

Reference ranges for blood tests

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Reference ranges for blood tests are sets of values used by a health professional to interpret a set of medical test results from blood samples.

Reference ranges for blood tests are studied within the field of clinical chemistry (also known as "clinical biochemistry", "chemical pathology" or "pure blood chemistry"), the area of pathology that is generally concerned with analysis of bodily fluids.

Blood test results should always be interpreted using the reference range provided by the laboratory that performed the test.^[1]

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Interpretation

A reference range is usually defined as the set of values 95 percent of the normal population falls within (that is, 95% prediction interval).^[2] It is determined by collecting data from vast numbers of laboratory tests.

Plasma or whole blood

In this article, all values (except the ones listed below) denote blood plasma concentration, which is approximately 60–100% larger than the actual blood concentration if the amount inside red blood cells (RBCs) is negligible. The precise factor depends on hematocrit as well as amount inside RBCs. Exceptions are mainly those values that denote total blood concentration, and in this article they are:

- All values in *Hematology – red blood cells* (except *hemoglobin in plasma*)
- All values in *Hematology – white blood cells*
- Platelet count (Plt)

A few values are for inside red blood cells only:

- Vitamin B₉ (Folic acid/Folate) in red blood cells
- Mean corpuscular hemoglobin concentration (MCHC)

Units

- Mass concentration (g/dL or g/L) is the most common measurement unit in the United States. Is usually given with dL (decilitres) as the denominator in the United States, and usually with L (litres) in, for example, Sweden.
- Molar concentration (mol/L) is used to a higher degree in most of the rest of the world, including the United Kingdom and other parts of Europe and Australia and New Zealand.^[3]
- International units (IU) are based on measured biological activity or effect, or for some substances, a specified equivalent mass.
- Enzyme activity (kat) is commonly used for e.g. liver function tests like AST, ALT, LD and γ-GT in Sweden.^[4]
- Percentages and time-dependent units (mol/s) are used for calculated derived parameters, e.g. for beta cell function in homeostasis model assessment or thyroid's secretory capacity.

Arterial or venous

If not otherwise specified, a reference range for a blood test is generally the venous range, as the standard process of obtaining a sample is by venipuncture. An exception is for acid-base and blood gases, which are generally given for arterial blood.

Still, the blood values are approximately equal between the arterial and venous sides for most substances, with the exception of acid-base, blood gases and drugs (used in therapeutic drug monitoring (TDM) assays).^[5] Arterial levels for drugs are generally higher than venous levels because of extraction while passing through tissues.^[5]

Usual or optimal

Reference ranges are usually given as what are the usual (or *normal*) values found in the population, more specifically the prediction interval that 95% of the population fall into. This may also be called *standard range*. In contrast, *optimal (health) range* or *therapeutic target* is a reference range or limit that is based on concentrations or levels that are associated with optimal health or minimal risk of related complications and diseases. For most substances presented, the optimal levels are the ones normally found in the population as well. More specifically, optimal levels are generally close to a central tendency of the values found in the population. However, usual and optimal levels may differ substantially, most notably among vitamins and blood lipids, so these tables give limits on both standard and optimal (or target) ranges.

In addition, some values, including troponin I and brain natriuretic peptide, are given as the estimated appropriate cutoffs to distinguish healthy people from specific conditions, which here are myocardial infarction and congestive heart failure, respectively, for the aforementioned substances.

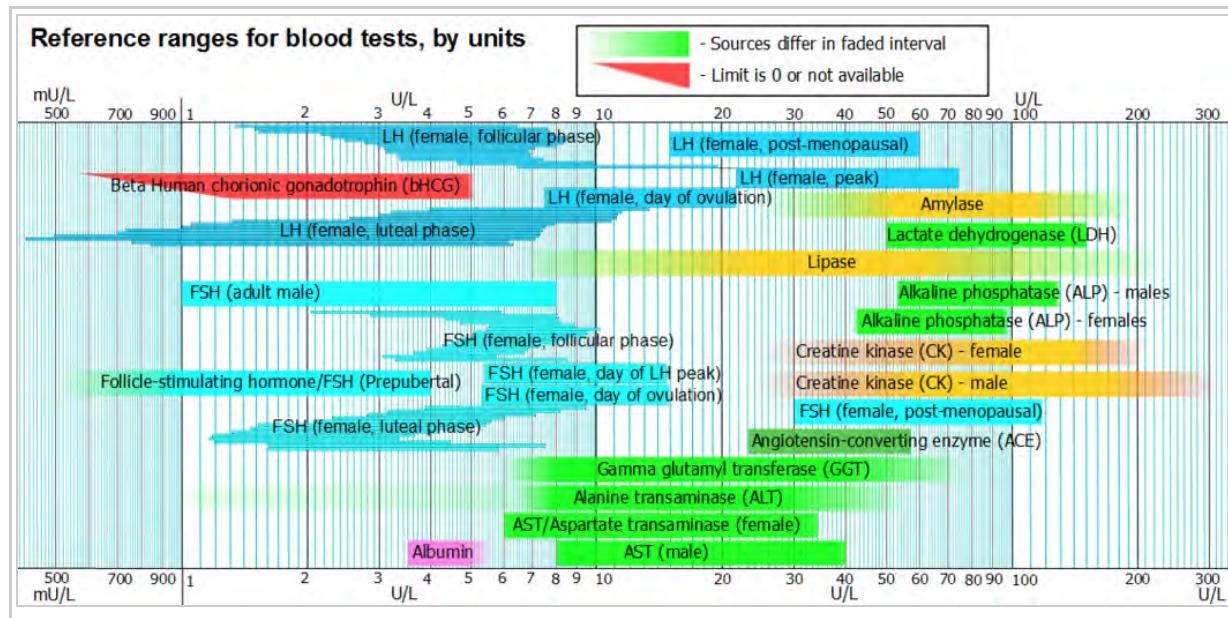
Variability

References range may vary with age, sex, race, pregnancy,^[6] diet, use of prescribed or herbal drugs and stress. Reference ranges often depend on the analytical method used, for reasons such as inaccuracy, lack of standardisation, lack of certified reference material and differing antibody reactivity.^[7] Also, reference ranges may be inaccurate when the reference groups used to establish the ranges are small.

Sorted by concentration

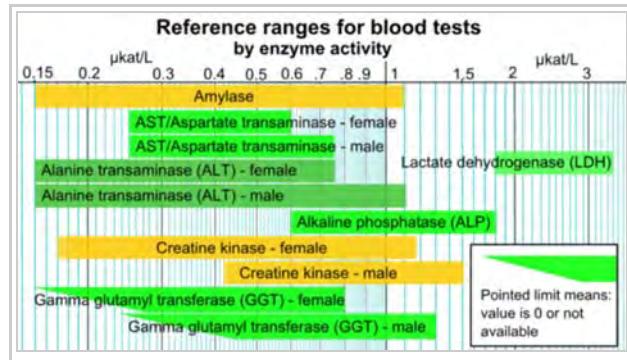
By units

Units don't necessarily imply anything about molarity or mass.

