

Patient Results Report

PATIENT

Patient, Sample

DATE OF BIRTH


06/30/1994

PHYSICIAN

Physician, Sample

Sample Physician MD
 Sample Practice
 2250 W. Campbell Park Dr.
 Chicago, IL 60612

Current Test Overview

SAMPLE ID	RESULTS TURNAROUND (IN DAYS)	PATIENT COLLECTION DATE	LAB RECEIPT DATE	TEST COMPLETION DATE	SAMPLE BARCODE
S000000	2	08/03/2005	08/04/2005	08/06/2005	

Litholink's computer generated comments are based upon the patient's most recent laboratory results without taking into account concurrent use of medication or dietary therapy. They are intended solely as a guide for the treating physician. Litholink does not have a doctor-patient relationship with the individuals for whom tests are ordered, nor does it have access to a complete medical history, which is required for both a definitive diagnosis and treatment plan. Cys 24, Cys Capacity, Sulfate, and Citrate were developed and their performance characteristics determined by Litholink Corporation. It has not been cleared or approved by the US Food and Drug Administration.

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Pediatric Chemistry Data

Values larger, bolder and more towards red indicate increasing risk for kidney stone formation.

DATE	SAMPLE ID	SS CaOx	Ca 24 /Kg	Ox 24 /1.73m ²	Cit 24 /Cr 24	pH	UA 24 /1.73m ²	P 24 /Kg	Mg 24 /Kg	HEIGHT	WEIGHT
08/03/05	S147624	12.76	3.0	36.7	1028	6.115	0.40	15	1.6	154.9	43.5

ABBR.	ANALYTE	TREATMENT RECOMMENDATION
SS CaOx	Supersaturation CaOx	Reduce levels by raising urine volume and citrate, lowering urine oxalate and calcium. (J Urol 158:157, 1997)
Ca 24/Kg	24 hr calcium per Kg body weight	mg/kg; <3.7 both genders; if not associated with hypercalcemia consider thiazide diuretic. (Arch Dis Child 49:97, 1974)
Ox 24/1.73 m²	24 hr oxalate / 1.73 m2	mg/1.73 m ² /24 hr; high from diet excess, severe elevation consider genetic cause or bowel disease. (J Urol 158:157, 1997)
Cit 24/Cr 24	24 hr citrate / 24 hr creatinine	mg citrate/gr creat; male >130, female >300; if low consider potassium citrate. (J Pediatr 92:394, 1978)
pH	24 hr urine pH	Low pH can cause uric acid stones, treat with alkali; if>8 consider urea splitting infection. (J Urol 158:157, 1997)
UA 24/1.73 m²	24 hr uric acid / 1.73 m2	gram/1.73 m ² /24 hr; <0.81 both genders; high from diet or inborn errors of purine metabolism. (J Pediatr 92:911, 1978)
P 24/Kg	24 hr phosphorous / Kg body weight	mg/kg/24 hr; low in poor nutrition or bowel disease, high from diet intake especially dairy . (J Urol 158:157, 1997)
Mg 24/Kg	24 hr magnesium / Kg body weight	mg/kg/24 hr; low in poor nutrition or bowel disease. (J Urol 158:157, 1997)
Height	Height in cm	Obtained from treating physician or patient.
Weight	Body Weight in Kg	Obtained from treating physician or patient.

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Pediatric Normal Ranges

Chemistry	AGE	MALE MEAN	MALE SD	FEMALE MEAN	FEMALE SD
SS Ca0x	0 - 3.9	6.5	8.2	4.4	3.9
	4 - 6.9	6.2	4.7	4.1	3.2
	7 - 9.9	8.8	13.1	5.5	4.3
	10 - 12.9	7.0	6.2	5.5	4.6
	13 - 16	5.3	4.6	3.3	3.9
Ca 24/Kg	1 - 16	2.4	0.7	2.4	0.7
Ox24/1.73m2	0 - 3.9	35.4	22.7	30.4	17.7
	4 - 6.9	35.3	25.9	29.0	18.3
	7 - 9.9	28.2	11.1	30.4	21.5
	10 - 12.9	28.9	14.7	27.6	38.3
	13 - 16	30.1	24.3	28.2	21.6
Cit 24/Cr 24	1 - 16	457	164	681	191
pH	0 - 3.9	6.70	0.8	6.90	0.79
	4 - 6.9	6.45	0.67	6.50	0.4
	7 - 9.9	6.27	0.61	6.34	0.61
	10 - 12.9	6.38	0.54	6.38	0.88
	13 - 16	6.41	0.59	6.37	0.64
Ua24/1.73m2	1 - 16	0.52	0.15	0.52	0.15
P 24/Kg	0 - 3.9	24.4	7.5	13.8	7.0
	4 - 6.9	17	10.5	14.8	5.9
	7 - 9.9	16.4	7.4	14.3	7.2
	10 - 12.9	15.5	7.0	11.1	5.2
	13 - 16	13.3	8.1	13.1	6.9
Mg 24/Kg	0 - 3.9	2.1	1.1	1.7	1.1
	4 - 6.9	2.1	1.3	2.0	1.3
	7 - 9.9	2.1	1.2	2.0	1.3
	10 - 12.9	1.7	0.9	1.2	0.9
	13 - 16	1.3	1.5	1.2	0.6

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Stone Risk Factors / Cystine Screening: Negative (08/05/2005)

DATE	SAMPLE ID	Vol 24	SS CaOx	Ca 24	Ox 24	Cit 24	SS CaP	pH	SS UA	UA 24
08/03/05	S000000	0.78	12.76	131	29	668	2.20	6.115	0.65	0.320
NORMAL RANGE		0.5 - 4L	6 - 10	male <250 female <200	20 - 40	male >450 female >550	0.5 - 2	5.8 - 6.2	0 - 1	male <0.800 female <0.750

Dietary Factors

DATE	SAMPLE ID	Na 24	K 24	Mg 24	P 24	Nh4 24	Cl 24	Sul 24	UUN 24	PCR
08/03/05	S000000	89	40	70	0.652	17	89	19	4.40	0.8
NORMAL RANGE		50 - 150	20 - 100	30 - 120	0.6 - 1.2	15 - 60	70 - 250	20 - 80	6 - 17	0.8 - 1.4

Renal Function Normalized Values

DATE	SAMPLE ID	WEIGHT	Cr 24	Cr 24/Kg	C Cr	Ca 24/Kg	Ca 24/Cr 24
08/03/05	S000000	43.5	650	14.9		3.0	202
NORMAL RANGE				male 18-24 female 15-20	male >100 female >90	<4	<140

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Clinical Report

The clinical information shown below was obtained directly from your patient during our telephone interview, and, where possible, from medical records forwarded from your office.

Stone Morbidity	BEFORE TREATMENT	AFTER TREATMENT
First Stone Date:	06/08/2005	N/A
Total Stones:	2	0
ER Visits:	0	0
Hospital Visits:	0	0
Infections:	0	0
Cystoscopies:	1	0
Lithotripsies:	0	0
Operations:	0	0
Treatment Began:	N/A	11/02/2005

Family History

Father had stones:	No
Mother had stones:	No
Number of siblings:	1
Siblings with stones:	0
Number of children:	0
Children with stones:	0

Contributing Factors

Hot or dry environment:	No
Limited access to restroom:	No
Long term immobilization:	
Long term steroid therapy:	
Kidney removed:	

Surgical History

EVENT DATE

Dietary History

START

STOP

Medication History


DRUG (DOSE/DAY)

START

STOP

Related Diseases

DIAGNOSED

 = Before Treatment

 = After Treatment