

Boulder Endocrinology, PLLC

892 W South Boulder Road
Louisville, CO 80027
Board Certified in Endocrinology, Diabetes & Metabolism

(303) 586-5200
fax: (303) 586-5201

www.BoulderEndo.com

Page: 1 of 2
Printed on 8/20/13 at 10:33 AM

[REDACTED]
[REDACTED] 35 yrs old [REDACTED]

ComChartID: 47821104J201305028

Filed on 8/16/2013 10:24 AM

Lab results from: Boulder Endocrine - Logician

8/16/2013 8:37 AM

LIPID PANEL

CHOL	H 204	(normal: 140-200) MG/DL
FASTING, YES OR NO? Y		
TRIG	H 315	(normal: 40-150) MG/DL
ADULT MALE TRIGLYCERIDE INTERPRETIVE TEXT		
<150 MG/DL.....NORMAL		
150-199 MG/DL.....BORDERLINE HIGH		
200-499 MG/DL.....HIGH		
> OR = 500 MG/DL...VERY HIGH		
HDL	L 27	(normal: 40-65) MG/DL
LDL CALCULATED	H 114	(normal: 70-100) MG/DL
ADULT LDL INTERPRETIVE TEXT		
<100 MG/DL.....OPTIMAL		
100-129 MG/DL.....ABOVE OPTIMAL		
130-159 MG/DL.....BORDERLINE HIGH		
160-189 MG/DL.....HIGH		
> OR = 190 MG/DL...VERY HIGH		
VLDL	H 63	(normal: 8-25) MG/DL
N-HDL CALCULATE	H 177	(normal: 90-129) MG/DL
CHOL/HDL RISK	H 1.8	(normal: 0.2-1.0)
LDL/HDL RISK	H 1.2	(normal: 0.2-1.0)
CHOL/HDL	H 7.56	(normal: 1.00-4.97) RATIO
LDL/HDL	H 4.22	(normal: 1.00-3.64) RATIO

ATTENTION: Lindsey Rentschler, MD
From: Deborah Jueneman 8/16/2013 10:24 AM

Filed on 8/19/2013 8:08 AM
Lab results from: Boulder Endocrine - Logician

8/16/2013 8:37 AM

ESTRADIOL

ESTRADIOL	43.94	(normal: 5.37-65.90) PG/ML
NOTE: TO CONVERT PG/ML ESTRADIOL TO PMOL/L MULTIPLY BY 3.67		

ATTENTION: Lindsey Rentschler, MD
From: Deborah Jueneman 8/19/2013 8:08 AM

Filed on 8/19/2013 8:41 AM
Lab results from: Boulder Endocrine - Logician

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8/16/2013 8:37 AM

SEX HORM.B-GLOB

SEX HORM.B-GLOB 22 (normal: 10-57) NMOL/L

ZINC SERUM

ZINC SERUM 1.05 (normal: 0.66-1.10) MCG/ML

ATTENTION: Lindsey Rentschler, MD
From: Deborah Jueneman 8/19/2013 8:41 AM

Deb, please tell him:

1. Triglycerides are lower but still too high. He should start fish oil 4000 mg qday. Please mail him the dietary sheet for lowering triglycerides. Total cholesterol and LDL are pretty good. HDL may come up a little with lowered triglycerides.
2. Estradiol is in normal range.
3. Sex-hormone binding globulin normal.
4. Zinc is normal.

Mail copy. Thanks.

Electronically signed by: Lindsey Rentschler, MD on 8/20/2013 9:06 AM

ATTENTION: Deborah Jueneman
From: Lindsey Rentschler, MD 8/20/2013 9:06 AM

↑ fiber, ↑ water intake -

Gastroenterology of Rockies

Boulder Endocrinology, PLLC

Lindsey Rentschler, MD

892 W South Boulder Road
Louisville, CO 80027

Neurology (brain) Dr. Zacharias - Pseudotumor cerebri

(303) 586-5200
fax: (303) 586-5201

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date of birth: [REDACTED]

Labs results: page 1

printed on 8/15/2013

Date/time

result

normal

units

comments

8/3/2013

Boulder Endocrine - Logician

9:09 AM BRAIN WWO IV CONTRAST

SEE NOTE

RADIOLOGY REPORT

BOULDER COMMUNITY HOSPITAL

DIAGNOSTIC IMAGING

MRI

1100 BALSAM AVENUE

BOULDER, CO 80304

(303)-440-2170

PT NAME: WILSON, MATTHEW REPORT NUMBER: 0803-0019

DOB: 01/05/1978 UNIT NUMBER: K000999254

ORDERING PHYS: RENTSCHLER, LINDSEY M MD PT TYPE: REG CLI

DATE OF SERVICE: 08/03/13 ACCT NUM: N00001511208

MRI BRAIN WWO IV CONTRAST

MRI OF THE BRAIN AND PITUITARY WITHOUT AND WITH CONTRAST ENHANCEMENT

HISTORY: 35-YEAR-OLD WITH VISUAL CHANGES, HYPOGONADISM.