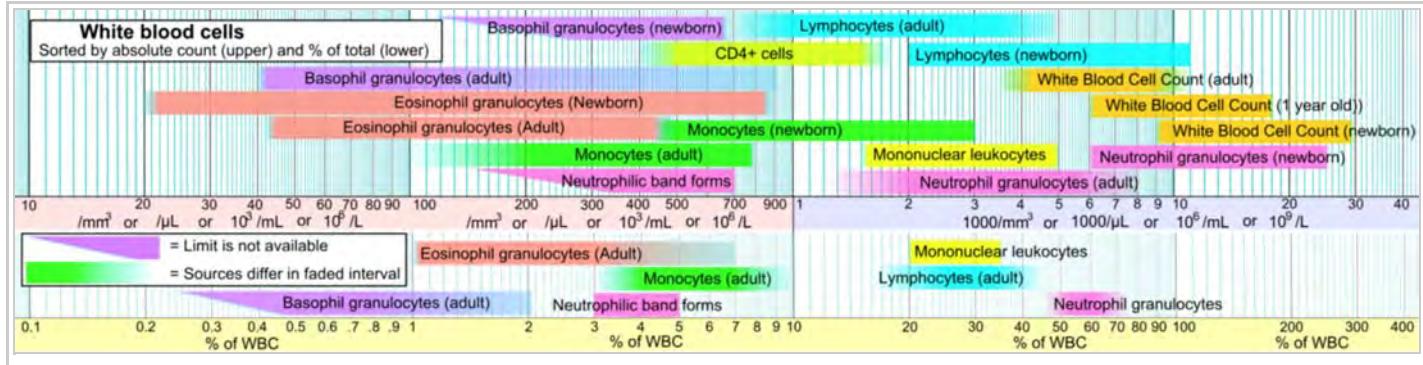


A few substances are below this main interval, e.g. thyroid stimulating hormone, being measured in mU/L, or above, like rheumatoid factor and CA19-9, being measured in U/mL.

By enzyme activity



White blood cells



Sorted by category

Ions and trace metals

Included here are also related binding proteins, like ferritin and transferrin for iron, and ceruloplasmin for copper.

Test	Lower limit	Upper limit	Unit	Comments
Sodium (Na)	135, ^[9] 137 ^{[4][10]}	145, ^{[4][10]} 147 ^[9]	mmol/L or mEq/L ^[9]	See hyponatremia or hypernatremia
	310, ^[11] 320 ^[11]	330, ^[11] 340 ^[11]	mg/dl	
Potassium (K)	3.5, ^{[4][9]} 3.6 ^[10]	5.0, ^{[4][9][10]} 5.1	mmol/L or mEq/L ^[9]	See hypokalemia or hyperkalemia
	14 ^[12]	20 ^[12]	mg/dl	
Chloride (Cl)	95, ^[9] 98, ^[13] 100 ^[4]	105, ^[9] 106, ^[13] 110 ^[4]	mmol/L or mEq/L ^[9]	See hypochloremia or hyperchloremia
	340 ^[14]	370 ^[14]	mg/dl	
Ionized calcium (Ca)	1.03, ^[15] 1.10 ^[4]	1.23, ^[15] 1.30 ^[4]	mmol/L	See hypocalcaemia or hypercalcemia
	4.1, ^[16] 4.4 ^[16]	4.9, ^[16] 5.2 ^[16]	mg/dL	
Total calcium (Ca)	2.1, ^{[9][17]} 2.2 ^[4]	2.5, ^{[4][17]} 2.6, ^[17] 2.8 ^[9]	mmol/L	
	8.4, ^[9] 8.5 ^[18]	10.2, ^[9] 10.5 ^[18]	mg/dL	
Total serum iron (TSI) - male	65, ^[19] 76 ^[10]	176, ^[19] 198 ^[10]	µg/dL	See hypoferremia or the following: iron overload (hemochromatosis), iron poisoning, siderosis, hemosiderosis, hyperferremia
	11.6, ^{[20][21]} 13.6 ^[21]	30, ^[20] 32, ^[21] 35 ^[21]	µmol/L	
Total serum iron (TSI) - female	26, ^[10] 50 ^[19]	170 ^{[10][19]}	µg/dL	
	4.6, ^[21] 8.9 ^[20]	30.4 ^[20]	µmol/L	
Total serum iron (TSI) - newborns	100 ^[19]	250 ^[19]	µg/dL	
	18 ^[21]	45 ^[21]	µmol/L	
Total serum iron (TSI) - children	50 ^[19]	120 ^[19]	µg/dL	
	9 ^[21]	21 ^[21]	µmol/L	
Total iron-binding capacity (TIBC)	240, ^[19] 262 ^[10]	450, ^[19] 474 ^[10]	µg/dL	
	43, ^[21] 47 ^[21]	81, ^[21] 85 ^[21]	µmol/L	
Transferrin	190, ^[22] 194, ^[4] 204 ^[10]	326, ^[4] 330, ^[22] 360 ^[10]	mg/dL	
	25 ^[23]	45 ^[23]	µmol/L	
Transferrin saturation	20 ^[19]	50 ^[19]	%	
Ferritin - Males and postmenopausal females	12 ^[24]	300 ^{[24][25]}	ng/mL or µg/L	
	27 ^[26]	670 ^[26]	pmol/L	
Ferritin - premenopausal females	12 ^[24]	150 ^[24] - 200 ^[25]	ng/mL or µg/L	
	27 ^[26]	330 ^[26] - 440 ^[26]	pmol/L	
Ammonia	10, ^[27] 20 ^[28]	35, ^[27] 65 ^[28]	µmol/L	See hypoammonemia and hyperammonemia
	17, ^[29] 34 ^[29]	60, ^[29] 110 ^[29]	µg/dL	

Copper (Cu)	70 ^[18]	150 ^[18]	µg/dL	See hypocupremia or hypercupremia
	11 ^{[30][31]}	24 ^[30]	µmol/L	
Ceruloplasmin	15 ^[18]	60 ^[18]	mg/dL	
	1 ^[32]	4 ^[32]	µmol/L	
Phosphate (HPO_4^{2-})	0.8	1.5 ^[33]	mmol/L	See hypophosphatemia or hyperphosphatemia
Inorganic phosphorus (serum)	1.0 ^[9]	1.5 ^[9]	mmol/L	
	3.0 ^[9]	4.5 ^[9]	mg/dL	
Zinc (Zn)	60, ^[34] 72 ^[35]	110, ^[35] 130 ^[34]	µg/dL	See zinc deficiency or zinc poisoning
	9.2, ^[36] 11 ^[4]	17, ^[4] 20 ^[36]	µmol/L	
Magnesium	1.5, ^[18] 1.7 ^[37]	2.0, ^[18] 2.3 ^[37]	mEq/L or mg/dL	See hypomagnesemia or hypermagnesemia
	0.6, ^[38] 0.7 ^[4]	0.82, ^[38] 0.95 ^[4]	mmol/L	

Acid-base and blood gases

If arterial/venous is not specified for an acid-base or blood gas value, then it generally refers to arterial, and not venous which otherwise is standard for other blood tests.

