVC is not well v	isualized.							
Mitral Valve The mitral valve v	was not we	ll visual	ized. There is	s trace regu	urgitation.			
Tricuspid Valve The tricuspid valv	ve was not	well vis	ualized. There	e is trace n	regurgitation.			
Aortic Valve								
Pulmonic Valve								
Pericardium	The pulmonic valve was not well visualized. Pericardium There is a trivial pericardial effusion.							
	i per reara							
A complete echo wa contrast was used	Study Details A complete echo was performed using complete 2D, color flow Doppler and spectral Doppler. Definity contrast was used during the study. The study had technical difficulties. The study was difficult due to patient's clinical status and body habitus.							
ECG The ECG shows sin	us tachyca	rdia.						
Prior Study No prior study ava	ailable fo	r compari	son.					

Authorizing Provider	Result Type
Keira McCarthy NP	CV ECHO PROCEDURES

(ABNORMAL) High Sensitivty Troponin (HIGH SENSITIVTY TROPONIN) - Final result (05/11/2023 1:57 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
High Sensitivity Troponin	51,647 (H)	0 - 20 pg/mL		05/11/2023 2:53 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection	-	Received Time
Blood	Venous blooc specimen / U		Venipuncture / Unknown	05/11/202 EDT	23 1:57 PM	05/11/2023 2:05 PM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD C	ORDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott R	d.	Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) LACTIC	Value	Ref Range	ACID, PLASMA) - Fi Test Method	Analysis Time	Performed At	:57 PM EDT) Pathologist Signature
Lactic Acid	4.7 (HH)	0.5 - 2.0 mmol/L		05/11/2023 2:29 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / U		Venipuncture / Unknown	05/11/202 EDT	23 1:57 PM	05/11/2023 2:05 PM EDT
Narrative						
Authorizing Provider	Result Type		· C			
Keira McCarthy NP	LAB BLOOD C	JRDERABLE	5			
Performing Organization	Address		City/State/7ID Code	Phone Nu	mbor	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott R	d.	City/State/ZIP Code Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) BLOOD	GAS ARTERI	AL (BLOO	D GAS, ARTERIAL) -		(05/11/2023	1:57 PM EDT)
<i>c</i>		Ref	T () 4 ()	Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
pH, Arterial	7.34 (L)	7.35 - 7.45		05/11/2023 2:10 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY	
					HOSPITAL OF BUFFALO	
pCO2, Arterial	35	35 - 45		05/11/2023		
		mmHg		2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Arterial	114 (H)	75 - 100		05/11/2023		
		mmHg		2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Arterial	18.9 (L)	20.0 -		05/11/2023		
		28.0 mmol/L		2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Arterial	98.3 (H)	95.0 -		05/11/2023		
		98.0 %		2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Arterial	-6.1 (L)	-2.0 - 3.0 none		05/11/2023 2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF	
Temperature	37.0			05/11/2023	BUFFALO	
	51.0			2:10 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Arterial blood specimen / Ur		Arterial Puncture / Unknown	05/11/202 EDT	23 1:57 PM	05/11/2023 2:08 PM EDT
Narrative						
Authorizer Dravidar	Dogult Turns					
Authorizing Provider Keira McCarthy NP	Result Type	RDERABI F	S			
			-			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) POCT G				inal result (05/11/2023	
		Ref		Analysis	05/11/2025	
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	>400 (HH)	74 - 100 mg/dL		05/11/2023 3:16 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary blood specimen / Unknown			05/11/202 EDT	.3 1:56 PM	05/11/2023 3:16 PM EDT
Narrative						
Authorizing Drovidor	Docult Turoo					
Authorizing Provider Valeri Kraskovsky MD	Result Type	CADE TEC	T DOCKED DEVICE UNS			
Valen Klaskovsky MD	LAB FOINT OF	CARE IES	I DOCKED DEVICE UN3	OLICITED RES	JULI3	
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	413	
CTA ABD PELV W/WO IV 74174) - Final result (05			ABDOMEN PELV W A	ND WO IV C	CONT NO OR	AL GI BLEED PROTOCOL
Anatomical Region	Lateralit	Y	Modality			
Abdomen and Pelvis			Compute	d Tomograph	y	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
				05/11/202 EDT		
Impressions						

05/11/2023 1:56 PM EDT

Examination is most remarkable for dense consolidative opacities involving the right upper and lower lobes which may reflect sequelae of aspiration versus multifocal pneumonia. Underlying atelectatic changes of the bilateral lung bases.

Additionally present is smooth interlobular septal thickening, nonspecific, but can be seen in the setting of pulmonary edema.

Suggest slight retraction of the endotracheal tube by approximately 2 cm, as it is at the level of the carina.

No evidence of pulmonary embolism. Mild enlargement of the pulmonary trunk. Correlate for pulmonary hypertension.

Emphysema.

No CT angiographic evidence for large volume GI hemorrhage noting that small volume GI hemorrhage may not be readily apparent.

Nonspecific haziness about the pancreas, finding which can be seen with acute pancreatitis. Request correlation with amylase and lipase.

Trace perinephric stranding, nonspecific, but can be seen in the setting of pyelonephritis. Request correlation with urinalysis.

Small infrarenal abdominal aortic aneurysm.

Coronary artery disease.

Additional nonacute findings, as detailed in the body of the report above

Reading Location: SR-FOLAN

Dictated By: Folan, Thomas

Dictated Date/Time: 5/11/2023 1:39 PM

Electronically Signed By: Folan, Thomas

Signed Date/Time: 5/11/2023 1:56 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Narrative

05/11/2023 1:56 PM EDT EXAM: CTA CHEST W AND WO IV CONTRAST 71275, CTA ABDOMEN PELV W AND WO IV CONT NO ORAL GI BLEED PROTOCOL 74174.

INDICATION: Postcardiac arrest, rule out pulmonary embolus. GI bleeding..

TECHNIQUE: Multiplanar CTA of the chest , abdomen, and pelvis performed after IV contrast administration. Image post processing was also performed generating multiple 3-D MIP reconstructions.

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Count Previous 365 Days: 0 Nuclear Cardiology

CONTRAST: 100 ml ofOmnipaque 350 IV.

COMPARISON: None.

FINDINGS:

CHEST:

Intubated patient with tip of the endotracheal tube just above the level of the carina. Consider slight retraction.

Enteric tube extends medially the diaphragm with distal tip in the gastric body.

There is advanced emphysema with biapical bullae.

Dense consolidative opacities at the right upper and lower lobes posteriorly and with underlying atelectatic change.

Narrative

Smooth intralobular septal thickening.

Central airways are patent.

No evidence of pneumothorax.

No lymphadenopathy.

Heart size is normal. No pericardial effusion. Hypoattenuation of the cardiac blood pool relative to myocardium, a finding which can be seen in the setting of anemia.

No evident acute osseous abnormality. Multilevel thoracic spondylosis.

Visualized vasculature without evident acute abnormality. No evidence of pulmonary embolism. Pulmonary trunk is mildly dilated at 3.2 cm.

Coronary artery atherosclerotic calcification.

Abdomen/pelvis:

There is artifact across the entire upper abdomen from the patient's arms down by their side causing quantum mottle hindering underlying evaluation. Findings made within these confines:

No evident acute abnormality involving the liver, spleen, or bilateral adrenal glands.

Mild haziness adjacent to the pancreas.

Mild perinephric stranding. 3.2 cm simple unilocular left renal cortical cysts. No evidence of nephroureterolithiasis.

No evident acute abnormality about the visualized loops of bowel and mesentery. A few scattered colonic diverticuli are present, without CT evidence for acute diverticulitis. No evidence of large volume hyperattenuating material within the GI tract on the noncontrast portion of the examination to suggest large volume GI hemorrhage.

Gallbladder is present without evident stones. No gallbladder wall thickening or pericholecystic fluid. No biliary ductal dilatation.

Small focus of aneurysmal dilatation of the infrarenal abdominal aorta measuring up to 3.2 cm.

Indwelling Foley catheter decompresses the urinary bladder.

Prostate is mildly enlarged measuring 4.3 x 3.7 cm.

There is an indwelling rectal tube.

No lymphadenopathy.

No evidence of free air.

No evident acute osseous abnormality.

No evidence of brisk active hemorrhage, vascular extravasation, or hemodynamically significant stenosis involving the visualized vasculature.

The remainder of the not specifically mentioned structures of the visualized chest, abdomen, and pelvis are without evident acute abnormality.

Small fat-containing bilateral inguinal hernias.

Procedure Note

Thomas Folan, MD - 05/11/2023

Formatting of this note might be different from the original. EXAM: CTA CHEST W AND WO IV CONTRAST 71275, CTA ABDOMEN PELV W AND WO IV CONT NO ORAL GI BLEED PROTOCOL 74174.

INDICATION: Postcardiac arrest, rule out pulmonary embolus. GI bleeding..

TECHNIQUE: Multiplanar CTA of the chest , abdomen, and pelvis performed after IV contrast administration. Image post processing was also performed generating multiple 3-D MIP reconstructions.

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

MIPS Study Count

Procedure Note

CT Procedure Count Previous 365 Days: 4 Nuclear Cardiology Count Previous 365 Days: 0

CONTRAST: 100 ml ofOmnipaque 350 IV.

COMPARISON: None.

FINDINGS:

CHEST:

Intubated patient with tip of the endotracheal tube just above the level of the carina. Consider slight retraction.

Enteric tube extends medially the diaphragm with distal tip in the gastric body.

There is advanced emphysema with biapical bullae.

Dense consolidative opacities at the right upper and lower lobes posteriorly and with underlying atelectatic change.

Smooth intralobular septal thickening.

Central airways are patent.

No evidence of pneumothorax.

No lymphadenopathy.

Heart size is normal. No pericardial effusion. Hypoattenuation of the cardiac blood pool relative to myocardium, a finding which can be seen in the setting of anemia.

No evident acute osseous abnormality. Multilevel thoracic spondylosis.

Visualized vasculature without evident acute abnormality. No evidence of pulmonary embolism. Pulmonary trunk is mildly dilated at 3.2 cm.

