

White Oak Urgent Care
A Division of White Oak Family Physicians, P.A.

608 W. Academy Street
Randleman, NC 27317
Phone: (336) 495-1001
Fed ID#: 56-1589160

197-B Hwy. 42 North
Asheboro, NC 27203
Phone: (336) 625-2560
Fed ID#: 56-1589160

DMJ

ALLERGIES:

NKDA

MEDICATIONS:

∅

PAST HISTORY:

Migraine
R Shoulder ~~Sw~~ L Arm ~~Sw~~
Low thyroid, Nerve damage
Gradual scatic

PERSONAL MD:

∅

SMOKER: Y (N) Chews tobacco

Denies EVDU; Occas. ETOH

BP 138/76 P 96 R 16 T 99.4 WT 272.4

Present Illness:

fatigue, low energy - was sent home from work because of paleness & Tittery. x 2 months. Also feels like he's "over-heating", 3240 ⁰ feeling fatigued - had thyroid tested 2 mos. ago. Temperature 97.02 sensitive. Some nausea & occas. vomiting. Issues for months.

ROS	nl	See note	
Constitutional	<input type="checkbox"/>	<input type="checkbox"/>	Fever Chills <u>Malaise</u> Irritable Weight Loss / Gain Sweats Muscle aches <i>Had syncope = 2 mos. ago.</i>
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	Drainage Blurred vision Pain Light sensitivity Injection Itch Swelling Foreign body Double vision <i>known tick bites.</i>
Ears	<input type="checkbox"/>	<input type="checkbox"/>	Drainage Erythema Pain to touch Tinnitus Decreased hearing Foreign body Swelling Redness Pressure
Nose	<input type="checkbox"/>	<input type="checkbox"/>	Drainage Sneezing Bleeding Congested Foreign body Facial pain / pressure
Mouth	<input type="checkbox"/>	<input type="checkbox"/>	Dental pain Swelling Bleeding Sore tongue Swollen gums
Throat	<input type="checkbox"/>	<input type="checkbox"/>	Pain Redness White patches Swelling Difficulty swallowing Hoarseness PND
Neck	<input type="checkbox"/>	<input type="checkbox"/>	Swelling Pain Stiffness Glands swollen
Lungs	<input type="checkbox"/>	<input type="checkbox"/>	Cough Wheeze Short of breath Rattle Pain on breathing Sputum: White / Yellow / Green / Bloody Congestion / Brown
Cardiac	<input type="checkbox"/>	<input type="checkbox"/>	Chest pain Pressure Palpitations Irregular heart beat Passing out
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	Nausea Vomiting <u>Diarrhea</u> <u>Bloody Stools</u> <u>Pain</u> Cramps Constipation LBN: Black Stools / Hematois
GU	<input type="checkbox"/>	<input type="checkbox"/>	Urine frequency <u>Blood in urine</u> <u>Painful urination</u> Decreased urination Odor to urine Sores Rash Discharges Painful Sex Painful Genitals CVA pain
LMP	<input type="checkbox"/>	<input type="checkbox"/>	Urinary pressure Urinary hesitancy Incontinence
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	Pain / Swelling / Trauma to Neck Back Leg Arm Chest wall Ribs Hand wrist Shoulder Elbow Forearm Head Hip Pelvis Knee Leg Ankle Foot
Skin	<input type="checkbox"/>	<input type="checkbox"/>	Itching Hives Rash Burn Bruises Laceration Abscess / Abrasion / Bite
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	Headache <u>Dizziness</u> Numbness Tingling Problems walking / talking / seeing Seizing Weakness
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	Itching Hives Sneeze Watery eyes Wheeze
Hematological	<input type="checkbox"/>	<input type="checkbox"/>	Bruising Bleeding Hives
Endocrine	<input type="checkbox"/>	<input type="checkbox"/>	Excessive thirst / urination Night time thirst / urination Weight gain / loss
Psychiatric	<input type="checkbox"/>	<input type="checkbox"/>	Anxiety Panic attack Depression Sleep disturbance Tired Agitation Hallucination Suicidal Homicidal
Breast	<input type="checkbox"/>	<input type="checkbox"/>	Lump Discharge Pain