COMPARISON: NONE AVAILABLE.

TECHNIQUE: SAGITTAL T1, AXIAL FLAIR, AND AXIAL POSTCONTRAST T1-WEIGHTED MR ES THROUGH THE

ENTIRE BRAIN WITH THE UNEVENTFUL INTRAVENOUS ADMINISTRATION OF 15 ML CONTRAST.

ADDITIONAL THIN-SLICE SAGITTAL AND CORONAL PRE- AND POSTCONTRAST T1-WEIGHTED SERIES THROUGH THE PITUITARY GLAND.

FINDINGS: THE PITUITARY GLAND IS NORMAL SIZE WITH HOMOGENEOUS ENHANCEMENT.

BRAIN PARENCHYMA IS

NORMAL. VENTRICLES AND SULCI ARE NORMAL. THERE IS NO MIDLINE SHIFT OR MASS

Date/time	result	normal	units	comments
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8/3/2013

T. THERE IS NO EVIDENCE OF ACUTE INFARCT. NO ENHANCING LESIONS ARE IDENTIFIED. NO EXTRAAXIAL UID COLLECTIONS OR INTRACRANIAL HEMORRHAGE IS IDENTIFIED. THE CEREBELLAR TONSILS ARE NORMALLY IONED. NORMAL FLOW VOIDS ARE PRESENT IN THE BASILAR AND INTERNAL CAROTID ARTERIES AND SUPERIOR TTAL SINUS, INDICATING PATENCY. MILD MUCOUS MEMBRANE THICKENING IS PRESENT IN THE ETHMOID NUSES.

IMPRESSION: NORMAL PITUITARY WITH NO VISIBLE ETIOLOGY FOR THE PATIENT'S MS.

DICTATED BY: NICHOLAS W WICKERSHAM, MD

THIS REPORT WAS COMPILED USING A VOICE RECOGNITION DICTATION SYSTEM AND MAY TAIN TYPOGRAPHICAL ERRORS

D: 08/03/13 0909 T: GRAHAM.SU 08/03/13 0925
 ELECTRONICALLY SIGNED BY:WICKERSHAM,NICHOLAS W , MD
 CC: RENTSCHLER,LINDSEY M , MD

SEE NOTE

 ELECTRONICALLY SIGNED BY:
 CC:

7/12/2013

Boulder Endocrine - Logician

4:50 PM ACTH				
4:50 PM ACTH	22	()		PG/ML
-- REFERENCE VALUE --				
10-60 (A.M. COLLECTION)				
4:50 PM THYROID AB PR				
4:50 PM THYROPEROX AB	0.4	<9.0		IU/ML
4:50 PM THYRO AB SCR N	<20	<116		IU/ML

IF THYROGLOBULIN ANTIBODY MEASUREMENT IS PERFORMED TO ASSESS THE RELIABILITY OF THE THYROGLOBULIN ASSAY FOR THYROID CANCER PATIENT FOLLOW-UP, A THYROGLOBULIN ANTIBODY RESULT =/>22 IU/ML MAY RESULT IN FALSELY DECREASED THYROGLOBULIN VALUES.

THE THYROGLOBULIN ANTIBODY TESTING METHOD IS AN ELECTROCHEMILUMINESCENCE ASSAY MANUFACTURED BY ROCHE DIAGNOSTICS INC. AND PERFORMED ON THE MODULAR OR COBAS SYSTEM.

VALUES OBTAINED FROM DIFFERENT ASSAY METHODS OR KITS MAY BE DIFFERENT AND CANNOT BE USED

Date/time	result	normal	units	comments
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7/12/2013

INTERCHANGEABLY.

4:50 PM TESTOS TOT/FREE

4:50 PM FREE TESTOSTERO 12 9-30 NG/DL

TESTING PERFORMED BY EQUILIBRIUM DIALYSIS.

4:50 PM TESTOSTER TOTAL 362 240-950 NG/DL Goal 400-600 nM 2-9

TESTING PERFORMED BY LIQUID CHROMATOGRAPHY-TANDEM MASS SPECTROMETRY (LC-MS/MS).