Coronary artery atherosclerotic calcification.

Abdomen/pelvis:

There is artifact across the entire upper abdomen from the patient's arms down by their side causing quantum mottle hindering underlying evaluation. Findings made within these confines:

No evident acute abnormality involving the liver, spleen, or bilateral adrenal glands.

Mild haziness adjacent to the pancreas.

Mild perinephric stranding. 3.2 cm simple unilocular left renal cortical cysts. No evidence of nephroureterolithiasis.

No evident acute abnormality about the visualized loops of bowel and mesentery. A few scattered colonic diverticuli are present, without CT evidence for acute diverticulitis. No evidence of large volume hyperattenuating material within the GI tract on the noncontrast portion of the examination to suggest large volume GI hemorrhage.

Gallbladder is present without evident stones. No gallbladder wall thickening or pericholecystic fluid. No biliary ductal dilatation.

Small focus of aneurysmal dilatation of the infrarenal abdominal aorta measuring up to 3.2 cm.

Indwelling Foley catheter decompresses the urinary bladder.

Prostate is mildly enlarged measuring 4.3 x 3.7 cm.

There is an indwelling rectal tube.

No lymphadenopathy.

No evidence of free air.

No evident acute osseous abnormality.

Procedure Note

No evidence of brisk active hemorrhage, vascular extravasation, or hemodynamically significant stenosis involving the visualized vasculature.

The remainder of the not specifically mentioned structures of the visualized chest, abdomen, and pelvis are without evident acute abnormality.

Small fat-containing bilateral inguinal hernias.

IMPRESSION:

Examination is most remarkable for dense consolidative opacities involving the right upper and lower lobes which may reflect sequelae of aspiration versus multifocal pneumonia. Underlying atelectatic changes of the bilateral lung bases.

Additionally present is smooth interlobular septal thickening, nonspecific, but can be seen in the setting of pulmonary edema.

Suggest slight retraction of the endotracheal tube by approximately 2 cm, as it is at the level of the carina.

No evidence of pulmonary embolism. Mild enlargement of the pulmonary trunk. Correlate for pulmonary hypertension.

Emphysema.

No CT angiographic evidence for large volume GI hemorrhage noting that small volume GI hemorrhage may not be readily apparent.

Nonspecific haziness about the pancreas, finding which can be seen with acute pancreatitis. Request correlation with amylase and lipase.

Trace perinephric stranding, nonspecific, but can be seen in the setting of pyelonephritis. Request correlation with urinalysis.

Small infrarenal abdominal aortic aneurysm.

Coronary artery disease.

Additional nonacute findings, as detailed in the body of the report above

Reading Location: SR-FOLAN

Dictated By: Folan, Thomas

Dictated Date/Time: 5/11/2023 1:39 PM

Electronically Signed By: Folan, Thomas

Signed Date/Time: 5/11/2023 1:56 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Authorizing Provider	Result Type
Keira McCarthy NP	IMG CT PROCEDURES

CT CERVICAL SPINE WO IV CONTRAST (CT CERVICAL SPINE WO IV CONTRAST 72125) - Final result (05/11/2023 1:25 PM EDT)

Anatomical Region	Laterality	Modality					
C-spine	Computed Tomography						
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time			
•			05/11/2023 1:33 PM EDT				
Impressions							

05/11/2023 1:38 PM EDT

Impressions

No evidence of an acute fracture.

Multilevel multifactorial spondylotic change of the cervical spine.

Straightening of the usual cervical lordosis correlate for muscle spasm versus positioning.

Multilevel multifactorial spondylotic change of the cervical spine, as detailed above

Evidence of emphysema within the lungs and with streaky airspace opacities at the right upper lung zone. Please follow up with report of concurrent CT of the chest for additional details

Reading Location: SR-FOLAN

Dictated By: Folan, Thomas

Dictated Date/Time: 5/11/2023 1:33 PM

Electronically Signed By: Folan, Thomas

Signed Date/Time: 5/11/2023 1:38 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Narrative

05/11/2023 1:38 PM EDT EXAM: CT CERVICAL SPINE WO IV CONTRAST 72125

CLINICAL HISTORY: post unwitnessed cardiac arrest, found down

TECHNIQUE: Axial CT of the cervical spine performed without IV contrast. Coronal and sagittal reformatted images were generated.

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

Evaluation of cervical nodules/masses/lymph nodes along with other vascular ENT structures are limited due to lack of IV contrast.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Count Previous 365 Days: 0

CONTRAST: None.

COMPARISON: None.

FINDINGS:

Mild straightening of the usual cervical lordosis. Alignment is anatomic.

Vertebral body heights are maintained.

Multilevel loss of intervertebral disc height reflecting multilevel disc desiccation, with multilevel facet arthrosis and uncinate process hypertrophy.

At least moderate bilateral neuroforaminal narrowing is present at C3-C4, C4-C5, and C5-C6. Mild spinal canal stenosis at these levels.

No evidence of an acute cervical spine fracture.

Intubated patient with partial visualization of the endotracheal tube.

Partially visualized enteric tube.

Emphysematous changes with streaky airspace opacities at the right upper lung zone and biapical bullae.

Partial opacification of the visualized paranasal sinuses. Please follow up with report of concurrent CT head for additional details.

Procedure Note

Thomas Folan, MD - 05/11/2023

Formatting of this note might be different from the original. EXAM: CT CERVICAL SPINE WO IV CONTRAST 72125

CLINICAL HISTORY: post unwitnessed cardiac arrest, found down

Nuclear Cardiology

TECHNIQUE: Axial CT of the cervical spine performed without IV contrast. Coronal and sagittal reformatted images were generated.

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

Evaluation of cervical nodules/masses/lymph nodes along with other vascular ENT structures are limited due to lack of IV contrast.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Nuclear Cardiology Count Previous 365 Days: 0

CONTRAST: None.

COMPARISON: None.

FINDINGS:

Mild straightening of the usual cervical lordosis. Alignment is anatomic.

Vertebral body heights are maintained.

Multilevel loss of intervertebral disc height reflecting multilevel disc desiccation, with multilevel facet arthrosis and uncinate process hypertrophy.

At least moderate bilateral neuroforaminal narrowing is present at C3-C4, C4-C5, and C5-C6. Mild spinal canal stenosis at these levels.

No evidence of an acute cervical spine fracture.

Intubated patient with partial visualization of the endotracheal tube.

Partially visualized enteric tube.

Emphysematous changes with streaky airspace opacities at the right upper lung zone and biapical bullae.

Partial opacification of the visualized paranasal sinuses. Please follow up with report of concurrent CT head for additional details.

IMPRESSION:

No evidence of an acute fracture.

Multilevel multifactorial spondylotic change of the cervical spine.

Straightening of the usual cervical lordosis correlate for muscle spasm versus positioning.

Multilevel multifactorial spondylotic change of the cervical spine, as detailed above

Evidence of emphysema within the lungs and with streaky airspace opacities at the right upper lung zone. Please follow up with report of concurrent CT of the chest for additional details

Reading Location: SR-FOLAN

Dictated By: Folan, Thomas

Dictated Date/Time: 5/11/2023 1:33 PM

Electronically Signed By: Folan, Thomas

Signed Date/Time: 5/11/2023 1:38 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Authorizing Provider	Result Type			
Keira McCarthy NP	IMG CT PROCEDURES			
CT CHEST ANGIO W A	ND WO IV CONTRAST (CTA CHEST W AND WC) IV CONTRAST 71275)	- Final result
(05/11/2023 1:25 PM E				r mar result
Anatomical Region	Laterality	Modality		
Chest		Computed	Tomography	
	Anotomical Location (Collection Mathed (
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
			05/11/2023 1:39 PM	
			EDT	
Impressions				
05/11/2023 1:56 PM	EDT			
	remarkable for dense lect sequelae of aspi			
-	-			
Additionally presen setting of pulmonar	t is smooth interlobu y edema.	lar septal thickening	, nonspecific, but c	an be seen in the
Suggest slight retr carina.	action of the endotra	cheal tube by approxi	mately 2 cm, as it i	s at the level of the
No evidence of pulm hypertension.	onary embolism. Mild	enlargement of the pu	llmonary trunk. Corre	late for pulmonary
Emphysema.				
No CT angiographic not be readily appa	evidence for large vo rent.	lume GI hemorrhage no	ting that small volu	me GI hemorrhage may
	s about the pancreas,	finding which can be	seen with acute nan	creatitis Pequest
correlation with am	ylase and lipase.	-		
Trace perinephric s correlation with ur	tranding, nonspecific inalysis.	, but can be seen in	the setting of pyelo	nephritis. Request
Small infrarenal ab	dominal aortic aneury	sm.		
Coronary artery dis	ease.			
Additional nonacute	findings, as detaile	d in the body of the	report above	
Reading Location:	SR-FOLAN			
Dictated By: Folan,	Thomas			
Dictated Date/Time:	5/11/2023 1:39 PM			
Electronically Sign	ed By: Folan, Thomas			
Signed Date/Time:	5/11/2023 1:56 PM			
	port^Up-to-date CT eq mGy. DLP: 4187 mGy-c		dose reduction tech	niques were employed.
Narrative 05/11/2023 1:56 PM EXAM: CTA CHEST W A 74174.		75, CTA ABDOMEN PELV	W AND WO IV CONT NO	ORAL GI BLEED PROTOCOL
	diac arrest, rule out	pulmonary embolus. G	I bleeding	
	nar CTA of the chest ge post processing wa			
	C 111.			

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Count Previous 365 Days: 0 Narrative

CONTRAST: 100 ml ofOmnipaque 350 IV.

COMPARISON: None.

FINDINGS:

CHEST:

Intubated patient with tip of the endotracheal tube just above the level of the carina. Consider slight retraction.

Enteric tube extends medially the diaphragm with distal tip in the gastric body.

There is advanced emphysema with biapical bullae.

Dense consolidative opacities at the right upper and lower lobes posteriorly and with underlying atelectatic change.

Smooth intralobular septal thickening.

Central airways are patent.

No evidence of pneumothorax.

No lymphadenopathy.