DATE	TIME	PATIENT	REASON	PRIOR BALANCE	UNABLE TO OBTAIN COMPLETE HPI, PMH, FH, SH OR ROS DUE TO: Altered Mental Status Dementia Medical Urgency Other:	
6/28/19	8:55 am	Brandon W Embry	fatigue/weak			
TICKET NO.	DR.#	DOCTOR	LOCATION	D.O.B.		TODAY'S CHARGE
13512130		Davis, Devon L	RANDLEMAN UC	09/07/1986		
PATIENT NO.	RESPONSIBLE PARTY		PH.#	REFERRING DR.	PRESCRIPTION MED.	
1358100	Brandon W Embry		4252993993			
M	F	M	711 S Church Street	Asheboro NC 27203	TODAY'S PAYMENTS	
		ADDRESS		CITY/STATE ZIP CODE		
RECA	INS BAL:	\$0.00	SELF-PAY BAL:	\$0.00		
COVER 90	OVER 60	OVER 30	CURRENT	TOTAL DUE	PT	
CIGNA	Y	U7197079601	3341455	RELATIONSHIP TO INSURED	BALANCE DUE	
0 cop.				S E L F P A Y C H O I C E		
INSURANCE COMPANY	BA	SCT	POLICY I.D.	S P H I L E R		



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EXAM	nl	See note		LAB / Xray
Constitutional	<input type="checkbox"/>	<input type="checkbox"/>	Toxic Non-toxic Comfortable <u>Uncomfortable</u> Alert Irritable Ill-appearing Non-Cooperative Playful	LAB / Xray
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	<u>PERFL</u> EOM Clear Injected Sunken Drainage Lids swollen	
Ent.	<input type="checkbox"/>	<input type="checkbox"/>	Ears: Normal Right / Left TM Red Perforated Bulging Fluid Swollen Canals Nose: <u>Normal</u> Congested Boggy turbinates Clear drainage Purulent drainage Epistaxis Throat: <u>Normal</u> Erythema Swollen Purulent Large tonsils Swollen uvula Deviation Face: Pressure / Tenderness Sinuses Mouth: Gums Teeth	
Neck	<input type="checkbox"/>	<input type="checkbox"/>	<u>Supple</u> Meningismus Abnormal thyroid Anterior lymph nodes Posterior lymph nodes PND	
Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	<u>Normal</u> Wheeze Rales Flare Retractions Stridor Tachypnic	
CV	<input type="checkbox"/>	<input type="checkbox"/>	<u>Normal</u> Irregularity Murmur Gallop Peripheral pulses	
Breast	<input type="checkbox"/>	<input type="checkbox"/>	Normal Lump / Mass Inverted nipple Erythema Discharge	
Abdomen	<input type="checkbox"/>	<input type="checkbox"/>	<u>Soft</u> tenderness <u>mild</u> Bowel sounds <u>+</u> Guarding Rebound Rovsing's Psoas Obturator	
GU	<input type="checkbox"/>	<input type="checkbox"/>	Male: Testis descended Normal scrotum Epididymal tenderness Testicle abnormality Female: External genitalia normal CMT Adnexal tenderness Cervix Normal / Abnormal F discharge CVA tenderness	
Neurological	<input type="checkbox"/>	<input type="checkbox"/>	<u>A&O x 4</u> Dementia Rhomburg Drift Symmetry Sensation / FTN intact	
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	Tenderness Deformity Location Strength / Edema / Swelling	
Allergic / Immun	<input type="checkbox"/>	<input type="checkbox"/>	Allergic shiners Hives Lymph node enlargement	
Endocrine	<input type="checkbox"/>	<input type="checkbox"/>	Thyroid enlargement Cushing noid features <u>Thyroid tender to palpation on exam</u>	
Psychiatric	<input type="checkbox"/>	<input type="checkbox"/>	Speech Thought process Appearance Suicidality Homicidality Hallucinations	
Skin	<input type="checkbox"/>	<input type="checkbox"/>	Vesicles Abrasions Pink Cyanosis Petechia Cellulitis Boil Bruising / Laceration / Rash	
All Others	<input type="checkbox"/>	<input type="checkbox"/>		

Ur. dip to. LE, to. bl.

BG 36-101

EKG - NSR @ 79, Φ arrhythmia, Φ acute ST-T A's

CBC

CMP

Thyroid panel

Amry

Lip

Lyme

RMSF

Ur. cx

} sent to
outpt lab

Assessment: Fatigue / Weakness

Treatment Plan: To lab for full blood work

A. to hydrate well.

Needs PCP - given # for WOFF.

Off work rest of today.

Return if needed Follow up with

WOFF

in asap days / weeks

Instruction sheet given

Signature

D. Davis, MD

Reason

Ticket No.