Acid-base and blood gases are among the few blood constituents that exhibit substantial difference between arterial and venous values.^[5] Still, pH, bicarbonate and base excess show a high level of inter-method reliability between arterial and venous tests, so arterial and venous values are roughly equivalent for these.^[39]

Test	Arterial/Venous	Lower limit	Upper limit	Unit
pH	Arterial	7.34, ^[10] 7.35 ^[9]	7.44, ^[10] 7.45 ^[9]	
	Venous	7.31 ^[40]	7.41 ^[40]	
[H ⁺]	Arterial	36 ^[9]	44 ^[9]	nmol/L
		3.6 ^[41]	4.4 ^[41]	ng/dL
Base excess	Arterial & venous ^[40]	-3 ^[40]	+3 ^[40]	mEq/L
oxygen partial pressure (pO ₂)	Arterial pO ₂	10, ^[9] 11 ^[42]	13, ^[42] 14 ^[9]	kPa
		75, ^[9] ^[10] 83 ^[18]	100, ^[10] 105 ^[9]	mmHg or torr
	Venous	4.0 ^[42]	5.3 ^[42]	kPa
		30 ^[40]	40 ^[40]	mmHg or torr
Oxygen saturation	Arterial	94, ^[40] 95, ^[13] 96 ^[18]	100 ^{[13][18]}	%
	Venous	Approximately 75 ^[13]		
Carbon dioxide partial pressure (PCO ₂)	Arterial P _a CO ₂	4.4, ^[9] 4.7 ^[42]	5.9, ^[9] 6.0 ^[42]	kPa
		33, ^[9] 35 ^[10]	44, ^[9] 45 ^[10]	mmHg or torr
	Venous	5.5, ^[42]	6.8 ^[42]	kPa
		41 ^[40]	51 ^[40]	mmHg or torr
Absolute content of carbon dioxide (CO ₂)	Arterial	23 ^[40]	30 ^[40]	mmol/L
		100 ^[43]	132 ^[43]	mg/dL
Bicarbonate (HCO ₃ ⁻)	Arterial & venous	18 ^[18]	23 ^[18]	mmol/L
		110 ^[44]	140 ^[44]	mg/dL
Standard bicarbonate (SBC _e)	Arterial & venous	21, 22 ^[9]	27, 28 ^[9]	mmol/L or mEq/L ^[9]
		134 ^[44]	170 ^[44]	mg/dL

Liver function

Test	Patient type	Lower limit	Upper limit	Unit	Comments
Total protein		60, ^[9] 63 ^[10]	78, ^[9] 82, ^[10] 84 ^[18]	g/L	
Albumin		35 ^{[9][45]}	48, ^[10] 55 ^[9]	g/L	see hypoalbuminemia
		3.5 ^[10]	4.8, ^[10] 5.5 ^[9]	U/L	
		540 ^[46]	740 ^[46]	μmol/L	
Globulins		23 ^[9]	35 ^[9]	g/L	
Total bilirubin		1.7, ^[47] 2, ^[9] 3.4, ^[47] 5 ^[4]	17, ^{[9][47]} 22, ^[47] 25 ^[4]	μmol/L	
		0.1, ^[9] 0.2, ^[10] 0.29 ^[48]	1.0, ^{[9][18]} 1.3, ^[10] 1.4 ^[48]	mg/dL	
		0.0 ^[9] or N/A ^[4]	5, ^[9] 7 ^{[4][47]}	μmol/L	
Direct/conjugated bilirubin		0 ^{[9][10]}	0.3, ^{[9][10]} 0.4 ^[18]	mg/dL	
Alanine transaminase (ALT/ALAT ^[4])		5, ^[49] 7, ^[10] 8 ^[9]	20, ^[9] 21, ^[13] 56 ^[10]	U/L	Also called <i>serum glutamic pyruvic transaminase</i> (SGPT)
		Female	0.15 ^[4]	0.75 ^[4]	
		Male	0.15 ^[4]	1.1 ^[4]	
Aspartate transaminase (AST/ASAT ^[4])	Female	6 ^[50]	34 ^[50]	IU/L	Also called <i>serum glutamic oxaloacetic transaminase</i> (SGOT)
		0.25 ^[4]	0.60 ^[4]	μkat/L	
	Male	8 ^[50]	40 ^[50]	IU/L	
		0.25 ^[4]	0.75 ^[4]	μkat/L	
Alkaline phosphatase (ALP)	Female	42 ^[49]	98 ^[49]	U/L	
	Male	53 ^[49]	128 ^[49]	U/L	
	(Enzyme activity)	0.6 ^[4]	1.8 ^[4]	μkat/L	
Gamma glutamyl transferase (GGT)		5, ^[49] 8 ^[10]	40, ^[49] 78 ^[10]	U/L	
	Women		0.63 ^[51]	μkat/L	
	Men		0.92 ^[51]	μkat/L	

Cardiac tests

Test	Patient type	Lower limit	Upper limit	Unit	Comments
Creatine kinase (CK)	male	24,[52] 38,[10] 60[49]	174,[18] 320[49]	U/L or ng/mL	
		0.42[53]	1.5[53]	µkat/L	
	female	24,[52] 38,[10] 96[18]	140,[18] 200[49]	U/L or ng/mL	
		0.17[53]	1.17[53]	µkat/L	
CK-MB		0	3,[10] 3.8,[4] 5[49]	ng/mL or µg/L ^[4]	
Myoglobin	Female	1 ^[54]	66 ^[54]	ng/mL or µg/L	
	Male	17 ^[54]	106 ^[54]		

Brain natriuretic peptide (BNP)	
Interpretation	Range / Cutoff
Congestive heart failure unlikely	< 100 pg/mL ^{[55][56]}
"Gray zone"	100-500 pg/mL ^{[55][56]}
Congestive heart failure likely	>500 pg/mL ^{[55][56]}