Heart size is normal. No pericardial effusion. Hypoattenuation of the cardiac blood pool relative to myocardium, a finding which can be seen in the setting of anemia.

No evident acute osseous abnormality. Multilevel thoracic spondylosis.

Visualized vasculature without evident acute abnormality. No evidence of pulmonary embolism. Pulmonary trunk is mildly dilated at 3.2 cm.

Coronary artery atherosclerotic calcification.

Abdomen/pelvis:

There is artifact across the entire upper abdomen from the patient's arms down by their side causing quantum mottle hindering underlying evaluation. Findings made within these confines:

No evident acute abnormality involving the liver, spleen, or bilateral adrenal glands.

Mild haziness adjacent to the pancreas.

Mild perinephric stranding. 3.2 cm simple unilocular left renal cortical cysts. No evidence of nephroureterolithiasis.

No evident acute abnormality about the visualized loops of bowel and mesentery. A few scattered colonic diverticuli are present, without CT evidence for acute diverticulitis. No evidence of large volume hyperattenuating material within the GI tract on the noncontrast portion of the examination to suggest large volume GI hemorrhage.

Gallbladder is present without evident stones. No gallbladder wall thickening or pericholecystic fluid. No biliary ductal dilatation.

Small focus of aneurysmal dilatation of the infrarenal abdominal aorta measuring up to 3.2 cm.

Indwelling Foley catheter decompresses the urinary bladder.

Prostate is mildly enlarged measuring 4.3 x 3.7 cm.

There is an indwelling rectal tube.

No lymphadenopathy.

No evidence of free air.

No evident acute osseous abnormality.

No evidence of brisk active hemorrhage, vascular extravasation, or hemodynamically significant stenosis involving the visualized vasculature.

The remainder of the not specifically mentioned structures of the visualized chest, abdomen, and pelvis are without evident acute abnormality.

Small fat-containing bilateral inguinal hernias.

Thomas Folan, MD - 05/11/2023

Formatting of this note might be different from the original. EXAM: CTA CHEST W AND WO IV CONTRAST 71275, CTA ABDOMEN PELV W AND WO IV CONT NO ORAL GI BLEED PROTOCOL 74174.

INDICATION: Postcardiac arrest, rule out pulmonary embolus. GI bleeding..

TECHNIQUE: Multiplanar CTA of the chest, abdomen, and pelvis performed after IV contrast administration. Image post processing was also performed generating multiple 3-D MIP reconstructions.

All CT scans at this facility use one or more dose reduction techniques such as automatic exposure control, ma/Kv adjustment per patient size and/or age (including targeted exams where dose is matched to indication) and iterative reconstruction technique.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Nuclear Cardiology Count Previous 365 Days: 0

CONTRAST: 100 ml ofOmnipaque 350 IV.

COMPARISON: None.

FINDINGS:

CHEST:

Intubated patient with tip of the endotracheal tube just above the level of the carina. Consider slight retraction.

Enteric tube extends medially the diaphragm with distal tip in the gastric body.

There is advanced emphysema with biapical bullae.

Dense consolidative opacities at the right upper and lower lobes posteriorly and with underlying atelectatic change.

Smooth intralobular septal thickening.

Central airways are patent.

No evidence of pneumothorax.

No lymphadenopathy.

Heart size is normal. No pericardial effusion. Hypoattenuation of the cardiac blood pool relative to myocardium, a finding which can be seen in the setting of anemia.

No evident acute osseous abnormality. Multilevel thoracic spondylosis.

Visualized vasculature without evident acute abnormality. No evidence of pulmonary embolism. Pulmonary trunk is mildly dilated at 3.2 cm.

Coronary artery atherosclerotic calcification.

Abdomen/pelvis:

There is artifact across the entire upper abdomen from the patient's arms down by their side causing quantum mottle hindering underlying evaluation. Findings made within these confines:

No evident acute abnormality involving the liver, spleen, or bilateral adrenal glands.

Mild haziness adjacent to the pancreas.

Mild perinephric stranding. 3.2 cm simple unilocular left renal cortical cysts. No evidence of nephroureterolithiasis.

No evident acute abnormality about the visualized loops of bowel and mesentery. A few scattered colonic diverticuli are present, without CT evidence for acute diverticulitis. No evidence of large volume hyperattenuating material within the GI tract on the noncontrast portion of the examination to suggest large volume GI hemorrhage.

Gallbladder is present without evident stones. No gallbladder wall thickening or pericholecystic fluid. No biliary ductal

dilatation.

Small focus of aneurysmal dilatation of the infrarenal abdominal aorta measuring up to 3.2 cm.

Indwelling Foley catheter decompresses the urinary bladder.

Prostate is mildly enlarged measuring 4.3 x 3.7 cm.

There is an indwelling rectal tube.

No lymphadenopathy.

No evidence of free air.

No evident acute osseous abnormality.

No evidence of brisk active hemorrhage, vascular extravasation, or hemodynamically significant stenosis involving the visualized vasculature.

The remainder of the not specifically mentioned structures of the visualized chest, abdomen, and pelvis are without evident acute abnormality.

Small fat-containing bilateral inguinal hernias.

IMPRESSION:

Examination is most remarkable for dense consolidative opacities involving the right upper and lower lobes which may reflect sequelae of aspiration versus multifocal pneumonia. Underlying atelectatic changes of the bilateral lung bases.

Additionally present is smooth interlobular septal thickening, nonspecific, but can be seen in the setting of pulmonary edema.

Suggest slight retraction of the endotracheal tube by approximately 2 cm, as it is at the level of the carina.

No evidence of pulmonary embolism. Mild enlargement of the pulmonary trunk. Correlate for pulmonary hypertension.

Emphysema.

No CT angiographic evidence for large volume GI hemorrhage noting that small volume GI hemorrhage may not be readily apparent.

Nonspecific haziness about the pancreas, finding which can be seen with acute pancreatitis. Request correlation with amylase and lipase.

Trace perinephric stranding, nonspecific, but can be seen in the setting of pyelonephritis. Request correlation with urinalysis.

Small infrarenal abdominal aortic aneurysm.

Coronary artery disease.

Additional nonacute findings, as detailed in the body of the report above

Reading Location: SR-FOLAN

Dictated By: Folan, Thomas

Dictated Date/Time: 5/11/2023 1:39 PM

Electronically Signed By: Folan, Thomas

Signed Date/Time: 5/11/2023 1:56 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Authorizing Provider	Result Type
Keira McCarthy NP	IMG CT PROCEDURES

CT HEAD WO IV CON Anatomical Region	TRAST (CT HEAD WO IV Laterality	CONTRAST 70450) - F Modality	inal result (05/11/2023	1:25 PM EDT)			
Head	Computed Tomography						
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time			
			05/11/2023 1:33 PM EDT				
Impressions							
	acute intracranial her cardiac arrest, brain						
	: limitations, a "nega ng or workup (e.g. bra ed.						
Reading Location:	BMRADPACS01						
Dictated By: Parrik	ch, Mannan						
Dictated Date/Time:	5/11/2023 1:33 PM						
Electronically Sign	ed By: Parrikh, Manna	n					
Signed Date/Time:	5/11/2023 1:42 PM						
	eport^Up-to-date CT equ 8 mGy. DLP: 4187 mGy-cu		n dose reduction tec	hniques were employed.			
Narrative 05/11/2023 1:42 PM	FDT						
EXAM: CT HEAD WO IV							
INDICATION: cardiac	arrest						
	ages of the head with Iction techniques were						
MIPS Study Count							
CT Procedure Count Count Previous 365	Previous 365 Days: 4 Days: 0			Nuclear Cardiology			
COMPARISON: None.							
Gray-white matter d	al hemorrhage, extract lifferentiation is main mal. Cerebral volume is	ntained. No evidence					
sphenoid and fronta	re unremarkable. th opacification of t	axillary sinus. Supe	rimposed acute air-f	kening of the bilateral Juid level with gaseous			
Procedure Note							

Mannan Parrikh, MD - 05/11/2023

Procedure Note

Formatting of this note might be different from the original. EXAM: CT HEAD WO IV CONTRAST 70450.

INDICATION: cardiac arrest

TECHNIQUE: Axial images of the head without contrast. Sagittal, coronal reconstructions generated and reviewed. Dose reduction techniques were employed to modulate kVp and mA depending on patient body size.

MIPS Study Count

CT Procedure Count Previous 365 Days: 4 Nuclear Cardiology Count Previous 365 Days: 0

COMPARISON: None.

FINDINGS:

No acute intracranial hemorrhage, extracerebral fluid collection, midline shift or mass effect. Gray-white matter differentiation is maintained. No evidence of significant sulcal effacement. Ventricles are normal. Cerebral volume is age appropriate.

No focal osseous abnormality.

Visualized orbits are unremarkable.

Pansinus disease with opacification of the bilateral ethmoid, sinus mucosal thickening of the bilateral sphenoid and frontal sinuses and right maxillary sinus. Superimposed acute air-fluid level with gaseous foci in the right maxillary sinus. Clear bilateral mastoid air cells.

IMPRESSION:

No CT evidence for acute intracranial hemorrhage, large territorial infarct or midline shift. Given provided history of cardiac arrest, brain MRI would be more sensitive for the evaluation of hypoxic/anoxic ischemic brain injury.

Due to its inherent limitations, a "negative" noncontrast head CT should not preclude the performance of additional imaging or workup (e.g. brain MRI, lumbar puncture, etc.) for further evaluation, if clinically warranted.

Reading Location: BMRADPACS01

Dictated By: Parrikh, Mannan

Dictated Date/Time: 5/11/2023 1:33 PM

Electronically Signed By: Parrikh, Mannan

Signed Date/Time: 5/11/2023 1:42 PM

Radimetrics Dose Report^Up-to-date CT equipment and radiation dose reduction techniques were employed. CTDIvol: 2.5 - 59.8 mGy. DLP: 4187 mGy-cm.