Dr. #

Doctor

Location

D.O.B.

Date 06/23/19 Time Patient

Brandon Embry



Patient Report

Specimen ID: 179-860-0674-0
 Control ID: 2924995811

Acct #: 32308700 Phone: (336) 625-5151 Rte: 15
 Randolph Health
 Interface Account Only
 364 White Oak Street
 Asheboro NC 27203

EMBRY, BRANDON W.
 711 SOUTH CHURCH ST APT A
 ASHEBORO NC 27203
 (425) 299-3993



Patient Details
 DOB: 09/07/1986
 Age(y/m/d): 032/09/21
 Gender: M SSN: ***.**-9943
 Patient ID: T0-B2018100515093722

Specimen Details
 Date collected: 06/28/2019 1310 Local
 Date received: 06/28/2019
 Date entered: 06/28/2019
 Date reported: 07/02/2019 0536 ET

Physician Details
 Ordering: D Davis
 Referring:
 ID: DAVDEV
 NPI:

General Comments & Additional Information

This is a courtesy copy of a laboratory report.

Clinical Info: Comment CALL REPORT TO 336
Clinical Info: -495-1001. FAX @336-495-10
Clinical Info: 05 Comment

Alternate Control Number: 062819:RL39

Alternate Patient ID: A00047950346

Ordered Items

Rky(IgG/M); Lyme Ab/Western Blot Reflex; H. pylori, IgG Abs

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Rky (IgG/M)					
RMSF, IgG, EIA	Negative			Negative	01
Rocky Mtn Spotted Fever, IgM	0.45		index	0.00 - 0.89	01
			Negative	<0.90	
			Equivocal	0.90 - 1.10	
			Positive	>1.10	
Lyme Ab/Western Blot Reflex					
Lyme IgG/IgM Ab	<0.91		ISR	0.00 - 0.90	01
			Negative	<0.91	
			Equivocal	0.91 - 1.09	
			Positive	>1.09	
Lyme Disease Ab, Quant, IgM	<0.80		index	0.00 - 0.79	01
			Negative	<0.80	
			Equivocal	0.80 - 1.19	
			Positive	>1.19	
IgM levels may peak at 3-6 weeks post infection, then gradually decline.					
H. pylori, IgG Abs	<0.80		Index Value	0.00 - 0.79	01
			Negative	<0.80	
			Equivocal	0.80 - 0.89	
			Positive	>0.89	

01 BN LabCorp Burlington 1447 York Court, Burlington, NC 27215-3361 Dir: Sanjai Nagendra, MD

For inquiries, the physician may contact Branch: 800-762-4344 Lab: 800-762-4344

7-2-19 @ 8:33am - ktt um. jmcm4 -
 7-2-19 @ 9:38 am pt notified. jmcm4 -

*Call AT
 negative RMSF + Lyme
 follow up with primary care
 or ER if not improved*

Date Issued: 07/02/19 0536 ET

COURTESY COPY FINAL REPORT

Page 1 of 1

This document contains private and confidential health information protected by state and federal law.
 If you have received this document in error, please call - -

Randolph Health Laboratory
 364 White Oak Street, Asheboro, NC 27203

RUN DATE: 07/02/19
 RUN TIME: 0700

OUTPATIENT SPECIMEN REPORT

PAGE 1

PATIENT: EMBRY, BRANDON W ACCT: A00047950146 LOC: LAB U: M000548DD5
 AGE/SEX: 32/M ROOM: REQ: 06/28/19
 REG DR: Davis, Devon MD DOB: 09/07/1986 BED: DIA:
 STATUS: REG REF TLOC:

SPEC #: 0628:C001155 COLL: 06/28/19-1310 RECD: 06/28/19-1315 COMP REQ #: 01641463
 ORD DR: Davis, Devon MD
 PRIMARY DR: Primary Care MD not Ident
 COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005
 Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005