NT-proBNP		
Interpretation	Age	Cutoff
Congestive heart failure likely	< 75 years	> 125 pg/mL ^[57]
	>75 years	>450 pg/mL ^[57]

Lipids

Test	Patient type	Lower limit	Upper limit	Unit	Therapeutic target
Triglycerides	10 – 39 years	54 ^[18]	110 ^[18]	mg/dL	< 100 mg/dL ^[58] or 1.1 ^[58] mmol/L
		0.61 ^[59]	1.2 ^[59]	mmol/L	
	40 – 59 years	70 ^[18]	150 ^[18]	mg/dL	
		0.77 ^[59]	1.7 ^[59]	mmol/L	
	> 60 years	80 ^[18]	150 ^[18]	mg/dL	
		0.9 ^[59]	1.7 ^[59]	mmol/L	
Total cholesterol		3.0, ^[60] 3.6 ^{[9][60]}	5.0, ^{[4][61]} 6.5 ^[9]	mmol/L	< 3.9 ^[58]
		120, ^[10] 140 ^[9]	200, ^[10] 250 ^[9]	mg/dL	< 150 ^[58]
HDL cholesterol	female	1.0, ^[62] 1.2, ^[4] 1.3 ^[60]	2.2 ^[62]	mmol/L	> 1.0 ^[62] or 1.6 ^[60] mmol/L > 40 ^[63] or 60 ^[64] mg/dL
		40, ^[63] 50 ^[65]	86 ^[63]	mg/dL	
HDL cholesterol	male	0.9 ^{[4][62]}	2.0 ^[62]	mmol/L	
		35 ^[63]	80 ^[63]	mg/dL	
LDL cholesterol (Not valid when triglycerides >5.0 mmol/L)		2.0, ^[62] 2.4 ^[61]	3.0, ^{[4][61]} 3.4 ^[62]	mmol/L	< 2.5 ^[62]
		80, ^[63] 94 ^[63]	120, ^[63] 130 ^[63]	mg/dL	< 100 ^[63]
LDL/HDL quotient		n/a	5 ^[4]	(unitless)	

Tumour markers

Test	Cutoff	Unit	Comments
Alpha fetoprotein (AFP)	44 ^[10]	ng/mL or µg/L	Hepatocellular carcinoma or testicular cancer
Beta Human chorionic gonadotrophin (bHCG)	5 ^[10]	IU/l or mU/ml	in male and non-pregnant female
CA19-9	40 ^[10]	U/ml	Pancreatic cancer
CA-125	30, ^[66] 35 ^[67]	kU/L or U/mL	
Carcinoembryonic antigen (CEA) non-smokers at 50 years	3.4, ^[4] 3.6 ^[68]	µg/l	
Carcinoembryonic antigen (CEA) non-smokers at 70 years	4.1 ^[68]	µg/l	
Carcinoembryonic antigen (CEA) - smokers	5 ^[69]	µg/l	
Prostate specific antigen (PSA)	2.5, ^[4] 4 ^[10]	µg/L ^{[4][10]} or ng/mL ^[18]	below age 45 <2.5 µg/L
PAP	3 ^[18]	units/dL (Bodansky units)	
Calcitonin	5, ^[70] 15 ^[70]	ng/L or pg/mL	Cutoff against medullary thyroid cancer ^[70]