Authorizing Provider	Result Type
Keira McCarthy NP	IMG CT PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/11/2023 1:00 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Glucose, Poc	>400 (HH)	74 - 100 mg/dL		05/11/2023 3:16 PM EDT		
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Capillary bloo specimen / Ur			05/11/202 EDT	23 1:00 PM	05/11/2023 3:16 PM EDT

Narrative				
Authorizing Provider	Result Type			
Valeri Kraskovsky MD		ST DOCKED DEVICE UNSC	LICITED RESULTS	
Dorforming				
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH	565 Abbott Rd.	Buffalo, NY 14220, US	716-828-2413	
LABORATORY SERVICES - MERCY HOSPITAL OF				
BUFFALO				
XR CHEST 1 VIEW (XR C	CHEST 1 VIEW 71045) -	Final result (05/11/2023	3 12:08 PM EDT)	
Anatomical Region	Laterality	Modality		
Chest		Computed	Radiography	
	Anatomical Location /	Collection Method /		
Specimen (Source)	Laterality	Volume	Collection Time	Received Time
			05/11/2023 12:11 PM EDT	
Impressions 05/11/2023 12:13 PM				
FINDINGS/IMPRESSION: Tubes, lines, surgic Stable endotracheal approach central ven junction. Enteric tu Lungs and pleura: Pa costophrenic angles. Cardiovascular and m Skeleton, Other: Unc Reading Location: B Dictated By: Parrikh Dictated Date/Time: Electronically Signe	al material: Overlyi tube with tip approx ous catheter with ti be with sidehole and tchy airspace opacit No measurable pneum ediastinum: Unchange hanged MRADPACS01 , Mannan 5/11/2023 12:11 PM d By: Parrikh, Manna	d	he carina. Interval p expected location of ragm presumably in th	placement of left IJ the cavoatrial ne stomach.
Signed Date/Time: 5	/11/2023 12:13 PM			
05/11/2023 12:13 PM EXAM: XR CHEST 1 VIE				
INDICATION: line pla	cement			
TECHNIQUE: Chest sin COMPARISON: Chest x-				
Procedure Note				
Mannan Parrikh, MD -	05/11/2023			

Procedure Note
Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.
INDICATION: line placement
TECHNIQUE: Chest single view COMPARISON: Chest x-ray earlier today.
IMPRESSION: FINDINGS/IMPRESSION: Tubes, lines, surgical material: Overlying transcutaneous pacing pads slightly limits evaluation. Stable endotracheal tube with tip approximately 2.5 cm from the carina. Interval placement of left IJ approach central venous catheter with tip projecting over the expected location of the cavoatrial junction. Enteric tube with sidehole and tip beyond the diaphragm presumably in the stomach.
Lungs and pleura: Patchy airspace opacities, greater the left, more conspicuous on prior. Clear costophrenic angles. No measurable pneumothorax.
Cardiovascular and mediastinum: Unchanged
Skeleton, Other: Unchanged
Reading Location: BMRADPACS01
Dictated By: Parrikh, Mannan
Dictated Date/Time: 5/11/2023 12:11 PM
Electronically Signed By: Parrikh, Mannan
Signed Date/Time: 5/11/2023 12:13 PM

Authorizing Provider	Result Type
Keira McCarthy NP	IMG XR PROCEDURES

(ABNORMAL) POCT GLUCOSE METER UNSOLICITED RESULTS - Final result (05/11/2023 12:06 PM EDT)

(,		Ref		Analysis	(,
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Glucose, Poc	>400 (HH)	74 - 100 mg/dL		05/11/2023 5:25 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Capillary bloo specimen / Ur			05/11/2023 12:06 PM EDT		05/11/2023 5:25 PM EDT
Narrative						
Authorizing Provider Valeri Kraskovsky MD Performing	Result Type	CARE TES	T DOCKED DEVICE UNS	OLICITED RES	SULTS	
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	3.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) CULTUI	RE, RESPIRATO	RY - Fin Ref	al result (05/11/2		EDT)	
Component	Value	Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Culture, Respiratory	Mixed respiratory flora with predominance of:	Kange	Test Method	05/16/2023 11:44 AM EDT		
Culture, Respiratory Comment: The organis	Many Colonies Streptococcus pneumoniae (A) m value for this r	esult has	MIC been updated. These	05/16/2023 11:44 AM EDT e results have bee	HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
preliminary verified repo			•		••	i j
Gram Stain	Rare White Blood Cells seen.			05/16/2023 11:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	Few Red Blood Cells seen			05/16/2023 11:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	<=25 Epithelial cells per low power field			05/16/2023 11:44 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Gram Stain	Many Gram positive cocci			05/16/2023 11:44 AM EDT		
Specimen (Source)	Anatomical Loc Laterality	ation /	Collection Method Volume	/ Collection	Time	Received Time
Respiratory (Trachael Aspirate)	-			05/11/202 EDT	3 12:02 PM	05/11/2023 1:43 PM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP		logy - g	ENERAL ORDERABLE	S		

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
		rt				
(ABNORMAL) NINETY	MIN IROP -	Ref	suit (05/11/2023 12:0	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
High Sensitivity Troponin	54,287 (H)	0 - 20 pg/mL		05/11/2023 1:28 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	ocation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/11/202 EDT	3 12:01 PM	05/11/2023 12:23 PM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD C	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mbor	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	d.	Buffalo, NY 14220, US	716-828-2		
CULTURE, BLOOD - Fina	al result (05/1	1/2023 12 Ref	2:01 PM EDT)	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/16/2023 4:01 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 12:01 PM	05/11/2023 1:43 PM EDT
Narrative						
Authorizing Dravidar	Decult True					
Authorizing Provider Keira McCarthy NP	Result Type		ENERAL ORDERABLES			

Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1	150	
CULTURE, BLOOD - Fina	al result (05/11		:01 PM EDT)			
		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
BLOOD CULTURE	No growth after 5 days incubation.			05/16/2023 4:01 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood	known	Venipuncture / Unknown	05/11/202 EDT	3 12:01 PM	05/11/2023 1:43 PM EDT
	specimen / Un	KIIOWII	onational	LUT		
Narrative	specimen / Un	KHOWH				
Narrative Authorizing Provider	Result Type					
	Result Type		ENERAL ORDERABLES			
Authorizing Provider	Result Type					
Authorizing Provider Keira McCarthy NP	Result Type			Phone Nu	mber	
Authorizing Provider Keira McCarthy NP Performing	Result Type		ENERAL ORDERABLES			

(ABNORMAL) LACTIC ACID, SERUM (LACTIC ACID, PLASMA) - Final result (05/11/2023 12:01 PM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lactic Acid	6.0 (HH)	0.5 - 2.0 mmol/L		05/11/2023 12:53 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
	Anatomical Lo	cation /	Collection Method /		<u> </u>	
Specimen (Source)	Laterality		Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/11/202 EDT	23 12:01 PM	05/11/2023 12:23 PM EDT
Narrative						
Authorizing Drovider	Docult Tupo					
Authorizing Provider	Result Type		-			
Keira McCarthy NP	LAB BLOOD O	RDERABLE	5			

Performing Organization	Address		City/State/ZIP Code	Phone Nu	Phone Number		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2	2413		
(ABNORMAL) HEMOG	GLOBIN A1C (Value	HEMOGL Ref Range	OBIN A1C (HA1C)) - Test Method	Final result Analysis Time		12:01 PM EDT) Pathologist Signature	
Hemoglobin A1C	10.6 (H)	4.0 - 6.0 %		05/11/2023 7:35 PM EDT			
Estimated Avg Glucose	257.5	mg/dL		05/11/2023 7:35 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY		

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/11/2023 12:01 PM EDT	05/11/2023 12:23 PM EDT
Narrative				

MAIN STREET

Authorizing Provider	Result Type		
Keira McCarthy NP	LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.	Buffalo, NY 14214, US	716-862-1150

(ABNORMAL) Lipid Panel (LIPID PANEL) - Final result (05/11/2023 12:01 PM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Cholesterol, Total	207 (H)	140 - 200 mg/ dL		05/11/2023 6:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Comment: Desirable <200 mg/dl Borderline High 200						

High > or = 240 mg/dl

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Triglycerides Comment: Normal <150 mg/dl Borderline High 150 High 200 - 499 mg/d Very High > or = 500	272 (H) - 199 mg/dl	35 - 149 mg/dL		05/11/2023 6:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
High Density Lipoprotein Comment: High Density Lipopro of >60 mg/dL are com			entrations	05/11/2023 6:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Non-HDL Cholesterol (Calc)	186 (H)	0 - 129 mg/dL		05/11/2023 6:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	
Low Density Lipoprotein (Calc)	132 (H)	0 - 100 mg/dL		05/11/2023 6:00 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Comment: Optimal <100 mg/dl Near Optimal 100 - 1 Borderline High 130 High 160 - 189 mg/dl Very High > or = 190	- 159 mg/dl					
Risk Category LDL Go	al 10 year r	isk for C	CHD			
CHD and CHD risk equ Two or more risk fac Zero to one risk fac	tors * < 130	mg/dl <				
* Major risk factors atherosclerotic dise tension, low HDL cho male >/= 45 years, f Optimal <100 mg/dl Near Optimal 100 - 1 Borderline High 130 High 160 - 189 mg/dl Very High > or = 190	ase, diabetes lesterol, far emale >/= 55 29 mg/dl - 159 mg/dl	s, cigare nily hist	ette smoking, hyper-			
Risk Category LDL Go	al 10 year r	isk for C	CHD			
CHD and CHD risk equ Two or more risk fac Zero to one risk fac	tors * < 130	mg/dl <				
* Major risk factors atherosclerotic dise tension, low HDL cho male >/= 45 years, f	ase, diabetes lesterol, far	s, cigare nily hist	ette smoking, hyper-			
	Anatomical Lo		Collection Method /	Callestian	Τ	De estive d'Time e
Specimen (Source) Blood	Laterality Venous blood specimen / Un		Volume Venipuncture / Unknown	Collection 05/11/202 EDT	11me 23 12:01 PM	Received Time 05/11/2023 12:23 PM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Dorforming						
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - SISTERS OF CHARITY MAIN STREET	2157 Main St.		Buffalo, NY 14214, US	716-862-1		
(ABNORMAL) BLOOD	GAS ARTERIA	AL (BLOO	D GAS, ARTERIAL) -	Final result	(05/11/2023	10:51 AM EDT)
		Ref	-	Analysis	-	-
Component	Value	Range	Test Method	Time		Pathologist Signature
рН, Arterial	7.22 (L)	7.35 - 7.45		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY	

