

Specimen Number	Patient ID	Control Number	Account Number	Account Phone Number	Route
Patient Last Name			Account Address		
Patient First Name Alexei		Patient Middle Name			
Patient SS#	Patient Phone	Total Volume			
Age (Y/M/D) 8 y.o.	Date of Birth	Sex Male	Fasting Yes		
Patient Address			Additional Information		
Date and Time Collected	Date Entered	Date and Time Reported	Physician Name	NPI	Physician ID

Tests Ordered
CBC, Platelet Ct, and Diff ; Bleeding Panel ; Coagulation Factor Assays
General Comments

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
CBC, Platelet Ct, and Diff					
Hematocrit	30.2		%	30.9 - 37.0	07
Hemoglobin	10.1		g/dL	10.3 - 12.4	07
Red Blood Cell Count	4.1		x10E6/uL	4.10 - 5.00	07
White Blood Cell Count	9.2		x10E3/uL	6.2 - 14.5	07
RDW	nd		%	N/A	07
MCV	72.3		fL	70.5 - 81.2	07
MCH	24.4		pg	23.2 - 27.5	07
MCHC	33.8		g/dL	31.9 - 35.0	07
Imm.Granulocytes (Absolute)	3.8		x10E3uL	1.6 - 8.3	07
Granulocytes (Percent)	48.8		%	21.3 - 66.7	07
Eosinophils (Absolute)	nd		x10E3uL	NA	07
Eosinophils (Percent)	nd		%	0.0 - 3.3	07
Basophil (Absolute)	nd		x10E3uL	NA	07
Basophil (Percent)	nd		%	0 - 2	07
Monocytes (Absolute)	nd		x10E3uL	N/A	07
Monocytes (Percent)	nd		%	5 - 11	07
Lymphocytes (Absolute)	4.20		x10E3uL	1.9 - 6.8	07
Lymphocytes (Percent)	43.2		%	20 - 64	07
Platelets (Absolute)	219		x10E3uL	219 - 452	07
Bleeding Panel					
INR	7.2	Very High	sec	0.8 - 1.2	07
Prothrombin Time (PTT)	13.8		sec	9.5 - 13.8	07
Thrombin Time (TT)	14.3		sec	15 - 23	07
Act Partial Thrombopl Time	99.3	Very High	sec	26 - 36	07
Coagulation Factor Assays					
Coag Factor VIII, Assay	76		%	55 - 200	07
Coag Factor IX Assay	< 1	Very Low	%	65 - 140	07
von Willebrand Factor Ag	102		%	55 - 200	07
Factor VIII Inhib Prof	Normal coagulant activity, not performed.				07
Factor IX Inhib Prof	No evidence of a specific inhibitor.				07

PRELIMINARY INTERPRETATION:

A preliminary diagnosis of Hemophilia can be made based on high INR and APTT values. Virtually absent levels of Factor IX activity with negative results for the Factor IX Inhibitor further strengthen the diagnosis of the Hemophilia B sub-type also called "Hereditary factor IX deficiency disease". The extremely low value of Factor IX activity suggests a "Severe" phenotype.

PLEASE NOTE: There are well established pathogenic genetic variants that are strongly correlated with Hemophilia B. The presence of a hereditary disorder has consequences for family members. Genetic testing and counseling should be considered by the patient and family members.