Freiburg Medical Laboratory Middle East (L.L.C.)
P.O. Box: 3068, Dubai - UAE, Tel: 04 396 2227, Fax: 04 396 2228
E-mail: info@fml-dubai.com, Website: www.fml-dubai.com

Physician:

Dr. M. Jaksch
Freiburg Medical Lab

Laboratory Report Online Version

Report Date: 29.10.2019

Patient Name: Cardio. Risk -Hypertension Sam
Gender: Female
Date of Birth: 01.01.1999
Nationality:
Your ID:

Test Request Code: 1999
Sample ID:
Patient IDNo: 380689

Sampling Date / Time: 29.10.2019 / 00:00
Receipt Date / Time: 29.10.2019 / 16:24

Remarks:

Insurance:

Analysis	Result	Flag	Units	Reference Range
Proteins/Metabolites (Serum)				
Lipid Studies in mg/dl (Recommendations for Adults from the American Heart Association)				
Cholesterol, total (PHO)	**156**		mg/dl	100 - 200
Normal: 100 - 199, Desirable: < 200, Borderline: 200 - 239, High Risk: >240				
Triglycerides (PHO)	**70**		mg/dl	< 150
Normal: < 150, Borderline: 150 - 199, High: 200 - 499, Very High: >500				
HDL Cholesterol, direct (PHO)	**47.6**	**low**	mg/dl	> 50
Increased Risk Men: < 40, Increased Risk Women: < 50, Normal: 50 - 60, Optimal: > 60				
LDL Chol., Friedewald (CALC)	**94**		mg/dl	< 100
Optimal: < 100, Near Optimal: 100 - 129, Borderline: 130 - 159, High: 160 - 189, Very High: > 190				
VLDL (CALC)	**14.0**		mg/dl	< 30.0
Cholesterol/HDL (CALC)	**3.3**		Ratio	2.0 - 4.4
Normal: 2.0 - 4.4, Desirable: < 4.5, Borderline: 4.5 - 6.0, Increased Risk: > 6.0				
Proteins/Metabolites (Serum)				
Lipid Studies in mmol/l (Recommendations for Adults from the American Heart Association)				
Cholesterol, total (PHO)	**4.0**		mmol/l	2.6 - 5.1
Normal: 2.6 - 5.1, Desirable: < 5.2, Borderline: 5.2 - 6.2, High Risk: >6.2				
Triglycerides (PHO)	**0.8**		mmol/l	< 1.7
Normal: < 1.7, Borderline: 1.7 - 2.2, High: 2.2 - 5.6, Very High: >5.6				

Note:
Our reference values are adjusted to age and gender.
Daily internal Quality Control within the required range (according to Rili-BÄK).
External Quality Control available on request.
^ non-accredited parameter
"This parameter is affected by Biotin intake of >5 mg (RDI = 0.03mg)
* This investigation has been performed in a collaborating accredited laboratory (Germany).

Techn. Validation by Med. Technologist (Supervisor of the Department)

Dr. Nehmat ElBanna Specialist Clinical Pathology (U/S) (DHA-P-0084548)

PD Dr. med. habil. M. Jaksch Associate Professor Medical Director (DHA-LS-240710)

This report has been printed through Imed-Online-Reporting-System and therefore does not carry a signature.

Freiburg Medical Laboratory Middle East (L.L.C.)
P.O. Box: 3068, Dubai - UAE, Tel: 04 396 2227, Fax: 04 396 2228
E-mail: info@fml-dubai.com, Website: www.fml-dubai.com

Physician:

Dr. M. Jaksch
Freiburg Medical Lab

Laboratory Report Online Version

Report Date: 29.10.2019

Patient Name: Cardio. Risk -Hypertension Sam
Gender: Female
Date of Birth: 01.01.1999
Nationality:
Your ID:

Test Request Code: 1999
Sample ID:
Patient IDNo: 380689

Sampling Date / Time: 29.10.2019 / 00:00
Receipt Date / Time: 29.10.2019 / 16:24

Remarks:

Insurance:

Analysis	Result	Flag	Units	Reference Range
Proteins/Metabolites (Serum), Continuation				
HDL Cholesterol, direct (PHO)	**1.2**	**low**	mmol/l	>1.3
Increased Risk Men: < 1.0, Increased Risk Women: < 1.3, Normal: 1.3 - 1.6, Optimal: > 1.6				
LDL Chol., Friedewald (CALC)	**2.4**		mmol/l	< 2.6
Optimal: < 2.6, Near Optimal: 2.6 - 3.3, Borderline: 3.4 - 4.1, High: 4.2 - 4.9, Very High: > 4.9				
VLDL (CALC)	**0.36**		mmol/l	<0.77
Proteins/Metabolites (EDTA-Plasma)				
Homocysteine (PHO)	**11.0**		umol/l	<12.0

Please note:
We are using the cut-off value of 12 umol/l, which is used in European laboratories. In most of the U.S. laboratories, 15 umol/l is used as the cut-off value for normal levels of Homocysteine in adults.

A significantly increased level of homocysteine is considered an arteriosclerotic risk factor.
Various studies have shown that the risk of mortality will not be increased by results below 10; results from 10 to 15 increase the risk factor up to 1.9 times;
results from 15 to 20 up to 2.8 times; results >20 up to 4.5 times.
A combined folic acid, vitamin B6 and vitamin B12 supplementation followed by homocysteine level monitoring is recommended.
Please note, that the reference range is valid only for serum/plasma which was separated within one hour after blood collection.