SERVICES -MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
pCO2, Arterial	35	35 - 45 mmHg		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
pO2, Arterial	151 (H)	75 - 100 mmHg		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
HCO3, Arterial	14.3 (L)	20.0 - 28.0 mmol/L		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
O2 Sat, Arterial	99.3 (H)	95.0 - 98.0 %		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Base Excess, Arterial	-12.5 (L)	-2.0 - 3.0 none		05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Temperature	37.0			05/11/2023 11:05 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Un	known	Arterial Puncture / Unknown		23 10:51 AM	05/11/2023 11:02 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rc	Ι.	Buffalo, NY 14220, US	716-828-2	2413	

Component High Sensitivity Troponin	Value 53,634 (H)	Ref Range 0 - 20 pg/mL	Test Method	Analysis Time 05/11/2023 11:49 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown		23 10:43 AM	05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider Keira McCarthy NP	Result Type LAB BLOOD C	PRDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Re	d.	Buffalo, NY 14220, US	716-828-2		
(ABNORMAL) CBC W/	/ autodiff (CB Value	C WITH Ref Range	AUTODIFF) - Final res Test Method	sult (05/11/ Analysis Time		M EDT) Pathologist Signature
WBC (White Blood Cell) Count	32.3 (H)	4.5 - 11.0 10*3/uL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

				HOSPITAL OF BUFFALO
RBC	5.54	4.50 - 6.50 10*6/uL	05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hemoglobin	16.2	14.0 - 18.0 g/ dL	05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO
Hematocrit	49.3	40.0 - 54.0 %	05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
MCV	89.0	80.0 - 94.0 fL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MCH	29.2	26.0 - 34.0 pg		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
МСНС	32.8	31.0 - 37.0 g/ dL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
RDW	13.1	11.5 - 14.5 %		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Platelets	267	145 - 450 10*3/uL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
MPV	8.2	7.4 - 10.4 fL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Spacimon (Source)	Anatomical Location /		Collection Method /	Collection Time		Received Time
Specimen (Source) Blood	Laterality Venous blood specimen / Unknown		Volume Venipuncture / Unknown	05/11/2023 10:43 AM EDT		05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD ORDERABLES					
Performing Organization	Address City/State/ZIP Code Phone Number					
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2		

PATH REVIEW, PB SMEAR (PERIPHERAL BLOOD SMEAR, PATHOLOGY REVIEW) - Final result (05/11/2023 10:43 AM EDT)

		Ref		Analysis	C LA			
Component	Value	Range	Test Method		erformed At	Pathologist Signature		
Result	See Scanned Result				ONINTERFACED AB)		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	, Collectior	n Time	Received Time		
Blood	Venous blood		Venipuncture /	05/11/202	23 10:43 AM	05/11/2023 12:36 PM		
	specimen / Un	known	Unknown	EDT		EDT		
Narrative								
This result has an attachment that is not available.								
Authorizing Provider	Result Type							
Keira McCarthy NP	LAB PATHOLO	LAB PATHOLOGY ORDERABLES						
Performing								
Organization	Address		City/State/ZIP Code					
NONINTERFACED LAB	2157 Main St		Buffalo, NY 14214	716-862-7	1150			
(ABNORMAL) MANUAL DIFFERENTIAL - Final result (05/11/2023 10:43 AM EDT)								
Component	Value	Ref	Test Method	Analysis Time	Porformed At	Pathologist Signature		
WBC (White Blood Cell)	32.3 (H)	Range 4.5 -	lest Method	05/11/2023				
Count	32.3 (H)	11.0 1000/mL		12:36 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF			
Total Counted	100			05/11/2023 12:36 PM EDT	HEALTH LABORATORY			
					SERVICES - MERCY HOSPITAL OF BUFFALO			
Neutrophils %	86 (H)	50 - 75 %		05/11/2023 12:36 PM	HEALTH			
				EDT	LABORATORY SERVICES - MERCY HOSPITAL OF			
Bands %	4 (H)	0 - 3 %		05/11/2023	BUFFALO CATHOLIC			
	4 (11)	0 - 3 78		12:36 PM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			
Lymphocytes %	5 (L)	20 - 40 %		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO			

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Monocytes %	4	2 - 10 %		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Myelocytes %	1 (H)	0 %		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Lymphocytes Absolute	1.6	0.8 - 4.4 1000/uL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Monocytes Absolute	1.3 (H)	0.1 - 1.1 1000/uL		05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Giant Platelets				05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Other, Cells Not Listed	vacuoles			05/11/2023 12:36 PM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection Time		Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		23 10:43 AM	05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD ORDERABLES					
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd		Buffalo, NY 14220, US	716-828-2	2413	

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
APTT, Plasma	39.4	25.9 - 40.5 s		05/11/2023 11:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Location / Laterality		Collection Method / Volume	Collection Time		Received Time
Blood	Venous blood specimen / Unknown		Venipuncture / Unknown	05/11/2023 10:43 AM EDT		05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd.		Buffalo, NY 14220, US	716-828-2413		
(ABNORMAL) PROTIN	-	Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Prothrombin Time	16.2 (H)	9.3 - 13.5 sec		05/11/2023 11:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
INR	1.4 (H)	0.9 - 1.2 Ratio		05/11/2023 11:19 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
(Constitutions (Constants)	Anatomical Location /		Collection Method /	Callesting	T	
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood specimen / Unknown		Venipuncture / Unknown	05/11/2023 10:43 AM EDT		05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD ORDERABLES					
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	I.	Buffalo, NY 14220, US	716-828-2	413	

(ABNORMAL) PHOSP	HORUS - Fina		05/11/2023 10:43 AN	-		
Component	Value	Ref	To at Matha al	Analysis	Deufeure ed At	Dath allo aist Cianatura
Component Phosphorous	Value 7.4 (H)	Range 2.5 - 5.0 mg/dL	Test Method	Time 05/11/2023 11:23 AM EDT		Pathologist Signature
Comment: Sample is sli	ghtly hemolyze	d, result m	ay be affected.			
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/11/202 EDT	23 10:43 AM	05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2	2413	
MAGNESIUM - Final res	• • •	Ref	·	Analysis	Porformed At	Pathologist Signatura
Component	Value	Range	Test Method	Time		Pathologist Signature
Magnesium	2.5	1.7 - 2.5 mg/dL		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown	05/11/202 EDT	23 10:43 AM	05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Rd	l.	Buffalo, NY 14220, US	716-828-2		

(ABNORMAL) LACTIC ACID, SERUM (LACTIC ACID, PLASMA) - Final result (05/11/2023 10:43 AM EDT)

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lactic Acid	6.7 (HH)	0.5 - 2.0 mmol/L		05/11/2023 11:24 AM EDT		
	Anatomical Lo	cation /	Collection Method /	Callesting		
Specimen (Source) Blood	Laterality Venous blood		Volume	Collection	11me 23 10:43 AM	Received Time 05/11/2023 11:04 AM
biood	specimen / Ur		Venipuncture / Unknown	EDT	.5 TU.45 AIVI	EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/ZIP Code	Phone Nu	mher	
	565 Abbott Ro	J.	Buffalo, NY 14220, US	716-828-2		
LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	505715501110	a.	Danaio, IVI 11220, 00			
(ABNORMAL) COMPR	EHENSIVE M	ETABOLI(Ref Range	C PANEL - Final resul	t (05/11/20 Analysis Time		EDT) Pathologist Signature
Glucose	482 (H)	74 - 100	lest method	05/11/2023		
Glucose	402 (FI)	mg/dL		11:23 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
BUN	24	8 - 27		05/11/2023	CATHOLIC	
		mg/dL		11:23 AM EDT	HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Creatinine, Serum	1.68 (H)	0.80 - 1.30 mg/ dL		05/11/2023 11:23 AM EDT		
Bun/Creatinine Ratio	14.3	10.0 - 20.1		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Sodium	135 (L)	136 - 145 mmol/L		05/11/2023 11:23 AM EDT		
Potassium Comment: Sample is sli	3.9 ahtly hemolyze	3.5 - 5.5 mmol/L	av be affected.	05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Chloride	102	98 - 107 mmol/L		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
CO2	15 (L)	21 - 31 mmol/L		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Anion Gap	18 (H)	3 - 11		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Calcium	7.8 (L)	8.6 - 10.3 mg/ dL		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Aspartate Aminotranferase (AST) Comment: Sample is sli	739 (H)	13 - 39 U/L	av be affected	05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Alanine Aminotransferase (ALT)	483 (H)	7 - 52 U/ L		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Alkaline Phosphatase	126 (H)	34 - 104 U/L		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Protein, Total	5.6 (L)	6.1 - 7.9 g/dL		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin	3.3	3.3 - 4.8 g/dL		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Albumin/Globulin Ratio	1.4	1.1 - 2.8		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Total Bilirubin	1.0	0.3 - 1.0 mg/dL		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
GFR	45.7 (L)	>=90.0 mL/min/ 1.73 m2		05/11/2023 11:23 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaborati					
	Anatomical Lo	cation /	Collection Method /		<u> </u>	
Specimen (Source) Blood	Laterality Venous blood specimen / Ur	Iknown	Volume Venipuncture / Unknown	Collection 05/11/202 EDT	11me 23 10:43 AM	Received Time 05/11/2023 11:03 AM EDT
Narrative						
Authorizing Provider	Result Type					
Keira McCarthy NP	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - MERCY HOSPITAL OF BUFFALO	565 Abbott Ro	1.	Buffalo, NY 14220, US	716-828-2	2413	