 * C H E M I S T R Y *

 * P R O F I L E S & B A S I C C H E M I S T R I E S *

TESTS	RESULTS	FLAG	REFERENCE RANGE
> SODIUM	141		137-146 mEq/L
> POTASSIUM	4.0		3.5-5.1 mEq/L
> CHLORIDE	108	H	98-107 mEq/L
> CO2	22		22-33 mMOL/L
> GLUCOSE	147	H	70-99 mg/dL
> BUN	15		9-20 MG/DL
> CREATININE	0.90		0.66-1.25 MG/DL
> eGFR	> 60		>=60 mL/min
> ANION GAP	15		8-16 mEq/L
> CALCIUM	9.2		8.4-10.2 MG/DL
> ALBUMIN	4.2		3.5-5.0 G/DL
> TOTAL PROTEIN	6.7		6.3-8.2 G/DL
> AMYLASE	45		30-110 IU/L
> T BILI (AGE>14DAYS)	0.6		0.2-1.3 MG/DL
> SGOT (AST)	45		17-59 IU/L
> SGPT (ALT)	47		21-72 IU/L
> ALKALINE PHOSPHATASE	68		38-126 IU/L
> OSMOLALITY (calc.)	275		270-290 MOs/Kg

 * C A R D I A C M A R K E R S *

TESTS	RESULTS	FLAG	REFERENCE RANGE
> CPKMB	7.9	H	0-4.5 ng/mL
	This value supports evidence of possible myocardial damage. < 4.5 NEGATIVE (NL) 4.5 - 7.0 GRAY ZONE (GZ) > 7.0 POSITIVE		
> RELATIVE % INDEX > TROPONIN-I	1.7		0.0-2.2
	< 0.01		<.04 ng/mL
	< 0.04 ng/mL	Negative	
	0.04 - 0.40 ng/mL	Gray Zone	
	> 0.40 ng/mL	Positive	
	This value typically indicates the		

Randolph Health Laboratory
364 White Oak Street, Asheboro, NC 27203

OUTPATIENT SPECIMEN REPORT

RUN DATE: 07/02/19
RUN TIME: 0700

PAGE 2

Patient: EMBRY, BRANDON W #A00047950346 Location: LAB (Continued)

Specimen: 0628:C00115S Cell: 06/28/19-1310 REQ #: 01641463 (Continued)

absence of myocardial damage.

***** CHEMISTRY *****
(continued)

* MISCELLANEOUS CHEMISTRIES *

TESTS	RESULTS	FLAG	REFERENCE RANGE
THYROID PANEL			
> LIPASE	58 Report called to URGENT CARE on 06/28/19 at 1716 by HUSAM. Report given to .		23-300 U/L
> hTSH	0.50		0.5-4.67 uIU/mL
> FREE T4	0.84		0.78-2.19 ng/dL
> FREE T3	3.94		2.77-5.27 pg/mL
> CPK TOTAL WITH POSSIBLE MB	464	H	55-170 IU/L

Randolph Health Laboratory
364 White Oak Street, Asheboro, NC 27203
OUTPATIENT SPECIMEN REPORT

RUN DATE: 07/02/19
RUN TIME: 0700

PAGE 3

PATIENT: EMBRY, BRANDON W ACCT: A00047950346 LOC: LAB U: H000548DD5
AGE/SX: 32/M ROOM: STD: 06/28/19
REG DR: Davis, Devon MD DOB: 06/07/1986 BED: DIA:
STATUS: REG REF TLOC:

SPEC #: 0628:H000855 COLL: 06/28/19-1310 RECD: 06/28/19-1315 COMP REQ #: 01641463
ORD DR: Davis, Devon MD
PRIMARY DR: Primary Care MD not Ident
COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005

* H E M A T O L O G Y *

TESTS	RESULTS	FLAG	REFERENCE RANGE
> WHITE BLOOD COUNT	8.4		3.8-10.8 xk/uL
> RED BLOOD COUNT	4.56	L	4.70-6.10 xM/uL
> HEMOGLOBIN	14.2		14.0-18.0 g/dL
> HEMATOCRIT	42.1		42-52 %
> MCV	93		80-94 fL
> MCH	31.2		27-32 pg
> MCHC	33.8		33-36 g/dl
> RDW	13.9		11.5-14.5 %
> PLATELET COUNT	234		130-400 xk/uL
> MPV	7.4		7.4-10.4 fL
> NEUTR (AUTO)	62.9		45-76 %
> LYMPH (AUTO)	30.4		17-44 %
> MONO (AUTO)	5.4		3-10 %
> EOS (AUTO)	0.8		0-5 %
> BASO (AUTO)	0.5		0-2 %
> ANC (ABS NEUT CT)	5.21		1.7-8.2 xk/uL
> ALC (ABS LYMPH CT)	2.52		0.65-4.75 xk/uL

Report called to URGENT CARE on 06/28/19 at 1716
by HUSAM. Report given to [DR.DAVIS].

