



CARDIAC (HEART) HEALTH SCREEN

About This Test

The Cardiac (Heart) Health Screen, also known as a Lipid Panel, is a group of tests used to detect your risk of coronary artery disease, heart attack, or stroke.

Lipids are fats and fat-like substances found in the bloodstream and stored in body tissues. The screen measures: Total Cholesterol, LDL ("bad" cholesterol), HDL ("good" cholesterol), VLDL cholesterol, and Triglycerides.

What Should I Do With My Results?

It is always recommended that you meet with a doctor to determine what your laboratory test results mean to you. Your doctor will review all of your test results and, combined with your health history, will be able to provide an accurate picture of your health status.

If any of your results were abnormal or out-of-range: You could be at increased risk for coronary artery disease. As with any abnormal results, it's important that you discuss their implications with your physician.

If your results were within normal range: If all of your cardiac health screen test components were within normal range, you should follow the screening guidelines for your age and health status. The American Heart Association recommends that, beginning at age 20, your doctor should assess your risk for coronary artery disease. If your physician has assessed your risks of heart disease and your risks are not elevated, it is recommended that you be screened every five years.

How Do I Obtain My Results?

Results are available through our online patient portal, My Labs NowSM. Visit www.compunetlab.com to sign in or setup an account. Or text MYLABS to 66349. Follow The signup link in the text message you receive. Please be sure your name exactly matches the name on your lab test order. Contact help@luminatehealth.com if you need assistance. CompuNet is unable to provide verbal results to patients.

I Do Not Have a Regular Doctor. Where Can I Find One?

If you do not have a doctor, we recommend the following resources to locate one:

Premier Health Find a Doctor
(937) 684-4155 or 1-855-PREMIER
www.premierhealth.com/findadoc

WebMD Care
www.doctor.webmd.com

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Because tests have not been ordered by a physician, third-party entities, including Medicare and Medicaid, will not reimburse for these tests.



DIABETES SCREEN

About This Test

The Diabetes screen is a blood glucose test performed to detect diabetes or a pre-diabetic condition. Diabetes is a leading cause of death worldwide, particularly in developed countries. It is estimated that nearly one-third of all people with diabetes in the U.S. are not even aware they have the disease. Diabetes is caused by the body's inability to properly process glucose, a form of sugar found in your bloodstream, into energy.

What Should I Do With My Results?

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If any of your results were abnormal or out-of-range: Your abnormally high results may indicate that you have impaired fasting glucose (prediabetes) or diabetes. Abnormally low results can indicate hypoglycemia. As with any abnormal results, it's important that you discuss their implications with your physician.

If your results were within normal range: If your diabetes screen test result was within normal range, you should follow the screening guidelines as suggested by your physician for your age and health status. The American Diabetes Association recommends the following: (1) If you are at risk for Type 2 diabetes – begin at age 30 with fasting glucose test. Risk factors include: obesity, family history, ethnicity – African American, Hispanic American, Native American, or Asian American, gestational diabetes during pregnancy, high blood pressure, high triglycerides, high cholesterol, or low HDL. (2) If you are not at risk for Type 2 diabetes – begin testing by age 45 with fasting glucose, followed by tests every three years thereafter. (3) If you are pregnant, you should be screened for diabetes between your 24th and 28th week of pregnancy.

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PROSTATE SCREEN (PSA)

About This Test

PSA (prostate-specific antigen) is a protein made by the cells of the prostate. The routine PSA test measures the amount of prostate-specific antigen in the blood. Rising or changing levels of PSA may be a sign of a prostate problem, perhaps as serious as cancer. According to the American Urological Association, prostate cancer is the third leading cause of cancer death among men in the U.S. Prostate cancer may be effectively treated, if detected early. For the most accurate results, a PSA blood test should be combined with a physical exam by a doctor.

What Should I Do With My Results?