Proteins/Metabolites (Serum)				
CRP high sensitive (TURB)*	**0.98**		mg/l	< 1.0

Note:
Our reference values are adjusted to age and gender.
Daily internal Quality Control within the required range (according to Rili-BÄK).
External Quality Control available on request.
^ non-accredited parameter
"This parameter is affected by Biotin intake of >5 mg (RDI = 0.03mg)
* This investigation has been performed in a collaborating accredited laboratory (Germany).

Techn. Validation by Med. Technologist (Supervisor of the Department)

Dr. Nehmat ElBanna Specialist Clinical Pathology (U/S) (DHA-P-0084548)

PD Dr. med. habil. M. Jaksch Associate Professor Medical Director (DHA-LS-240710)

This report has been printed through Imed-Online-Reporting-System and therefore does not carry a signature.

Freiburg Medical Laboratory Middle East (L.L.C.)
P.O. Box: 3068, Dubai - UAE, Tel: 04 396 2227, Fax: 04 396 2228
E-mail: info@fml-dubai.com, Website: www.fml-dubai.com

Physician:

Dr. M. Jaksch
Freiburg Medical Lab

Laboratory Report Online Version

Report Date: 29.10.2019

Patient Name: Cardio. Risk -Hypertension Sam
Gender: Female
Date of Birth: 01.01.1999
Nationality:
Your ID:

Test Request Code: 1999
Sample ID:
Patient IDNo: 380689

Sampling Date / Time: 29.10.2019 / 00:00
Receipt Date / Time: 29.10.2019 / 16:24

Remarks:

Insurance:

Analysis	Result	Flag	Units	Reference Range
Cardiovascular risk: low < 1.0 medium 1.0 - 3.0 high > 3.0 acute phase reaction likely > 10.0				
Lipoprotein (a) (TURB)	**60.0**		nmol/l	< 75.0

Elevated lipoprotein (a) increases the risk for CHD in combination with other CHD risk factors. A moderately strong association of Lp (a) with CHD has been established independently of the classical vascular risk factors.

The risk of angina pectoris is increased with high concentration of Lp (a) and it is more significant if accompanied by high LDL-C concentration.

Treatment with Niacin reduces Lp (a) levels by 30-40% and yields other potential beneficial effects by reducing LDL cholesterol, total cholesterol, triglycerides, remnant cholesterol and by raising HDL cholesterol.

Ref: Borge G. Nordestgaard, M. John Chapman, Kausik Ray et al. for the European Atherosclerosis Society Consensus Panel: Lipoprotein (a) as a cardiovascular risk factor: current status.
Source: European Heart Journal: 2010; 31:2844-2853

Endocrinology (Serum)				
Aldosterone (CLIA)*	**232.0**		ng/l	see text
lying position: 11.7 - 236.0 ng/l standing position: 22.1 - 353.0 ng/l				
Endocrinology (EDTA-Plasma)				

Note:
Our reference values are adjusted to age and gender.
Daily internal Quality Control within the required range (according to Rili-BÄK).
External Quality Control available on request.
^ non-accredited parameter
"This parameter is affected by Biotin intake of >5 mg (RDI = 0.03mg)
* This investigation has been performed in a collaborating accredited laboratory (Germany).

Techn. Validation by Med. Technologist (Supervisor of the Department)

Dr. Nehmat ElBanna Specialist Clinical Pathology (U/S) (DHA-P-0084548)

PD Dr. med. habil. M. Jaksch Associate Professor Medical Director (DHA-LS-240710)

This report has been printed through Imed-Online-Reporting-System and therefore does not carry a signature.

Freiburg Medical Laboratory Middle East (L.L.C.)
P.O. Box: 3068, Dubai - UAE, Tel: 04 396 2227, Fax: 04 396 2228
E-mail: info@fml-dubai.com, Website: www.fml-dubai.com

Physician:

Dr. M. Jaksch
Freiburg Medical Lab

Laboratory Report Online Version

Report Date: 29.10.2019

Patient Name: Cardio. Risk -Hypertension Sam
Gender: Female
Date of Birth: 01.01.1999
Nationality:
Your ID:

Test Request Code: 1999
Sample ID:
Patient IDNo: 380689

Sampling Date / Time: 29.10.2019 / 00:00
Receipt Date / Time: 29.10.2019 / 16:24

Remarks:

Insurance:

Analysis	Result	Flag	Units	Reference Range
Endocrinology (EDTA-Plasma), Continuation				
Renin (LIA)*	**26.2**		ng/l	see text
lying position: 1.7 - 23.9 ng/l standing position: 2.6 - 27.7 ng/l				
Aldost./Renin Ratio (CALC)*	**8.90**		ratio	< 20.0

Note:
Our reference values are adjusted to age and gender.
Daily internal Quality Control within the required range (according to Rili-BÄK).
External Quality Control available on request.
^ non-accredited parameter
"This parameter is affected by Biotin intake of >5 mg (RDI = 0.03mg)
* This investigation has been performed in a collaborating accredited laboratory (Germany).

Techn. Validation by Med. Technologist (Supervisor of the Department)

Dr. Nehmat ElBanna
Specialist
Clinical Pathology (U/S)
(DHA-P-0084548)

PD Dr. med. habil. M. Jaksch
Associate Professor
Medical Director
(DHA-LS-240710)

This report has been printed through Imed-Online-Reporting-System and therefore does not carry a signature.