Randolph Health Laboratory
 364 White Oak Street, Asheboro, NC 27203
 OUTPATIENT SPECIMEN REPORT

RUN DATE: 07/02/19
 RUN TIME: 0700

PATIENT: EMERY, BRANDON N	ACCT: R00047950346	LOC: LAB	U: M000549905
REG DR: Davis, Devon MD	AGE/SX: 32/M	ROOM:	REQ: 06/28/19
	DOB: 09/07/1986	BED:	DIS:
	STATUS: REG REF	TLOC:	

SPEC #: 0628:RL00039S COLL: 06/28/19-1310 RECD: 06/28/19-1315 COMP REQ #: 01641463
 ORD DR: Davis, Devon MD
 PRIMARY DR: Primary Care MD not Ident
 COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005
 Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005
 Specimen Comment: A courtesy copy of this report has been se
 Specimen Comment: 336-495-1005.

** S E N D O U T S **

TEST	RESULT	FLAG	REFERENCE RANGE
> H. PYLORI IgG, ABS	< 0.80		0.00-0.79
	Result Units: Index Value		
		Negative	<0.80
		Equivocal	0.80 - 0.89
		Positive	>0.89
	Performed at: BN - LabCorp Burlington 1447 York Court, Burlington, NC 272153361 Lab Director: Sanjai Nagendra MD, Phone: 8007624344		
LYME ANTIBODIES			
> LYME Ab IgG/IgM	< 0.91		0.00-0.90 ISR
		Negative	<0.91
		Equivocal	0.91 - 1.09
		Positive	>1.09
> LYME Ab IgM	< 0.80		0.00-0.79 index
		Negative	<0.80
		Equivocal	0.80 - 1.19
		Positive	>1.19
	<i>IgM levels may peak at 3-6 weeks post infection, then gradually decline.</i>		
RMSF, IGG AND IGM			
> RMSF, IgG	Negative		Negative
> RMSF, IgM	0.45		0.00-0.89 index
		Negative	<0.90
		Equivocal	0.90 - 1.10
		Positive	>1.10

Randolph Health Laboratory
364 White Oak Street, Asheboro, NC 27203
OUTPATIENT SPECIMEN REPORT

RUN DATE: 07/02/19
RUN TIME: 0700

PAGE 5

PATIENT: EMBRY, BRANDON W	ACCT: A00047950346	LOC: LAB	U: M000548005
AGE/SX: 32/M	DOB: 09/07/1986	ROOM:	REQ: 06/28/19
REQ DR: Davis, Devon MD	STATOS: REG REF	TLOC:	

SPEC #: 0628:S00007S COLL: 06/28/19-1310 RECD: 06/28/19-1315 COMP REQ #: 01641463
 ORD DR: Davis, Devon MD
 PRIMARY DR: Primary Care MD not Ident
 COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005

 * S E R O L O G Y *

TESTS	RESULTS	FLAG	REFERENCE RANGE
> MONOSPOT	NEG		NEGATIVE

Report called to URGENT CARE on 06/28/19 at 1716
 by HUSAM. Report given to [DR.DAVIS].

Randolph Health Laboratory
 364 White Oak Street, Asheboro, NC 27203

RUN DATE: 06/28/19 LABORATORY ***** S P E C I M E N ***** STATRESULTS
 RUN TIME: 1331

PAGE 1

PATIENT: EMBRY, BRANDON W ACCT #: A00047950346 LOC: LAB U I: M000540005
 AGE/SX: 32/M ROOM: REC: 06/28/19
 REG DR: Davis, Devon MD DOB: 09/07/1986 BED: DTS:
 STATUS: REG REF TLOC:

SPEC #: 0628:0000855 COLL: 06/28/19-1310 STATUS: COMP REQ #: 01641463
 RECD: 06/28/19-1315 SUBM DR: Davis, Devon MD
 VFX: 06/28/19-1324 PRIMARY DR: Primary Care MD not Ident
 ENTERED: 06/28/19-1300 OTHER DR:
 ORDERED: CBC w/DIFF
 COMMENTS: Comment CALL REPORT TO 336 495 1001. FAX @336-495-1005