(ABNORMAL) BLOOD	GAS ARTERI		D GAS, ARTERIAL) -		(05/11/2023	8 8:16 AM EDT)
Component		Ref	Test Method	Analysis	Derfermed At	Dathalagist Signatura
Component pH, Arterial	Value 7.06 (LL)	Range 7.35 - 7.45	Test Method	Time 05/11/2023 8:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY	Pathologist Signature
pCO2, Arterial	58 (H)	35 - 45 mmHg		05/11/2023 8:24 AM EDT	HOSPITAL CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
pO2, Arterial	81	75 - 100 mmHg		05/11/2023 8:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
HCO3, Arterial	16.4 (L)	20.0 - 28.0 mmol/L		05/11/2023 8:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
O2 Sat, Arterial	94.7 (L)	95.0 - 98.0 %		05/11/2023 8:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Base Excess, Arterial	-14.3 (L)	-2.0 - 3.0 none		05/11/2023 8:24 AM EDT		
Temperature	37.0			05/11/2023 8:24 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Specimen (Source)	Anatomical Lc Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Arterial blood specimen / Ur		Arterial Puncture / Unknown		23 8:16 AM	05/11/2023 8:20 AM EDT
Narrative						
Authorizing Dravidar	Decult Tures					
Authorizing Provider Michael Mangione DO	Result Type	RDERABLE	S			

Performing							
Organization	Address	City/State/ZIP Code	Phone Number				
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood Ave.	Kenmore, NY 14217, US	716-447-6135				
•	CHEST 1 VIEW 71045) -	Final result (05/11/2023	8:09 AM EDT)				
Anatomical Region	Laterality	Modality					
Chest		Computed I	Radiography				
	A						
Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time			
specifien (source)	Lateranty	volume	05/11/2023 8:13 AM				
			EDT				
Impressions							
05/11/2023 8:17 AM E Patchy perihilar pre likely edema; superi	dominant airspace op	acities, slightly grea as infection difficult	ter on the right, simi to exclude.	lar to prior,			
Enteric tube with ti	p overlying proximal	stomach. Consider ad	lvancement.				
Reading Location: S	R-BALL						
Dictated By: Ball, G	regory						
Dictated Date/Time:	5/11/2023 8:13 AM						
Electronically Signe	d By: Ball, Gregory						
Signed Date/Time: 5	/11/2023 8:17 AM						
Narrative							
05/11/2023 8:17 AM E XR CHEST 1 VIEW 7104							
HISTORY: Cardiac ar	rest.						
COMPARISON: 5/11/202	3, 0539 hrs.						
TECHNIQUE: Frontal	chest radiograph.						
RESULT: Overlying pad reduces sensitivity.							
Patchy predominant perihilar airspace opacities, slightly greater on the right, similar to prior. There is no large pleural effusion; left costophrenic angle truncated from field of view The cardiomediastinal silhouette is unchanged.							
Enteric tube with ti Endotracheal tube wi							
Procedure Note							
Gregory Ball, MD - 05/	11/2023						

Procedure Note

Formatting of this note might be different from the original. XR CHEST 1 VIEW 71045

HISTORY: Cardiac arrest.

COMPARISON: 5/11/2023, 0539 hrs.

TECHNIQUE: Frontal chest radiograph.

RESULT: Overlying pad reduces sensitivity.

Patchy predominant perihilar airspace opacities, slightly greater on the right, similar to prior. There is no large pleural effusion; left costophrenic angle truncated from field of view.. The cardiomediastinal silhouette is unchanged.

Enteric tube with tip overlying proximal stomach. Endotracheal tube with tip overlying midthoracic trachea.

IMPRESSION:

Patchy perihilar predominant airspace opacities, slightly greater on the right, similar to prior, likely edema; superimposed process such as infection difficult to exclude.

Enteric tube with tip overlying proximal stomach. Consider advancement.

Reading Location: SR-BALL

Dictated By: Ball, Gregory

Dictated Date/Time: 5/11/2023 8:13 AM

Electronically Signed By: Ball, Gregory

Signed Date/Time: 5/11/2023 8:17 AM

 Authorizing Provider
 Result Type

 Michael Mangione DO
 IMG XR PROCEDURES

(ABNORMAL) NINETY MIN TROP - Final result (05/11/2023 7:39 AM EDT)

Component	Value	Ref	Test Mathad	Analysis	Darfarmand At	Dathalagist Cignatura
Component High Sensitivity Troponin	Value 25,486 (H)	Range 0 - 20 pg/mL	Test Method	Time 05/11/2023 8:09 AM EDT		Pathologist Signature
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur		Venipuncture / Unknown	05/11/202 EDT	23 7:39 AM	05/11/2023 7:41 AM EDT
Narrative						
Authorizing Provider Raymond Kelly MD	Result Type		.c			
Raymonu Kelly MD	LAD DLOUD C					

Performing							
Organization	Address		City/State/ZIP Code	Р	hone Nur	mber	
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood	Ave.	Kenmore, NY 14217, US	S 7	'16-447-6	135	
CRITICAL CARE (Critical Narrative	Care) - Final re	esult (05/	11/2023 7:37 AM EDI))			
Narrative							
Authorizing Provider	Result Type						
Raymond Kelly MD	IN CLINIC/BED	SIDE ORD	ERABLES				
COV-2 RNA (COVID-19			N(G) = Final result (05/	11/2	2022 6.22		
		Ref			alysis		
Component	Value	Range	Test Method	Tim		Performed At	Pathologist Signature
Sars-Cov-2, RNA Amplification	Negative	Negative		05/	/11/2023 3 AM T	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE	
						MERCY HOSPITAL	
Specimen (Source)	Anatomical Loo Laterality	cation /	Collection Method / Volume	C	Collection	Timo	Received Time
Swab	Nasopharynge		COVID Swab / Unknow				05/11/2023 6:35 AM
5₩85	structure / Unk				DT	5 0.52 AM	EDT
Narrative							
Authorizing Provider	Result Type						
Raymond Kelly MD	LAB MOLECUL	AR DIAGN	OSTICS ORDERABLES				
Performing				P			
Organization	Address	<u> </u>	City/State/ZIP Code		hone Nur		
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood	Ave.	Kenmore, NY 14217, US	s /	'16-447-6	155	

INFLUENZA, RT PCR - Final result (05/11/2023 6:32 AM EDT)

		, 2020 (
C		Ref	T (N (1)	Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Influenza A RT PCR, NP Swab	Negative	Negative		05/11/2023 7:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Comment:						
Influenza A RNA PT-P analyzer. Negative R infection and should treatment or other p	esults do no [.] not be used	t preclud as the s	e influenza A virus ole basis for			

		Ref		Analysis			
Component Influenza B Rt Pcr, Np Swab	Value Negative	Range Negative	Test Method	Time 05/11/2023 7:13 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY	Pathologist Signature	
Comment: Influenza B RNA RT-Pe analyzer. Negative re infection and should treatment or other pa	esults do not not be used atient manage	preclud as the s ement dec	e influenza B virus ole basis for isions.		HOSPITAL		
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time	
Swab	Nasopharynge structure / Unk		COVID Swab / Unknow	n 05/11/202 EDT	3 6:32 AM	05/11/2023 6:35 AM EDT	
Narrative							
Authorizing Provider	Result Type						
Raymond Kelly MD	LAB MOLECUL	AR DIAGN	OSTICS ORDERABLES				
Performing							
Organization CATHOLIC HEALTH	Address 2950 Elmwood		City/State/ZIP Code Kenmore, NY 14217, US	Phone Nu			
LABORATORY SERVICES - KENMORE MERCY HOSPITAL		i Ave.	Kenmole, NY 14217, 0.	5 /10-447-0	0155		
XR CHEST 1 VIEW (XR C	HEST 1 VIEW	71045) - I		.3 5:46 AM E	DT)		
Anatomical Region	Lateralit	у	Modality				
Chest			Computed	d Radiograph	у		
Specimen (Source)	Anatomical Loc Laterality	cation /	Collection Method / Volume	Collection		Received Time	
				05/11/202 EDT	3 6:24 AM		
Impressions							
05/11/2023 6:25 AM El 1. Lines and tubes a 2. Pulmonary edema.							
Reading Location: S	R-CHUNG						
Dictated By: CHUNG,	CHARLES						
Dictated Date/Time: 5/11/2023 6:24 AM							
Electronically Signe	d By: CHUNG,	CHARLES					
Signed Date/Time: 5	/11/2023 6:25	5 AM					
Narrative 05/11/2023 6:25 AM E	DT						

Narrative

EXAM: XR CHEST 1 VIEW 71045.

INDICATION: cardiac arrest

TECHNIQUE: Chest single view COMPARISON: None.

FINDINGS: No significant enlargement of the cardiomediastinal silhouette.

Prominent ill-defined bronchovascular markings with hazy lungs. No pleural effusion or pneumothorax seen.

Endotracheal tube tip projects over the midthoracic trachea. Cutaneous pacer/defibrillator pad projects over the medial diaphragms.

Procedure Note

Charles Chung, MD - 05/11/2023 Formatting of this note might be different from the original. EXAM: XR CHEST 1 VIEW 71045.

INDICATION: cardiac arrest

TECHNIQUE: Chest single view COMPARISON: None.

FINDINGS: No significant enlargement of the cardiomediastinal silhouette.

Prominent ill-defined bronchovascular markings with hazy lungs. No pleural effusion or pneumothorax seen.

Endotracheal tube tip projects over the midthoracic trachea. Cutaneous pacer/defibrillator pad projects over the medial diaphragms.

