



Requisition #:	9900001	Physician Name:	NO PHYSICIAN
Patient Name:	Sample	Date of Collection:	11/25/2021
Patient Age:	40	Time of Collection:	10:00 AM
Sex:	F	Print Date:	12/1/2021

## Vitamin D 25 OH

bolic Marker	Reference Range - ng/mL	Patient Value - ng/mL	
25-Hydroxy D2		5.0	
25-Hydroxy D3		6.0	
25-Hydroxy D Total (D2+D3)	40 - 80	7.0 *	
<10 ng/mL severe deficience	'y*		
10-39 ng/mL mild to modera	ate deficiency**		
40-80 ng/mL optimum level	s***		
81-150 ng/mL toxicity possi	ble****		
>150 ng/mL toxic levels ***	***		
* Could be associa	ted with osteomalacia or rickets		
** May be associate	May be associated with increased risk of osteoporosis or secondary hyperparathyroidism		
*** Optimum levels ir	otimum levels in the normal population		
	ng/mL is the lowest reported level associated with toxicity in patients without primary perparathyroidism who have normal renal function.		
very high 25-OH-	patients with toxicity have levels >150ng/mL. Patients with renal failure can have gh 25-OH-VitD levels without any signs of toxicity, as renal conversion to ve hormone 1, 25-OH-VitD is impaired or absent.		
rather than population-b widely depending on eth sampling-season. Popula	ased reference values. Population nic background, age, geographic loca tion-based ranges correlate poorly	apply to males and females of all ages, reference ranges for 25-OH-VitD vary tion of the studied populations, and the with serum 25-OH-VitD concentrations hin D effects and are therefore of limited	
Testing performed at Quest	Diagnostics Nichols Institute, Valencia, C	A	