Test	Result	Flag	Reference	Site
> WHITE BLOOD COUNT	0.4		3.6-10.8 xk/uL	
> RED BLOOD COUNT	4.56	J	4.70-6.10 xM/uL	
> HEMOGLOBIN	14.2		14.0-18.0 g/dL	
> HEMATOCRIT	42.1		42-52 %	
> MCV	93		80-94 fL	
> MCH	31.2		27-32 pg	
> MCHC	33.0		33-36 g/dL	
> RDW	13.9		11.5-14.5 %	
> PLATELET COUNT	234		130-400 xk/uL	
> MPV	7.4		7.4-10.4 fL	
> NEUTR (AUTO)	62.9		45-76 %	
> LYMPH (AUTO)	30.4		17-44 %	
> MONO (AUTO)	5.4		3-10 %	
> EOS (AUTO)	0.8		0-5 %	
> BASO (AUTO)	0.5		0-2 %	
> ANC (ABS NEUT CT)	5.21		1.7-8.2 xk/uL	
> ALC (ABS LYMPH CT)	2.52		0.65-4.75 xk/uL	

6/28/19 6:30 PM : Spoke to patient to review lab results. Nothing that sticks out as obvious cause of his Sx's. Thyroid is borderline low. CPX st elevated - recommended the hydration. Trop @
 BG st elevated but non-fasting.
 Pat is to call WOFF on Mon. Am to schedule appt. to new PCP (recently moved here from Seattle.)
 - Lyme, RMSF still (P); Ur. Dx (P)

DD
 6/28/19

Patient: EMBRY, BRANDON W Age/Sex: 32/M Acct#A00047950346 Unit#M000540005

Specimen ID: 179-197-4028-0
Control ID: B0091470071

Acct #: 32359885 Phone: (336) 495-1001 Rte: 05
White Oak Urgent Care of
Randleman
608 West Academy Street
Randleman NC 27317



EMBRY, BRANDON W.
711 S CHURCH ST APT A
ASHEBORO NC 27203
(425) 299-3993

Patient Details
DOB: 09/07/1986
Age(y/m/d): 032/09/21
Gender: M SSN:
Patient ID: 1358100

Specimen Details
Date collected: 06/28/2019 1106 Local
Date received: 06/28/2019
Date entered: 06/28/2019
Date reported: 06/30/2019 0636 ET

Physician Details
Ordering: D DAVIS
Referring:
ID:
NPI: 1588764161

General Comments & Additional Information
Clinical Info: SRC:UR Urine

Alternate Control Number: B0091470071

Alternate Patient ID: 1358100

Ordered Items
Urine Culture, Routine

TESTS	RESULT	FLAG	UNITS	REFERENCE INTERVAL	LAB
Urine Culture, Routine					
Urine Culture, Routine					
Final report					01
Result 1					
No growth					01

01	BN	LabCorp Burlington 1447 York Court, Burlington, NC 27215-3361	Dir: Sanjai Nagendra, MD
----	----	--	--------------------------

For inquiries, the physician may contact Branch: 800-762-4344 Lab: 800-762-4344

*6/30/19 @ 10:37am
NO answer, Lm
e1/kma*

*- No growth in urine cx
Continue plan as recommended
Bauer
6/30/19.
6/30/19 pt answer
BD*

Randolph Health Laboratory
 364 White Oak Street, Asheboro, NC 27203

RUN DATE: 06/28/19 LABORATORY ***** S P E C I M E N ***** STATRESULTS
 RUN TIME: 1345

PATIENT: EMBRY, BRANDON W	ACCT #: A00047950346	LOC: LAB	U #: M000548005
REG DR: Davis, Devon MD	AGE/SX: 32/M	ROOM:	REG: 06/28/19
	DOB: 09/07/1986	BED:	DIS:
	STATUS: REG REF	TLOC:	

SPEC #: 0628:S00007S	COLL: 06/28/19-1310	STATUS: COMP	REQ #: 01641463
	RECD: 06/28/19-1315	SUBM DR: Davis, Devon MD	
ENTERED: 06/28/19-1300	VFY: 06/28/19-1336	PRIMARY DR: Primary Care MD not Ident	
ORDERED: MONOSPOT		OTHER DR:	
COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005			

Test	Result	Flag	Reference	Site
> MONOSPOT	NEG		NEGATIVE	

Patient: EMBRY, BRANDON W	Age/Sex: 32/M	Acct#A00047950346 Unit#M000548005
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Randolph Health Laboratory
364 White Oak Street, Asheboro, NC 27203

RUN DATE: 06/28/19 LABORATORY ***** S P E C I M E N ***** STATRESULTS
RUN TIME: 1700

PAGE 1

PATIENT: EMBRY, BRANDON W	ACCT #: A00047950346	LOC: LAB	U #: M000548005
REG DR: Davis, Devon MD	AGE/SX: 32/M	ROOM:	REG: 06/28/19
	DOB: 09/07/1986	BED:	DIS:
	STATUS: REG REF	TLOC:	