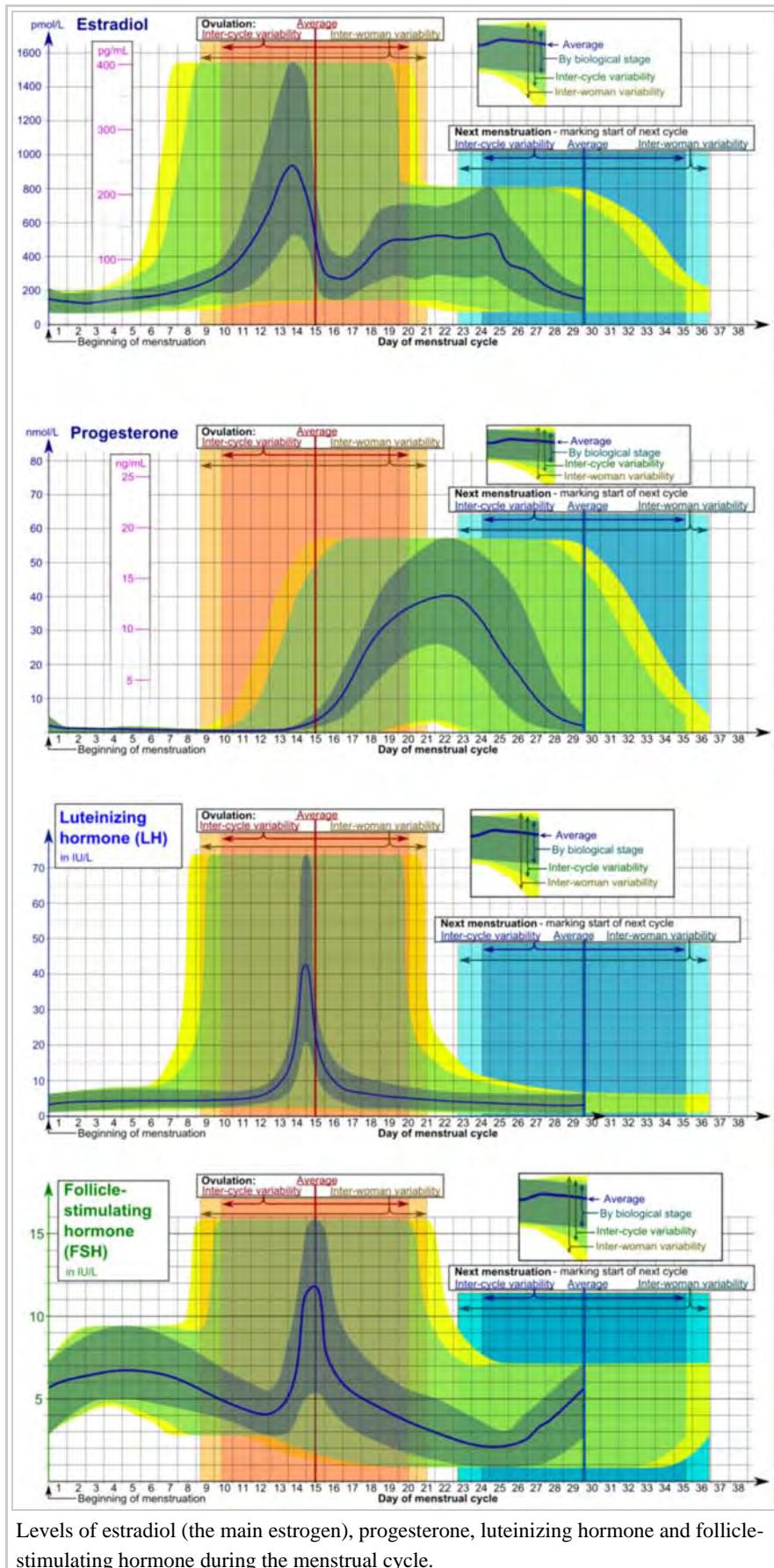
Endocrinology

Thyroid hormones

Test	Patient type	Lower limit	Upper limit	Unit
Thyroid stimulating hormone (TSH or thyrotropin)	Adults - standard range	0.3, ^[4] 0.4, ^[10] 0.5, ^[18] 0.6 ^[71]	4.0, ^[4] 4.5, ^[10] 6.0 ^[18]	mIU/L or µIU/mL
	Adults - optimal range	0.3, ^[72] 0.5 ^[73]	2.0, ^[73] 3.0 ^[72]	mIU/L or µIU/mL
	Infants	1.3 ^[74]	19 ^[74]	mIU/L or µIU/mL
Free thyroxine (FT4)	Normal adult	0.7, ^[75] 0.8 ^[10]	1.4, ^[75] 1.5, ^[10] 1.8 ^[76]	ng/dL
		9, ^[4] ^[77] 10, ^[78] 12 ^[79]	18, ^[4] ^[77] 23 ^[79]	pmol/L
	Child/Adolescent 31 d - 18 y	0.8 ^[75]	2.0 ^[75]	ng/dL
		10 ^[77]	26 ^[77]	pmol/L
	Pregnant	0.5 ^[75]	1.0 ^[75]	ng/dL
		6.5 ^[77]	13 ^[77]	pmol/L
Total thyroxine		4, ^[78] 5.5 ^[10]	11, ^[78] 12.3 ^[10]	µg/dL
		60 ^[78] ^[79]	140, ^[78] 160 ^[79]	nmol/L
Free triiodothyronine (FT3)	Normal adult	0.2 ^[78]	0.5 ^[78]	ng/dL
		3.1 ^[80]	7.7 ^[80]	pmol/L
	Children 2-16 y	0.1 ^[81]	0.6 ^[81]	ng/dL
		1.5 ^[80]	9.2 ^[80]	pmol/L
Total triiodothyronine		60, ^[10] 75 ^[78]	175, ^[78] 181 ^[10]	ng/dL
		0.9, ^[4] 1.1 ^[78]	2.5, ^[4] 2.7 ^[78]	nmol/L
Thyroxine-binding globulin (TBG)		12 ^[10]	30 ^[10]	mg/L
Thyroglobulin (Tg)		1.5 ^[78]	30 ^[78]	pmol/L
		1 ^[78]	20 ^[78]	µg/L

Sex hormones

The diagrams below take inter-cycle and inter-woman variability into account in displaying reference ranges for estradiol, progesterone, FSH and LH.



Levels of estradiol (the main estrogen), progesterone, luteinizing hormone and follicle-stimulating hormone during the menstrual cycle.

Test	Patient type	Lower limit	Upper limit	Unit
Dihydrotestosterone	adult male	30 ^[82]	85 ^[82]	ng/dL
Testosterone	Male, overall	8, ^[83] 10 ^[84]	27, ^[83] 35 ^[84]	nmol/L
		230, ^[85] 300 ^[86]	780 ^[85] - 1000 ^[86]	ng/dL
	Male < 50 years	10 ^[4]	45 ^[4]	nmol/L
		290 ^[85]	1300 ^[85]	ng/dL
	Male > 50 years	6.2 ^[4]	26 ^[4]	nmol/L
		180 ^[85]	740 ^[85]	ng/dL
17 α -Hydroxyprogesterone	Female	0.7 ^[84]	2.8 ^[84] - 3.0 ^[4]	nmol/L
		20 ^[86]	80 ^[86] - 85 ^[85]	ng/dL
Follicle-stimulating hormone (FSH)	male	0.06 ^[18]	3.0 ^[18]	mg/L
		0.18 ^[87]	9.1 ^[87]	μ mol/l
	Female (Follicular phase)	0.2 ^[18]	1.0 ^[18]	mg/L
		0.6 ^[87]	3.0 ^[87]	μ mol/l
	Prepubertal	<1 ^[88]	3 ^[88]	IU/L
	Adult male	1 ^[88]	8 ^[88]	
Luteinizing hormone (LH)	Adult female (follicular and luteal phase)	1 ^[88]	11 ^[88]	
		6 ^[88]	26 ^[88]	
		95% PI (standard)	95% PI)	
	Adult female (Ovulation)	5 ^[89]	15 ^[89]	
		90% PI (used in diagram)	(90% PI)	
Estradiol (an estrogen)	Post-menopausal female	30 ^[88]	118 ^[88]	IU/L
	Female, peak	20 ^[89]	75 ^[89]	
		90% PI (used in diagram)	(90% PI)	
Progesterone	Female, post-menopausal	15 ^[90]	60 ^[90]	
	Male aged 18+	2 ^[91]	9 ^[91]	
Estradiol (an estrogen)	Adult male	50 ^[92]	200 ^[92]	pmol/L
		14 ^[93]	55 ^[93]	pg/mL
	Adult female (day 5 of follicular phase, and luteal phase)	70 ^[92]	500, ^[92] 600 ^[92]	pmol/L
		19 ^[93]	140, ^[93] 160 ^[93]	pg/mL
	Adult female - free (not protein bound)	0.5 ^[94]	9 ^[94]	pg/mL
		1.7 ^[94]	33 ^[94]	pmol/L
Androstenedione	Post-menopausal female	N/A ^[92]	< 130 ^[92]	pmol/L
		N/A ^[93]	< 35 ^[93]	pg/mL
Progesterone	Female in mid-luteal phase (day 21-23)	17, ^[89] 35 ^[95]	92 ^[95]	nmol/L
		6, ^[89] 11 ^[96]	29 ^[96]	ng/mL
Androstenedione	Adult male and female	60 ^[90]	270 ^[90]	ng/dL

	Post-menopausal female		< 180 ^[90]	
	Prepubertal		< 60 ^[90]	
Dehydroepiandrosterone sulfate	Adult male and female	30 ^[97]	400 ^[97]	µg/dL
SHBG	Adult female	40 ^[98]	120 ^[98]	nmol/L
	Adult male	20 ^[98]	60 ^[98]	
Anti-Müllerian hormone (AMH)	13–45 years	0.7 ^[99]	20 ^[99]	ng/mL
		5 ^[100]	140 ^[100]	pmol/l