It is always recommended that you meet with a doctor to determine what your laboratory results mean to you. Your doctor will review all of your test results and, combined with your health history, he or she will be able to provide an accurate picture of your health status.

If your results are within normal range, you should consult with your physician for their recommendations on when you should be tested again. The American Cancer Society suggests men who are not at risk for prostate cancer should begin annual testing at age 50. African American men and men who are at greater risk for prostate cancer (those with a close relative who has had prostate cancer) should begin annual testing at age 45. Your physician is best suited to advise you on a timetable for all screening tests.

If your results are abnormal or out-of-range it may indicate the presence of prostate cancer. Please note that PSA levels increase with age even in cancer-free men, and an elevated PSA level does not necessarily mean cancer. It is important to share your PSA results with your physician so that your results can be further investigated. Generally, the results from a PSA blood test and a digital rectal exam (DRE) along with your age are considered when estimating the level of risk for prostate cancer. As with any abnormal results, it is important that you discuss their implications with your physician.

Test Information

CompuNet's Prostate Screen (PSA) testing methodology is immunoassay.



PROSTATE SCREEN (PSA)

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HIGH SENSITIVITY CRP (C-REACTIVE PROTEIN)

About This Test

The high sensitivity CRP (C-reactive protein) test, in conjunction with other testing recommended by your physician, could indicate heart / cardiovascular disease.

The level of hsCRP rises when there is inflammation throughout the body and has been shown to be an independent risk factor for coronary disease. Higher levels of C-reactive protein are usually associated with non-cardiac diseases and are typically measured by the CRP test not the hsCRP test. The CRP test does not diagnose specific disease but is a general marker for inflammation or infection.

What Should I Do With My Results?

It is always recommended that you meet with a doctor to determine what your laboratory test results mean to you. Your doctor will review all of your test results and, combined with your health history, he or she will be able to provide an accurate picture of your health status. The following are the levels of risk according to the American Heart Association/Centers for Disease Control guidelines:

Less than (<) 1.0 = Low cardiovascular risk

1.0 to 3.0 = Average cardiovascular risk

3.1 to 10.0 = High cardiovascular risk

Greater than (>) 10.0 = Persistent elevations may mean inflammation not related to cardiovascular disease.

Where do your results fall in this table?

It is important that you discuss your test results with your physician as soon as possible. Your high sensitivity CRP results could be an indication of heart / cardiovascular disease and your physician may schedule additional testing. A high sensitivity CRP test is just one screening test and, to understand your overall risk of heart/cardiovascular disease, you should discuss additional testing with your physician even though your high sensitivity CRP results may indicate a low risk.

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HEPATIC (LIVER) FUNCTION

About This Test

Hepatic (Liver) Function Panel – This panel includes a number of tests that provide a gauge for liver health. The panel includes tests for:

- Total protein – proteins are important for cells, tissues, and overall health.
- Albumin – a decreased level of albumin may be associated with malnutrition, liver disease, or kidney disease.
- Globulin – a group of proteins that act as carriers of small molecules. They also include enzymes, antibodies, and more than 500 other proteins.
- A/G Ratio – the ratio represents the relative amount of albumin and globulins.
- Bilirubin – abnormally high levels of bilirubin may indicate a liver function problem, bile duct blockage, or excessive destruction of red blood cells.
- AST (Aspartate aminotransferase) - an enzyme found mostly in the heart and liver. An abnormally high level can indicate liver damage.
- ALT (Alanine Aminotransferase)- an enzyme found mostly in the liver. ALT is released into the bloodstream when there is liver damage.
- Alkaline Phosphatase – a protein enzyme that helps cells work. When cells are destroyed, enzymes leak into the bloodstream. The levels of enzymes in the bloodstream rise in proportion to disease affecting the liver.

What Should I Do With My Results?

It is always recommended that you meet with a doctor to determine what your laboratory results mean to you. Your doctor will review all of your test results and, combined with your health history, he or she will be able to provide an accurate picture of your health status.

