



LABORATORY REPORT

QC ACCOUNT (WARDE)
300 W. TEXTILE
ANN ARBOR MI 48108

EXAMPLE, REPORT
WX0000003481 F 12/08/1988 34 Y

Referral Testing

Collected: 10/01/2021 12:00 Received: 10/01/2021 12:00

Table with 6 columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Row 1: Iodine/Creatinine Ratio, Random, Urine; Iodine Concentration Interpretation; SEE BELOW; MMRL

WORLD HEALTHCARE ORGANIZATION (WHO)
CRITERIA FOR ASSESSING IODINE STATUS

Children >6 Years Old and Adults:
<20 mcg/L - Insufficient intake, severe iodine deficiency
20-49 mcg/L - Insufficient intake, moderate iodine deficiency
50-99 mcg/L - Insufficient intake, mild iodine deficiency
100-199 mcg/L - Adequate intake, adequate nutrition
200-299 mcg/L - Above intake requirements, may pose a slight risk of more than adequate nutrition
>299 mcg/L - Excessive intake, risk of adverse health consequences

Pregnant Women:
<150 mcg/L - Insufficient intake
150-249 mcg/L - Adequate intake
250-499 mcg/L - Above requirements
>499 mcg/L - Excessive intake

Lactating Women:
<100 mcg/L - Insufficient intake
>99 mcg/L - Adequate intake

-----ADDITIONAL INFORMATION-----
This test was developed and its performance characteristics determined by Mayo Clinic in a manner consistent with CLIA requirements. This test has not been cleared or approved by the U.S. Food and Drug Administration.

Summary table with 5 columns: Test Name, Result, Ref-Ranges, Units, MMRL. Rows: Iodine Concentration (92, mcg/L, MMRL); Iodine/Creat Ratio, U (100, <584, mmol/mol Cr, MMRL); Creatinine, Random, U (92, 16 - 326, mg/dL, MMRL)

Test Performed by:
Mayo Clinic Laboratories - Rochester Superior Drive
3050 Superior Drive NW, Rochester, MN 55901
Lab Director: William G. Morice M.D. Ph.D.; CLIA# 24D1040592

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED



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Table with columns: Test Name, Result, Flag, Ref-Ranges, Units, Site. Includes 'Reported Date: 10/01/2021 12:02 IODCU' and 'Performing Site: MMRL: MAYO MEDICAL REFERENCE LAB 3050 Superior Drive NW Rochester MN 55901'.

LAB: L - LOW, H - HIGH, AB - ABNORMAL, C - CRITICAL, . - NOT TESTED

D001000014 Ordered By: CLIENT CLIENT
WX0000003481 WX00000000002063
Printed D&T: 12/01/23 08:25

Kajal V. Sitwala, MD, PhD - Medical Director
Form: MM RL1
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