Other hormones

Test	Patient type	Lower limit	Upper limit	Unit
Adrenocorticotropic hormone (ACTH)		4.4 ^[101]	18, ^[102] 22 ^[101]	pmol/L
		20 ^[10]	80, ^[103] 100 ^[10]	pg/mL
Cortisol	09:00 am	140 ^[104]	700 ^[104]	nmol/L
		5 ^[105]	25 ^[105]	µg/dL
	Midnight	80 ^[104]	350 ^[104]	nmol/L
		2.9 ^[105]	13 ^[105]	µg/dL
Growth hormone (fasting)		0	5 ^[9]	ng/mL
Growth hormone (arginine stimulation)		7 ^[9]	n/a	ng/mL
IGF-1	Female, 20 yrs	110 ^[106]	420 ^[106]	ng/mL
	Female, 75 yrs	55 ^[106]	220 ^[106]	
	Male, 20 yrs	160 ^[106]	390 ^[106]	
	Male, 75 yrs	48 ^[106]	200 ^[106]	
Prolactin	Female	71, ^[107] 105 ^[107]	348, ^[107] 548 ^[107]	mIU/L
		3.4, ^[107] 3.9 ^[107]	16.4, ^[107] 20.3 ^[107]	µg/L
	Male	58, ^[107] 89 ^[107]	277, ^[107] 365 ^[107]	mIU/L
		2.7, ^[107] 3.3 ^[107]	13.0, ^[107] 13.5 ^[107]	µg/L
Parathyroid hormone (PTH)		10, ^[108] 17 ^[109]	65, ^[108] 70 ^[109]	pg/mL
		1.1, ^[4] 1.8 ^[110]	6.9, ^[4] 7.5 ^[110]	pmol/L
25-hydroxycholecalciferol (a vitamin D) -Standard reference range		8, ^[18] ^[111] 9 ^[111]	40, ^[111] 80 ^[18]	ng/mL
		20, ^[112] 23 ^[113]	95, ^[113] 150 ^[112]	nmol/L
25-hydroxycholecalciferol -Therapeutic target range		30, ^[114] 40 ^[115]	65, ^[115] 100 ^[114]	ng/mL
		85, ^[58] 100 ^[115]	120, ^[58] 160 ^[115]	nmol/L
Plasma renin activity		0.29, ^[116] 1.9 ^[117]	3.7 ^[116] ^[117]	ng/(mL*hour)
		3.3, ^[118] 21 ^[119]	41 ^[118] ^[119]	mcU/mL
Aldosterone	Adult		19, ^[118] 34.0 ^[118]	ng/dL
			530, ^[120] 940 ^[120]	pmol/L
Aldosterone-to-renin ratio	Adult		13.1, ^[121] 35.0 ^[121]	ng/dl per ng/(mL·h)
			360, ^[121] 970 ^[121]	pmol/liter per µg/(L·h)

Vitamins

Also including the vitamin B₁₂)-related amino acid homocysteine.

Test	Patient type	Standard range		Unit	Optimal range	
		Lower limit	Upper limit		Lower limit	Upper limit
Vitamin A		30 ^[18]	65 ^[18]	µg/dL		
Vitamin B ₉ (Folic acid/Folate) - Serum	Age > 1 year	3.0 ^[122]	16 ^[122]	ng/mL or µg/L	5 ^[123]	
		6.8 ^[124]	36 ^[124]	nmol/l	11 ^[124]	
Vitamin B ₉ (Folic acid/Folate) - Red blood cells	Pregnant	200 ^[122]	600 ^[122]	ng/mL or µg/L		
		450 ^[124]	1400 ^[124]	nmol/L		
				ng/mL or µg/L	400 ^[122]	
				nmol/L	900 ^[122]	
Vitamin B ₁₂ (Cobalamin)		130, ^[125] 160 ^[126]	700, ^[125] 950 ^[126]	ng/L		
		100, ^[127] 120 ^[4]	520, ^[127] 700 ^[4]	pmol/L		
Homocysteine		3.3, ^[128] 5.9 ^[128]	7.2, ^[128] 15.3 ^[128]	µmol/L		6.3 ^[58]
		45, ^[129] 80 ^[129]	100, ^[129] 210 ^[129]	µg/dL		85 ^[58]
Vitamin C (Ascorbic acid)		0.4 ^[18]	1.5 ^[18]	mg/dL	0.9 ^[58]	
		23 ^[130]	85 ^[130]	µmol/L	50 ^[58]	
25-hydroxycholecalciferol (a vitamin D)		8, ^[18] ^[111] 9 ^[111]	40, ^[111] 80 ^[18]	ng/mL	30, ^[114] 40 ^[115]	65, ^[115] 100 ^[114]
		20, ^[112] 23 ^[113]	95, ^[113] 150 ^[112]	nmol/L	85, ^[58] 100 ^[115]	120, ^[58] 160 ^[115]
Vitamin E				µmol/L	28 ^[58]	
				mg/dL	1.2 ^[58]	

Toxins

Test	Limit type	Limit	Unit
Lead	Optimal health range	< 20 ^[13] or 40 ^[18]	µg/dL
Blood ethanol content	Limit for drunk driving	0, ^[131] 0.2, ^[131] 0.8 ^[131] 17.4 ^[132]	% or g/L mmol/L

Hematology

Red blood cells

These values (except *Hemoglobin in plasma*) are for total blood and not only blood plasma.