Hepatic (Liver) Function Panel

Abnormally high or abnormally low results could mean that liver damage or disease is present. As with any abnormal results, it's important that you discuss their implications with your physician.

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About This Test

Renal (Kidney) Function Panel – Healthy kidneys remove wastes and excess fluid from the blood and they play a major role in maintaining the right amount of bodily water and salts. Blood tests can show whether the kidneys are failing to remove wastes. Abnormally high or abnormally low levels can suggest kidney problems. The panel includes tests for:

- Electrolytes (sodium, potassium, chloride, carbon dioxide) – minerals that help maintain a healthy water balance and stable pH level.
- Waste products -BUN is a waste product excreted by the kidneys. A high result may indicate kidneys are not functioning properly. High levels of creatinine come from muscle breakdown and can also indicate kidney problems.
- Minerals – Calcium gives us bone strength and plays an important role in muscle contraction, blood clotting, and nerve function. Calcium is bound to albumin so a low albumin level will cause the total calcium level to drop. Your doctor can determine whether or not this is significant for you. Phosphorus is a mineral vital to energy production. It helps build bone, form cell membranes and genetic material.
- Estimated Glomerular Filtration Rate (eGFR) – the rate refers to the amount of blood that is filtered per minute. This is only an estimate and it's important to speak to a doctor about your result to determine if more tests are needed.

What Should I Do With My Results?

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Renal (Kidney) Function Panel

Abnormal kidney function can be an early sign of disease, and the Renal Function Panel may help in the early detection and prevention of disease. As with any abnormal results, it's important that you discuss their implications with your physician.



RENAL (KIDNEY) FUNCTION

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GLYCOHEMOGLOBIN A1C (HBA1C) WITH ESTIMATED AVERAGE GLUCOSE

About This Test

The Glycohemoglobin A1c or HbA1c test is important for diagnosis and monitoring of diabetes. To determine the average amount of sugar in the blood over a period of time – usually about the last 3 months.

These classifications apply to individuals who are not taking anti-hypertension drugs and who are not acutely ill. After an initial screening, your blood pressure should be classified based on the average of two or more readings at each of two or more follow-up visits.

Estimated Average Glucose If your wellness program includes use of a Health Risk Assessment tool, a glucose value is often requested. Your Estimated Average Glucose level value can be used for this data. Estimated Average Glucose (eAG) is a calculation that is used to relate the A1c value more directly to your glucose level. While the A1c level gives average blood glucose level over the past 2 to 3 months as a percent, the eAG uses mg/dL which is the same units used for your glucose level. This can be used for the glucose level in your Health Risk Assessment tool.

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It is always recommended that you meet with a doctor to determine what your laboratory test results mean to you. Your doctor will review all of your test results and, combined with your health history, he or she will be able to provide an accurate picture of your health status.

If your results were abnormal or out-of-range: Abnormal results could indicate that you are a diabetic, pre-diabetic or that your diabetes is not being controlled and you may be at risk for complications. The American Diabetic Association recommends that diabetics keep their A1c levels at less than 7% .¹ As with any abnormal results, it's important that you discuss their implications with your physician.

If your results were within normal range: Your test results can provide important information for your physician. Talk with your doctor about your results and how you can use them to help prevent diabetes.

If your results were in the Pre-diabetes range: Pre-diabetes -- blood glucose levels that are higher than normal but not yet high enough to be diagnosed as diabetes -- often leads to diabetes. Research has shown that some long-term damage to the body, especially the heart and circulatory system, may already be occurring during pre-diabetes. Fortunately, there are things you can do to prevent or delay the development of type 2 diabetes.

Your doctor can guide you on how to avoid diabetes when you share your lab test results.



**GLYCOHEMOGLOBIN
A1C (HBA1C) WITH
ESTIMATED AVERAGE
GLUCOSE**

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