IMPRESSION:

1. Lines and tubes as above.

2. Pulmonary edema.

Reading Location: SR-CHUNG

Dictated By: CHUNG, CHARLES

Dictated Date/Time: 5/11/2023 6:24 AM

Electronically Signed By: CHUNG, CHARLES

Signed Date/Time: 5/11/2023 6:25 AM

 Authorizing Provider
 Result Type

 Raymond Kelly MD
 IMG XR PROCEDURES

(ABNORMAL) INITIAL TROPONIN - Final result (05/11/2023 5:37 AM EDT)

Component	Value	Ref Range Test Method	Analysis Time Performed At Pathologist Signature
High Sensitivity Troponin	819 (H)	0 - 20 pg/mL	05/11/2023 CATHOLIC 6:12 AM HEALTH EDT LABORATORY SERVICES - KENMORE MERCY HOSPITAL

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/11/2023 5:37 AM EDT	05/11/2023 5:43 AM EDT
Narrative				
Authorizing Provider	Result Type			
Raymond Kelly MD	LAB BLOOD ORDERABLE	ES		
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood Ave.	Kenmore, NY 14217, US	716-447-6135	

(ABNORMAL) CBC W/ autodiff (CBC WITH AUTODIFF) - Final result (05/11/2023 5:37 AM EDT)

		Ref		Analysis	,
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	10.9	4.5 - 11.0 10*3/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
RBC	4.52	4.50 - 6.50 10*6/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Hemoglobin	13.6 (L)	14.0 - 18.0 g/ dL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Hematocrit	42.8	40.0 - 54.0 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
MCV	94.7 (H)	80.0 - 94.0 fL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
MCH	30.2	26.0 - 34.0 pg		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
МСНС	31.8	31.0 - 37.0 g/ dL		05/11/2023 6:11 AM EDT		
RDW	13.4	11.5 - 14.5 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Platelets	112 (L)	145 - 450 10*3/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
MPV	8.0	7.4 - 10.4 fL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Un	known	Venipuncture / Unknown		3 5:37 AM	05/11/2023 5:43 AM EDT
Narrative						
Authorizing Provider Raymond Kelly MD	Result Type LAB BLOOD O	RDERABLE	S			
Performing Organization CATHOLIC HEALTH LABORATORY SERVICES	Address 2950 Elmwood	l Ave.	City/State/ZIP Code Kenmore, NY 14217, US	Phone Nu S 716-447-6		
- KENMORE MERCY HOSPITAL						

(ABNORMAL) MANUAL DIFFERENTIAL - Final result (05/11/2023 5:37 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
WBC (White Blood Cell) Count	10.9	4.5 - 11.0 1000/mL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Total Counted	98			05/11/2023 6:11 AM EDT		
Neutrophils %	20 (L)	50 - 75 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Bands %	2	0 - 3 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Lymphocytes %	64 (H)	20 - 40 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Monocytes %	6	2 - 10 %		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Eosinophils %	5	0 - 8 %		05/11/2023 6:11 AM EDT		
Basophils %	1	0 - 2 %		05/11/2023 6:11 AM EDT		
Metamyelocytes %	1 (H)	0 %		05/11/2023 6:11 AM EDT		
Neutrophils Absolute	2.5	2.0 - 8.2 1000/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	

		Ref		Analysis		
Component	Value	Range	Test Method	Time	Performed At	Pathologist Signature
Lymphocytes Absolute	7.0 (H)	0.8 - 4.4 1000/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Monocytes Absolute	0.7	0.1 - 1.1 1000/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Eosinophils Absolute	0.5	0.0 - 0.6 1000/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Basophils Absolute	0.1	1000/uL		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
nRBC	1	0 - 2		05/11/2023 6:11 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Specimen (Source)	Anatomical Lo Laterality	cation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ur	Iknown	Venipuncture / Unknown		3 5:37 AM	05/11/2023 5:43 AM EDT
Narrative						
Authorizing Provider	Result Type					
Raymond Kelly MD	LAB BLOOD O	RDERABLE	S			
Performing Organization	Address		City/State/7ID Code	Phone Nu	mbor	
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood	d Ave.	City/State/ZIP Code Kenmore, NY 14217, US			

(ABNORMAL) B-TYPE NATRIURETIC PEPTIDE - Final result (05/11/2023 5:37 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At Pathologist Signature
B-Type Natriuretic Peptide	125 (H)	<=100 pg/mL		05/11/2023 6:07 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL

	Anatomical Lo	cation /	Collection Method /	Collection	Time	Dessived Time
Specimen (Source)	Laterality		Volume		-	Received Time
Blood			Venipuncture / 05/11/2023 Unknown EDT		3 5:37 AM	05/11/2023 5:43 AM EDT
Narrative						
Authorizing Provider	Result Type					
Raymond Kelly MD	LAB BLOOD O	RDERABLE	S			
, ,						
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu		
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwooc	I Ave.	Kenmore, NY 14217, US	5 716-447-6	135	
MAGNESIUM - Final res	sult (05/11/202		M EDT)	A 1 *		
Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Magnesium	2.3	1.7 - 2.5	lest method	05/11/2023		
Magnesium	2.5	mg/dL		6:04 AM EDT	HEALTH LABORATORY SERVICES - KENMORE MERCY	
					HOSPITAL	
	Apotomical La	cation /	Collection Method /			
Specimen (Source)	Anatomical Lo Laterality	cation /	Volume	Collection	Time	Received Time
Blood	Venous blood		Venipuncture /		3 5:37 AM	05/11/2023 5:43 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative						
וימוומנויצ						
Authorizing Provider	Result Type					
Raymond Kelly MD	LAB BLOOD O	RDERABLE	S			
Performing						
Organization	Address		City/State/ZIP Code	Phone Nu	mber	
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood	l Ave.	Kenmore, NY 14217, US			

(ABNORMAL) LACTIC ACID, SERUM (LACTIC ACID, PLASMA) - Final result (05/11/2023 5:37 AM EDT)

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Lactic Acid	13.4 (HH)	0.5 - 2.0 mmol/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Specimen (Source)	Anatomical Lo Laterality	ocation /	Collection Method / Volume	Collection	Time	Received Time
Blood	Venous blood specimen / Ui		Venipuncture / Unknown	05/11/202 EDT	23 5:37 AM	05/11/2023 5:43 AM EDT

Authorizing Provider	Result Type		
Raymond Kelly MD	LAB BLOOD ORDERABLE	S	
Performing Organization	Address	City/State/ZIP Code	Phone Number
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood Ave.	Kenmore, NY 14217, US	716-447-6135

(ABNORMAL) BLOOD GAS VENOUS (BLOOD GAS, VENOUS) - Final result (05/11/2023 5:37 AM EDT)

Narrative

		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
рН, Venous	<6.95 (LL)	7.31 - 7.41		05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
pCO2 Venous	105.0 (H)	40.0 - 52.0 mmHg		05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
pO2, Venous	59.0 (H)	30.0 - 50.0 mmHg		05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
HCO3, Venous				05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Comment: UNABLE TO						
O2 Sat, Venous	73	60 - 90 %		05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Base Excess, Venous Comment: UNABLE TO	Ο ΓΔΙ ΓΙ ΙΙ ΔΤΕ			05/11/2023 5:47 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	

Specimen (Source)	Anatomical Location / Laterality	Collection Method / Volume	Collection Time	Received Time
Blood	Venous blood specimen / Unknown	Venipuncture / Unknown	05/11/2023 5:37 AM EDT	05/11/2023 5:43 AM EDT
Narrative				
Authorizing Provider	Result Type			
Raymond Kelly MD	LAB BLOOD ORDERABLE	S		
Performing Organization	Address	City/State/ZIP Code	Phone Number	
CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	2950 Elmwood Ave.	Kenmore, NY 14217, US	716-447-6135	

(ABNORMAL) COMPREHENSIVE METABOLIC PANEL - Final result (05/11/2023 5:37 AM EDT)

		Ref		Analysis	,
Component	Value	Range	Test Method	Time	Performed At Pathologist Signature
Glucose	431 (H)	74 - 100 mg/dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
BUN	17	8 - 27 mg/dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Creatinine, Serum	1.18	0.80 - 1.30 mg/ dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Bun/Creatinine Ratio	14.4	10.0 - 20.1		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Sodium	142	136 - 145 mmol/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL
Potassium	2.4 (LL)	3.5 - 5.5 mmol/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL

Component	Value	Ref Range	Test Method	Analysis Time	Performed At	Pathologist Signature
Chloride	104	98 - 107 mmol/L		05/11/2023 6:16 AM EDT		
CO2	20 (L)	21 - 31 mmol/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Anion Gap	18 (H)	3 - 11		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Calcium	7.2 (L)	8.6 - 10.3 mg/ dL	,	05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Aspartate Aminotranferase (AST)	304 (H)	13 - 39 U/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Alanine Aminotransferase (ALT)	381 (H)	7 - 52 U/ L		05/11/2023 6:16 AM EDT		
Alkaline Phosphatase	65	34 - 104 U/L		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Protein, Total	4.4 (L)	6.1 - 7.9 g/dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Albumin	2.5 (L)	3.3 - 4.8 g/dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	

-		Ref		Analysis		
Component	Value	Range	Test Method	Time		Pathologist Signature
Albumin/Globulin Ratio	1.3	1.1 - 2.8		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Total Bilirubin	0.3	0.3 - 1.0 mg/dL		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
GFR	69.8 (L)	>=90.0 mL/min/ 1.73 m2		05/11/2023 6:16 AM EDT	CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	
Comment: Effective 5/11/2022, Disease Epidemiology without adjustment f	Collaboratio					
	Anatomical Lo	cation /	Collection Method /			
Specimen (Source)	Laterality		Volume	Collection		Received Time
Blood	Venous blood		Venipuncture /		3 5:37 AM	05/11/2023 5:43 AM
	specimen / Un	known	Unknown	EDT		EDT
Narrative	specimen / Un	known	Unknown	EDI		EDI
Narrative	specimen / Un	known	Unknown	EDI		EDI
		Known	Unknown	EDI		EDI
Narrative Authorizing Provider Raymond Kelly MD	Result Type					EDI
Authorizing Provider	Result Type			EDI Phone Nu	mber	EDI
Authorizing Provider Raymond Kelly MD Performing	Result Type LAB BLOOD O	RDERABLE	S	Phone Nu		EDI
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY	Result Type LAB BLOOD O Address	RDERABLE	S City/State/ZIP Code	Phone Nu		
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave.	S City/State/ZIP Code Kenmore, NY 14217, US	Phone Nu		
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave. 23 5:32 AM	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US	Phone Nu		
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave. 23 5:32 AM	S City/State/ZIP Code Kenmore, NY 14217, US	Phone Nu	135	Received Time
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave. 23 5:32 AM	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	135	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave. 23 5:32 AM	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	135	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res Specimen (Source)	Result Type LAB BLOOD O Address 2950 Elmwood	RDERABLE I Ave. 23 5:32 AM	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	135	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res Specimen (Source) Narrative	Result Type LAB BLOOD O Address 2950 Elmwood ult (05/11/202 Anatomical Lo Laterality	RDERABLE Ave.	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	135	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res Specimen (Source) Narrative Authorizing Provider Raymond Kelly MD	Result Type LAB BLOOD O Address 2950 Elmwood ult (05/11/202 Anatomical Lo Laterality Result Type	RDERABLE Ave.	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	135	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res Specimen (Source) Narrative Authorizing Provider Raymond Kelly MD Performing	Result Type LAB BLOOD O Address 2950 Elmwood ult (05/11/202 Anatomical Lo Laterality Result Type ECG ORDERAE	RDERABLE Ave.	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US A EDT) Collection Method / Volume	Phone Nu S 716-447-6 Collection	Time	
Authorizing Provider Raymond Kelly MD Performing Organization CATHOLIC HEALTH LABORATORY SERVICES - KENMORE MERCY HOSPITAL ECG 12-LEAD - Final res Specimen (Source) Narrative Authorizing Provider Raymond Kelly MD	Result Type LAB BLOOD O Address 2950 Elmwood ult (05/11/202 Anatomical Lo Laterality Result Type	RDERABLE Ave.	S <u>City/State/ZIP Code</u> Kenmore, NY 14217, US M EDT) Collection Method /	Phone Nu S 716-447-6	Time	