Test	Patient	Lower limit	Upper limit	Unit	Comments
Hemoglobin (Hb)	male	2.0,[133] 2.1[9][134]	2.5,[133] 2.7[9][134]	mmol/L	Higher in neonates, lower in children.
		130,[4] 132,[10] 135[9]	162,[10] 170,[4] 175[9]	g/L	
	female	1.8,[133] 1.9[9][134]	2.3,[133] 2.5[9] [133][134]	mmol/L	Sex difference negligible until adulthood.
		120[4][9][10]	150,[4] 152,[10] 160[9][18]	g/L	
Hemoglobin subunits (sometimes displayed simply as "Hemoglobin")	male	8.0,[135] 8.4[135]	10.0,[135] 10.8[135]	mmol/L	4 per hemoglobin molecule
	female	7.2,[135] 7.6[135]	9.2,[135] 10.0[135]		
Hemoglobin in plasma		0.16[9]	0.62[9]	µmol/L	Normally diminutive compared with inside red blood cells
		1	4	mg/dL	
Glycated hemoglobin (Hb _{A1c})	< 50 years	3.6[4]	5.0[4]	% of Hb	
	> 50 years	3.9[4]	5.3[4]		
Haptoglobin	< 50 years	0.35[4]	1.9[4]	g/L	
	> 50 years	0.47[4]	2.1[4]		
Hematocrit (Hct)	male	0.39,[4] 0.4,[10] 0.41,[9] 0.45[18]	0.50,[4] 0.52,[10] 0.53,[9] 0.62[18]		
	female	0.35,[4] 0.36,[9] 0.37[10][18]	0.46,[4][9][10] 0.48[18]		
	Child	0.31[10]	0.43[10]		
Mean cell volume (MCV)	Male	76,[18] 82[10]	100,[18] 102[10]	fL	Cells are larger in neonates, though smaller in other children.
	Female	78[10]	101[10]	fL	
Red blood cell distribution width (RDW)		11.5[10]	14.5[10]	%	
Mean cell hemoglobin (MCH)		0.39[9]	0.54[9]	fmol/cell	
		25,[9] 27[4][18]	32,[18] 33,[4] 35[9]	pg/cell	
Mean corpuscular hemoglobin concentration (MCHC)		31,[10] 32[4][18]	35,[10] 36[4][18]	g/dL or % ^[note 1]	
		4.8,[136] 5.0[136]	5.4,[136] 5.6[136]	mmol/L	
Erythrocytes/Red blood cells (RBC)	male	4.2,[18] 4.3[4] [9][10]	5.7,[4] 5.9,[9] 6.2,[10] 6.9[18]	x10 ¹² /L or mln/mm ³	
	Female	3.5,[9] 3.8,[10] 3.9[4]	5.1,[4] 5.5[9][10]		
	Infant/Child	3.8[10]	5.5[10]		
Reticulocytes	Adult	26[4]	130[4]	x10 ⁹ /L	

Adult	0.5 ^{[9][10]}	1.5 ^{[9][10]}	% of RBC	
Newborn	1.1 ^[10]	4.5 ^[10]	% of RBC	
Infant	0.5 ^[10]	3.1 ^[10]	% of RBC	

White blood cells

These values are for total blood and not only blood plasma.

Test	Patient type	Lower limit	Upper limit	Unit
White Blood Cell Count (WBC)	Adult	3.5, ^[4] 3.9, ^[137] 4.1, ^[10] 4.5 ^[9]	9.0, ^[4] 10.0, ^[137] 10.9, ^[10] 11 ^[9]	■ x10 ⁹ /L ■ x10 ³ /mm ³ or ■ x10 ³ /µL
	Newborn	9 ^[138]	30 ^[138]	
	1 year old	6 ^[138]	18 ^[138]	
Neutrophil granulocytes (A.K.A. grans, polys, PMNs, or segs)	Adult	1.3, ^[4] 1.8, ^[137] 2 ^[138] 45-54 ^[9]	5.4, ^[4] 7, ^[137] 8 ^[138] 62, ^[9] 74	x10 ⁹ /L % of WBC
	Newborn	6 ^[138]	26 ^[138]	x10 ⁹ /L
	Adult	0.7 ^[138] 3 ^[9]	0.7 ^[138] 5 ^[9]	x10 ⁹ /L % of WBC
Lymphocytes	Adult	0.7, ^[4] 1.0 ^{[137][138]} 16-25 ^[9]	3.5, ^[137] 3.9, ^[4] 4.8 ^[138] 33, ^[9] 45	x10 ⁹ /L % of WBC
	Newborn	2 ^[138]	11 ^[138]	x10 ⁹ /L
	Adult	0.1, ^[4] 0.2 ^{[139][140]} 3, ^[9] 4.0	0.8 ^{[4][138][140]} 7, ^[9] 10	x10 ⁹ /L % of WBC
Monocytes	Newborn	0.4 ^[138]	3.1 ^[138]	x10 ⁹ /L
	Adult	1.5 20	5 35	x10 ⁹ /L % of WBC
	Adult	0.4, ^[10] 0.5 ^[13]	1.5, ^[13] 1.8 ^[10]	x10 ⁹ /L
Eosinophil granulocytes	Adult	0.0, ^[4] 0.04 ^[140] 1 ^[9]	0.44, ^[140] 0.45, ^[138] 0.5 ^[4] 3, ^[9] 7	x10 ⁹ /L % of WBC
	Newborn	0.02 ^[138]	0.85 ^[138]	x10 ⁹ /L
	Adult	40 ^[137]	100, ^{[4][140]} 200, ^[138] 900 ^[137]	x10 ⁶ /L
Basophil granulocytes	Adult	0.0	0.75, ^[9] 2	% of WBC
	Newborn		0.64 ^[138]	x10 ⁹ /L

Coagulation

Test	Lower limit	Upper limit	Unit	Comments
Thrombocyte/Platelet count (Plt)	140, ^[10] 150 ^{[4][9]}	350, ^{[4][18]} 400, ^[9] 450 ^[10]	x10 ⁹ /L or x1000/µL	
Mean platelet volume (MPV)	7.2, ^[141] 7.4, ^[142] 7.5 ^[143]	10.4, ^[142] 11.5, ^[143] 11.7 ^[141]	fL	
Prothrombin time (PT)	10, ^[13] 11, ^{[9][144]} 12 ^[10]	13, ^[13] 13.5, ^[144] 14, ^[10] 15 ^[9]	s	PT reference varies between laboratory kits - INR is standardised
INR	0.9 ^[4]	1.2 ^[4]		The INR is a corrected ratio of a patient's PT to normal
Activated partial thromboplastin time (APTT)	18, ^[10] 30 ^{[4][13]}	28, ^[10] 42, ^[4] 45 ^[13]	s	
Thrombin clotting time (TCT)	11	18	s	
Fibrinogen	1.7, ^[10] 2.0 ^[4]	3.6, ^[4] 4.2 ^[10]	g/L	
Antithrombin	0.80 ^[4]	1.2 ^[4]	kIU/L	
	0.15, ^[145] 0.17 ^[146]	0.2, ^[145] 0.39 ^[146]	mg/mL	
Bleeding time	2	9	minutes	
Viscosity	1.5 ^[147]	1.72 ^[147]	cP	

Immunology

Acute phase proteins

Acute phase proteins are markers of inflammation.