4:49 PM METABLIC CMP

4:49 PM SODIUM 140 134-144 MEQ/L

4:49 PM POTASSIUM 4.5 3.5-5.2 MEQ/L

4:49 PM CHLORIDE 101 97-110 MEQ/L

4:49 PM CO2 29 22-31 MEQ/L

4:49 PM GLUCOSE 93 70-100 MG/DL

4:49 PM BUN 19 7-23 MG/DL

4:49 PM CREATININE 1.1 0.7-1.3 MG/DL

4:49 PM ESTIMATED GFR > 60

Electrolytes
- kidney

UNITS: ML/MIN/1.73 M2

IF PATIENT IS AFRICAN AMERICAN MULTIPY RESULT BY 1.212

4:49 PM CALCIUM 9.7 8.5-10.4 MG/DL

4:49 PM TOTAL PROTEIN 7.3 6.3-8.2 G/DL

4:49 PM ALBUMIN 4.4 3.5-5.0 G/DL

4:49 PM AST(SGOT) 30 17-59 IU/L

4:49 PM ALK PHOS 55 38-126 IU/L

4:49 PM BILI,TOTAL 0.3 0.1-1.4 MG/DL

4:49 PM ALT(SGPT) 50 21-72 IU/L

- liver
- liver
Liver

4:49 PM FREE T4

4:49 PM FREE T4 1.12 0.59-2.19 NG/DL

4:49 PM TSH

4:49 PM TSH 0.678 0.465-4.680 UIU/ML

4:49 PM CORTISOL-PM

4:49 PM CORTISOL-PM 5.2 1.7-14.1 UG/DL

4:49 PM LH

4:49 PM LH 7.39 NOT ESTABLISHED IU/ML

4:49 PM 25-OH VIT D

4:49 PM 25-OH VIT D L 24.3 25-80 NG/ML

SEVERE DEFICIENCY <10 NG/ML

MILD TO MODERATE DEFICIENCY 10-24 NG/ML

OPTIMAL LEVEL 25-80 NG/ML

TOXICITY POSSIBLE >80 NG/ML

30-80

2000 units - better dose
40-50 ideal range

HIGHLY LIPEMIC

*****THIS IS A CORRECTED REPORT*****

EDITED: 07/15/13 AT 0936

25-OH VIT D PREVIOUSLY REPORTED AS: 24.3 L NG/ML

REASON: LIPEMIA

SEVERE DEFICIENCY <10 NG/ML

MILD TO MODERATE DEFICIENCY 10-24 NG/ML

OPTIMAL LEVEL 25-80 NG/ML

Date/time	result	normal	units	comments
7/12/2013	TOXICITY POSSIBLE	>80	NG/ML	
11:53 AM	LIPID PANEL			
	ADD ON. COLLECTED 07/12/13.			
11:53 AM	CHOL	186	140-200	MG/DL
11:53 AM	TRIG	H > 525	40-150	MG/DL
	ADULT MALE TRIGLYCERIDE INTERPRETIVE TEXT			
	<150 MG/DL.....NORMAL			
	150-199 MG/DL.....BORDERLINE HIGH			
	200-499 MG/DL.....HIGH			
	> OR = 500 MG/DL...VERY HIGH			
11:53 AM	HDL	L 23	40-65	MG/DL
11:53 AM	LDL CALCULATED	TNP	70-100	MG/DL
	UNABLE TO CALCULATE LDL, VLDL, LDL/HDL RISK, AND LDL/HDL RATIO DUE TO HIGH TRIGLYCERIDE INTERFERENCE.			
11:53 AM	VLDL	TNP	8-25	MG/DL
11:53 AM	N-HDL CALCULATE	H 163	90-129	MG/DL
11:53 AM	CHOL/HDL RISK	H 2.0	0.2-1.0	
11:53 AM	LDL/HDL RISK	TNP	0.2-1.0	
11:53 AM	CHOL/HDL	H 8.09	1.00-4.97	RATIO
11:53 AM	LDL/HDL	TNP	1.00-3.64	RATIO
3/21/2013				Boulder Endocrine - Logician
4:49 PM	ferritin	122	30-400	ng/mL
4:49 PM	TSH	0.785	0.450-4.500	miU/mL
4:49 PM	prolactin	4.4	4.0-15.2	ng/mL
4:49 PM	testosterone, total	L 269	348-1197	ng/dL
4:49 PM	FSH	4.1	1.5-12.4	miU/mL
4:49 PM	lh	2.8	1.7-8.6	miU/mL
3/15/2013				Quest
	CBC			
	WBC	6.6	3.9-11.4	1000/L
	RBC	5.76	4.20-5.80	mil/uL
	HEMOGLOBIN	17.3	13.1-17.1	g/dL
	HEMATOCRIT	49.5	40-51	%
	MCV	86	80-100	fL
	MCH	30.0	27-34	pg
	MCHC	34.9	31-36	g/dL
	RDW	13.2	11.5-14.5	%
	MPV		6.6-11.0	fL
	PLATELET	168	140-400	thou/uL

↓ carbs, Alcohol

*Repeat when fasting -
- Fish oil / Flaxseed oil*

Good - will be low if TG are high