ರೆ	Care Teams				
	Team Member	Relationship	Specialty	Start Date	End Date
	Рср	PCP - General	Internal Medicine	5/11/23	
	We will be reaching out to you				
	to set up a follow up appointment.				
	appointment.				
0÷	Patient Contacts				
	Contact Name	Contact Address	Communication	Relationship to	Patient
	Ionia Abdic	Unknown	248-759-0294 (Mobile)	Daughter, Emer	gency Contact
	Vicki Boboc	Unknown	248-778-7799 (Mobile)	Sister, Emergen	cy Contact
	John Suiugan	Unknown	248-946-6497 (Mobile)	Son, Emergency	v Contact
	Document Informatic	on			
	Primary Care Provider		Other Service Providers	Document Cove	erage Dates
	Pcp (May 11, 2023 - Present)			Feb. 27, 1961 -	Jul. 03, 2024
		to set up a follow up appointme	nt.		
	Internal Medicine				
	Kenmore Mercy Hospital				
	KENMORE, NY 14217-1304				
	Custodian Organization				
	Kenmore Mercy Hospital				
	2950 ELMWOOD AVE				
	KENMORE, NY 14217-1304				



If you take your Lucy record on a thumb drive to a different doctor, he or she might be able to use his computer to read the file electronically. Your downloaded, machine-readable Personal Health Summary document is in a format called "CDA." If your doctor has a computer that understands CDA, your information is a folder on your thumb drive called **MachineReadable_XDMFormat**. You might need to enter a password before your doctor can use this file.

Copyright ©2024 Epic

Patient Demographics - Male; born Feb. 27, 1961					
Patient Address		Patient Name		Communication	
	23920 NAPIER RD <i>(Home)</i> SOUTH LYON, MI 48178	Ioan Suiugan		ioanaabdic@gmail.com	
	Former (May 11, 2023 - May 10, 2023): 23920 NAPIER ROAD (Home) NOVI, MI 48374				
	Language	Race / Ethnicity		Marital Status	
	Unknown	Hispanic or Latino , Latino	/ Not Hispanic or	Unknown	
5	Note from Catholic H This document contains informa Health System.		Suiugan. It may not co	ontain the entire record from Ca	atholic
} ;	Encounter Details				
	Date Type	Department	Care Team (Latest C	ontact Info) Description	
	05/11/2023 Procedure Pass	Kenmore Mercy Hospital X- RAY EMERGENCY 2950 Elmwood Ave			
		KENMORE, NY 14217 716-447-6257			
80	Allergies - documented as on No known active allergies	of this encounter (statuses as o	f 07/03/2024)		
•	Medications - documente	ed as of this encounter (statuse	s as of 07/03/2024)		
	Medication	Sig	Dispensed	Start Date End Dat	e Status
	QUEtiapine (Seroquel) 25 mg tablet	Take 1 tablet (25 mg total) by mouth every night.	30 tablet	06/12/2023	Active
	amiodarone (Pacerone) 200 mg tablet	Take 1 tablet (200 mg total) by mouth 1 (one) time each day.	30 tablet	06/17/2023	Active
	apixaban (Eliquis) 5 mg tablet	Take 1 tablet (5 mg total) by mouth in the morning and 1 tablet (5 mg total) before bedtime.	60 tablet	06/16/2023	Active
	atorvastatin (Lipitor) 40 mg tablet	Take 1 tablet (40 mg total) by mouth 1 (one) time each day.	30 tablet	06/17/2023	Active
	insulin glargine (Lantus) 100 unit/mL injection	Inject 0.3 mL (30 Units total) under the skin 1 (one) time each day at 12 Noon.	9 mL	06/16/2023	Active
	metoprolol tartrate (Lopressor) 50 mg tablet	Take 1 tablet (50 mg total) by mouth every 6 (six) hours.	120 tablet	06/16/2023	Active
	OLANZapine (Zyprexa) 5 mg tablet	Take 1 tablet (5 mg total) by mouth in the morning and 1 tablet (5 mg total) before bedtime.	60 tablet	06/16/2023	Active

Active Problems - documented as of this encounter (statuses as of 07/03/2024)

	.,,	
Problem	Noted Date	Diagnosed Date
Acute respiratory failure with hypoxemia	05/14/2023	
Anoxic encephalopathy	05/14/2023	
Type 2 diabetes mellitus	05/14/2023	
Streptococcal pneumonia	05/14/2023	
Cardiac arrest	05/11/2023	
Acute renal failure with tubular necrosis	05/11/2023	
Transaminitis	05/11/2023	

Resolved Problems - documented as of this encounter (statuses as of 07/03/2024)

Problem	Noted Date	Diagnosed Date	Resolved Date
Cerebral ischemia	05/11/2023		05/15/2023
Coma	05/11/2023		05/14/2023
Lactic acidosis	05/11/2023		05/14/2023
Hematochezia	05/11/2023		05/14/2023
Low blood potassium	05/11/2023		05/14/2023
Hyperglycemia	05/11/2023		05/14/2023
High anion gap metabolic acidosis	05/11/2023		05/14/2023

Social History - documented as of this encounter

_	-			
Tobacco Use	Types	Packs/Day	Years Used	Date
Smoking Tobacco: Every Day	Cigarettes			
Alcohol Use		Answer		Date Recorded
Q1: How often do you have a d	rink containing alcohol?	Patient decline	d	05/11/2023
Q2: How many drinks containin	ig alcohol do you have on a	Patient decline	d	05/11/2023
typical day when you are drinki	ng?			
Q3: How often do you have six	or more drinks on one	Patient decline	d	05/11/2023
occasion?				
AUDIT-C Score		Not on file		05/11/2023
Sex and Gender Information		Value		Date Recorded
Sex Assigned at Birth		Male		05/26/2023 7:04 AM EDT
Gender Identity		Male		05/26/2023 8:50 AM EDT
Sexual Orientation		Don't know		05/26/2023 7:04 AM EDT
COVID-19 Exposure		Response		Date Recorded
In the last 10 days, have you be	en in contact with someone	Unable to asse	SS	5/11/2023 5:42 AM EDT
who was confirmed or suspected	ed to have Coronavirus/			
COVID-19?				

Last Filed Vital Signs - documented in this encounter

Not on file

Plan of Treatment - documented as of this encounter

Not on file

Results - documented in this encounter Not on file

	Insurance - documented as of this encounter							
		Benefit Plan /		Effective				
	Payer	Group	Subscriber ID	Dates	Phone	Address	Туре	
	MEDICAID OUT OF STATE	MEDICAID	xxxxxx2967	5/1/2023-	844-464-3447	25620W 8 Mile	Medicaid	
		MICHIGAN		Present		Rd		
						SOUTHFIELD, MI 48033		
	COMMERCIAL - OTHER	COMMERCIAL OTHER	xxxxxx2967	1/1/2023- Present		SOUTHFIELD DISTRICT		
		OTTER		Tresent		25620 WEST 8		
						MILE RD		
						SOUTHFIELD, MI 48033		
Ð	Advance Directives							
	Full Code (Latest Code Stat	-						
	Date Activated	Date Inactiv		Comments				
	5/11/2023 10:29 AM	6/16/2023	5:53 PM					
		nswer	Comments	5				
	Is there a MOLST in No patients chart?	o MOLST						
ರ್	Care Teams - documen	ted as of this en	counter					
	Team Member	Relationship)	Specialty		Start Date	End Date	
	Рср	PCP - Gener	al	Internal Me	dicine	5/11/23		
	We will be reaching out to yo	bu						
	to set up a follow up appointment.							
	appointment.							
	Patient Contacts							
	Contact Name	Contact Add	dress	Communica	ation	Relationship to P	atient	
	Ionia Abdic	Unknown		248-759-02	94 (Mobile)	Daughter, Emerge	ency Contact	
	Vicki Boboc	Unknown		248-778-77	99 (Mobile)	Sister, Emergency	Contact	
	John Suiugan	Unknown		248-946-64	97 (Mobile)	Son, Emergency	Contact	
	Document Informat	tion						
	Primary Care Provider			Othe	r Service Providers	Document Cover	age Dates	
	Pcp (May 11, 2023 - Present)			othe		May 11, 2023 - Ju	-	
	We will be reaching out to yo		llow up appointme	ent.		111ay 11, 2020 - 50		
	Internal Medicine							
	CHS Service Area							
	144 Genesee Street							
	Buffalo, NY 14203-1560							
	Custodian Organization							
	CHS Service Area							
	144 Genesee Street							
	Buffalo, NY 14203-1560							
	Encounter Providers					Encounter Date		
						May 11, 2023		
						-, -,		