



REFERENCE VALUE CHANGE

NOTIFICATION DATE: July 30, 2009

EFFECTIVE DATE: August 18, 2009

GLUCOSE, RANDOM #89115

EXPLANATION: Effective August 18th, 2009, updated reference values will be implemented for non-fasting (random) blood glucose levels in patients ≥ 1 year old. In addition, a reporting name change will specify serum as the preferred sample type. No other changes to this assay will occur at this time.

CURRENT REFERENCE VALUES:

0-11 months: not established

> or = 1 yr: 70-100 mg/dL

NEW REFERENCE VALUES:

0-11 months: not established

> or = 1 yr: 70-140 mg/dL

CURRENT REPORTING NAME:

Glucose, Random

NEW REPORTING NAME:

Glucose, Random, Serum

QUESTIONS: Contact your Mayo Medical Laboratories' Regional Manager
Richard R. Einerson, Mayo Medical Laboratories' Technical Support
Telephone: 800-533-1710



MAYO CLINIC
 Mayo Medical Laboratories

TEST DEFINITION

7/30/2009

CODE NAME

89115 GLUCOSE, RANDOM, S

ORDER CODE	EFF DATE	TC	TITLE	CHECKING NORMALS	PRINT NORMALS (# CODED)	PERFORM SITE *
89115	7/24/2009		GLUCOSE, RANDOM, S			MCR
			TRANSPORT TEMP : REFRIG\FROZEN OK\AMBIENT NO			
			89115	GLUCOSE, RANDOM, S		
EXPECT RESULTS OF FORM : SHOULD BE UP TO 4 DIGITS OR CONTAIN A "<" SYMBOL.						
UNITS: MG/DL						
NO SEX						
No AGE : ;						
1D TO 6D : ;						
7D TO 11M : ;						
12M TO 150Y : 70-140 ; 70-140						
MALE						
No AGE : ;						
1D TO 6D : ;						
7D TO 11M : ;						
12M TO 150Y : 70-140 ; 70-140						
FEMALE						
No AGE : ;						
1D TO 6D : ;						
7D TO 11M : ;						
12M TO 150Y : 70-140 ; 70-140						

*PERFORMING SITE LEGEND

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MCR      MAYO CLINIC DPT OF LAB MED & PATHOLOGY      LAB DIRECTOR:  FRANKLIN R. COCKERILL, III, M.D.
200 FIRST STREET SW
ROCHESTER, MN 55905
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LABORATORY SERVICE REPORT

1-800-533-1710

PATIENT NAME TESTING, 89115		PATIENT NUMBER		AGE 25	SEX F	ACCESSION # G9132489
ORDERING PHYSICIAN DR WHO		CLIENT ORDER #				ACCOUNT # LIAISONS
COLLECTION 07/22/09 02:48 P	RECEIVED 07/22/09 02:48 P	REPORT PRINTED 07/30/09 02:30 P		SPECIMEN INFORMATION DATE OF BIRTH:		
DATE TIME	DATE TIME	DATE TIME	DATE TIME			
Test Client Attn: Mayo Liaisons 200 First Street SW Rochester, MN 55905 507-284-8202						

TEST REQUESTED	HI LO		REF RANGE	PERFORM SITE *
Glucose, Random, S Glucose, Random, S		75	mg/dL 70-140	MCR

* PERFORMING SITE

MCR 200 First Street SW Rochester, MN 55905	Mayo Clinic Dpt of Lab Med & Pathology	Lab Director: Franklin R. Cockerill, III, M.D.
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PATIENT NAME TESTING, 89115	ORDER STATUS Final	COLLECTION DATE AND TIME 07/22/09 02:48 P
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Specimen receipt and report times are in CST/CDT

REPRINT

Page 1 of 1