SPEC #: 0628:C00115S COLL: 06/28/19-1310 STATUS: COMP REQ #: 01641463
 RECD: 06/28/19-1315 SUBM DR: Davis, Devon MD
 VEY: 06/28/19-1648 PRIMARY DR: Primary Care MD not Ident
 ENTERED: 06/28/19-1300 OTHER DR:
 ORDERED: THPA, COMP METABOLIC, CPK, CPKMB, RELATIVE INDEX, TROPONIN-I, AMY, LIPAS
 COMMENTS: Comment CALL REPORT TO 336-495-1001. FAX @336-495-1005
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Test	Result	Flag	Reference	Site
THYROID PANEL				
> hTSH	0.50		0.5-4.67 uIU/mL	
FREE T4	0.84		0.78-2.19 ng/dL	
FREE T3	3.94		2.77-5.27 pg/mL	
SODIUM	141		137-146 mEq/L	
POTASSIUM	4.0		3.5-5.1 mEq/L	
CHLORIDE	108	H	98-107 mEq/L	
CO2	22		22-33 mmOL/L	
GLUCOSE	147	H	70-99 mg/dL	
BUN	15		9-20 MG/DL	
CREATININE	0.90		0.66-1.25 MG/DL	
eGFR	> 60		>=60 mL/min	
ANION GAP	15		8-16 mEq/L	
CALCIUM	9.2		8.4-10.2 MG/DL	
ALBUMIN	4.2		3.5-5.0 G/DL	
TOTAL PROTEIN	6.7		6.3-8.2 G/DL	
CPK TOTAL WITH POSSIBLE MB	464	H	55-170 IU/L	
CPKMB	7.9	H	0-4.5 ng/mL	
	<i>This value supports evidence of possible myocardial damage.</i>			
	< 4.5 NEGATIVE (NL)			
	4.5 - 7.0 GRAY ZONE (GZ)			
	> 7.0 POSITIVE			
RELATIVE % INDEX	1.7		0.0-2.2	
TROPONIN-I	< 0.01		<.04 ng/mL	
	< 0.04 ng/mL		Negative	
	0.04 - 0.10 ng/mL		Gray Zone	
	> 0.40 ng/mL		Positive	
	<i>This value typically indicates the absence of myocardial damage.</i>			
AMYLASE	45		30-110 IU/L	
T BILI (AGE>14DAYS)	0.6		0.2-1.3 MG/DL	
SGOT (AST)	45		17-59 IU/L	
SGPT (ALT)	47		21-72 IU/L	
ALKALINE PHOSPHATASE	68		38-126 IU/L	
OSMOLALITY (calc.)	275		270-290 MOs/Kg	

Patient: EMBRY, BRANDON W Age/Sex: 32/M Acct#A00047950346 Unit#M000548005

Randolph Health Laboratory
 364 White Oak Street, Asheboro, NC 27203

RUN DATE: 06/28/19 LABORATORY ***** S P E C I M E N ***** STATRESULTS PAGE 2
 RUN TIME: 1700

SPEC: 0628:C00115S		PATIENT: EMBRY, BRANDON W		A00047950346 (Continued)	
Test		Result	Flag	Reference	Site
LYPASE		58		23 300 U/L	

Patient: EMBRY, BRANDON W Age/Sex: 32/M Acct#A00047950346 Unit#M000548005

mtx (2)

White Oak Urgent Care

608 W. Academy Street

Randleman, NC 27317

Phone: (336) 495-1001

Name Brandon Embry

Date/Time 06/28/19

Physician DD

Chart # 1358100 09/07/86

Urinalysis

Color yellow

Appearance clear

SG 1.020

PH 5

Leukocytes trace

Nitrite —

Protein —

Glucose —

Ketones —

Urobilinogen —

Bilirubin —

Blood trace

C. E. S.
DD

Microscopic

WBC _____

RBC _____

Epith _____

Bacti _____

Amorph _____

Mucous _____

Crystals _____

Casts _____

Other _____

Date/Time Completed _____

Initials _____

06/28/2019 10:15:00

ID: 1358100
Embry, Brandon

D.O.B.: 09/07/1986 32 Years

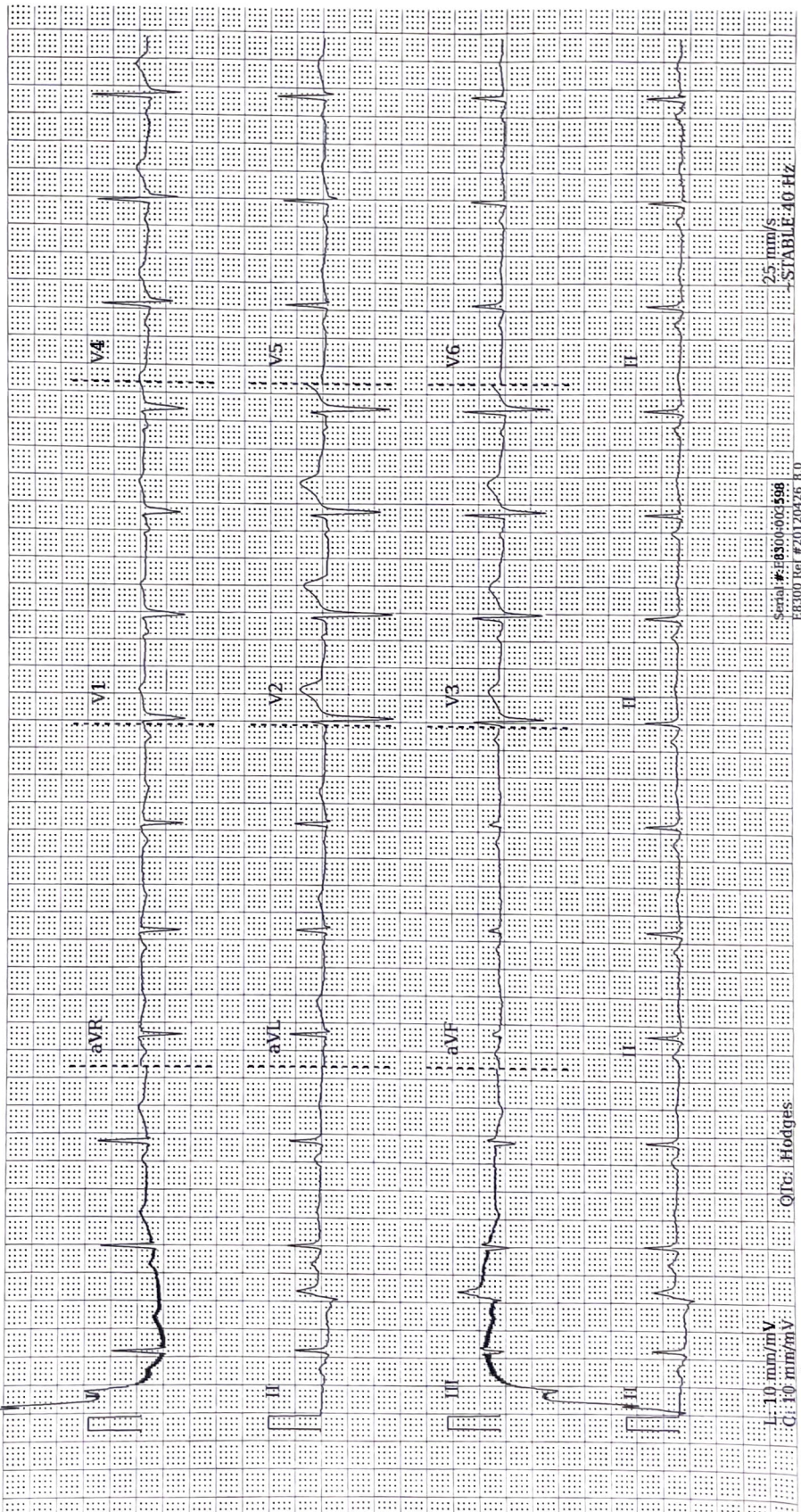
Male
Meds:
Class:
Dr:
Tech: DD
ML

Vent. Rate: 79 bpm
RR Interval: 759 ms
PR Interval: 144 ms
QRS Duration: 92 ms
QT Interval: 360 ms
QTc Interval: 393 ms
QT Dispersion: 26 ms
P Axis: 48 deg
QRS Axis: 21 deg
T Axis: -11 deg

Sinus rhythm
Inferior T wave changes are nonspecific
Borderline ECG

* Unconfirmed Analysis *

Comment:



L: 10 mm/mV
C: 10 mm/mV

Serial #: 830-004598
ECG001er #20120426 B0

2.5 mm/s
STABLE: 40 Hz