Test	Patient	Lower limit	Upper limit	Unit	Comments
Erythrocyte sedimentation rate (ESR)	Male	0	Age÷2 ^[148]	mm/h	ESR increases with age and tends to be higher in females. ^[149]
	Female		(Age+10)÷2 ^[148]		
C-reactive protein (CRP)			5, ^{[4][150]} 6 ^[151]	mg/L	
			200, ^[152] 240 ^[152]	nmol/L	
Alpha 1-antitrypsin (AAT)		20, ^[153] 22 ^[154]	38, ^[154] 53 ^[153]	µmol/L	
		89, ^[155] 97 ^[4]	170, ^[4] 230 ^[155]	mg/dL	
Procalcitonin			0.15 ^[156]	ng/mL or µg/L	

Isotypes of antibodies

Test	Patient	Lower limit	Upper limit	Unit	Comments
IgA	Adult	70,[4] 110 ^[157]	360,[4] 560 ^[157]	mg/dL	
IgD		0.5 ^[157]	3.0 ^[157]		
IgE		0.01 ^[157]	0.04 ^[157]		
IgG		800 ^[157]	1800 ^[157]		
IgM		54 ^[157]	220 ^[157]		

Autoantibodies

Autoantibodies are usually absent or very low, so instead of being given in standard reference ranges, the values usually denote where they are said to be present, or whether the test is a positive test. There may also be an *equivocal* interval, where it is uncertain whether there is a significantly increased level. All included values^[158] are given for the ELISA test.

Test	Negative	Equivocal	Positive	Unit
anti-SS-A (Ro)	< 15 ^[159]	15-25 ^[159]	> 25 ^[159]	Units per millilitre (U/mL)
anti-SS-B (La)	< 3 ^[159]	3 – 4 ^[159]	> 4 ^[159]	
Anti ds-DNA	< 40 ^[159]	40 – 60 ^[159]	> 60 ^[159]	
Anti ss-DNA	< 8 ^[159]	8 - 10 ^[159]	> 10 ^[159]	
Anti-histone antibodies	< 25 ^[159]	n/a ^[159]	> 25 ^[159]	
Cytoplasmic/classical anti-neutrophil cytoplasmic antibodies (c-ANCA)	< 20 ^[159]	21 - 30 ^[159]	> 30 ^[159]	
Perinuclear anti-neutrophil cytoplasmic antibodies (p-ANCA)	< 5 ^[159]	n/a	> 5 ^[159]	
Anti-mitochondrial antibodies (AMA)	< 10 ^[159]	n/a ^[159]	> 10 ^[159]	
Rheumatoid factor (RF)	< 20	20 - 30	> 30 ^[10]	
Antistreptolysin O titre (ASOT) in preschoolers			> 100	
ASOT at school age			> 250 ^[10]	
ASOT in adults			> 125 ^[10]	

Test	Negative	Low/weak positive	Moderate positive	High/strong positive	Unit
Anti-phospholipid IgG	< 20 ^[159]	20 –30 ^[159]	31 – 50 ^[159]	> 51 ^[159]	GPLU/ml ^[159]
Anti-phospholipid IgM	< 1.5 ^[159]	1.5 –2.5 ^[159]	2 – 9.9 ^[159]	> 10 ^[159]	MPL /ml ^[159]
Anti-phospholipid IgA	< 10 ^[159]	10 -20 ^[159]	21 – 30 ^[159]	> 31 ^[159]	arb U/ml ^[159]
Anti-citrullinated protein antibodies	< 20 ^[159]	20 – 39 ^[159]	40 - 59 ^[159]	> 60 ^[159]	EU ^[159]

Other immunology

Test	Lower limit	Upper limit	Unit
Serum free light chains (FLC): kappa/lambda ratio	0.26 ^[160]	1.65 ^[160]	(unit-less)

Other enzymes and proteins

Test	Lower limit	Upper limit	Unit	Comments
Serum total protein	60,[9] 63[10]	78,[9] 82,[10] 84[18]	g/L	
Lactate dehydrogenase (LDH)	50[18]	150[18]	U/L	
	0.4[49]	1.7[49]	µmol/L	
	1.8[4]	3.4[4]	µkat/L	< 70 years old[4]
Amylase	25,[9] 30,[10] 53[18]	110,[10] 120,[161] 123,[18] 125,[9] 190[49]	U/L	
	0.15[4]	1.1[4]	µkat/L	
	200[152]	240[152]	nmol/L	
D-dimer	n/a	500[162]	ng/mL	Higher in pregnant women[163]
		0.5[4]	mg/L	
Lipase	7,[10] 10,[18] 23[49]	60,[10] 150,[18] 208[49]	U/L	
Angiotensin-converting enzyme (ACE)	23[49]	57[49]	U/L	
Acid phosphatase		3.0[49]	ng/mL	
Eosinophil cationic protein (ECP)	2.3[4]	16[4]	µg/L	

Other electrolytes and metabolites

Electrolytes and Metabolites: For iron and copper, some related proteins are also included.

Test	Patient type	Lower limit	Upper limit	Unit	Comments
Osmolality		275,[9] 280,[18] 281[4]	295,[9] 296,[18] 297[4]	mOsm/kg	Plasma weight excludes solutes
Osmolarity		Slightly less than osmolality		mOsm/l	Plasma volume includes solutes
Urea		3.0[164]	7.0[164]	mmol/L	BUN - blood urea nitrogen
		7[9]	18,[9] 21[10]	mg/dL	
* Uric acid[10]		0.18[9]	0.48[9]	mmol/L	
	Female	2.0[18]	7.0[18]	mg/dL	
	Male	2.1[18]	8.5[18]	mg/dL	
Creatinine	male	60,[4] 68[165]	90,[4] 118[165]	μmol/L	May be complemented with creatinine clearance
		0.7,[166] 0.8[166]	1.0,[166] 1.3[166]	mg/dL	
	female	50,[4] 68[165]	90,[4] 98[165]	μmol/L	
		0.6,[166] 0.8[166]	1.0,[166] 1.1[166]	mg/dL	
BUN/Creatinine Ratio		5[18]	35[18]	-	
Plasma glucose (fasting)		3.8,[9] 4.0[4]	6.0,[4] 6.1[167]	mmol/L	<i>See also</i> glycated hemoglobin (in hematology)
		65,[10] 70,[9] 72[168]	100,[167] 110[18]	mg/dL	
Full blood glucose (fasting)		3.3[4]	5.6[4]	mmol/L	
		60[168]	100[168]	mg/dL	
Random glucose		3.9[169]	7.8[169]	mmol/L	
		70[170]	140[170]	mg/dL	
Lactate (Venous)		4.5[18]	19.8[18]	mg/dL	
		0.5[171]	2.2[171]	mmol/L	
Lactate (Arterial)		4.5[18]	14.4[18]	mg/dL	
		0.5[171]	1.6[171]	mmol/L	
Pyruvate		300[18]	900[18]	μg/dL	
		34[172]	102[172]	μmol/L	
Ketones			1[173]	mg/dL	
			0.1[173]	mmol/L	

Medication

Test	Lower limit	Upper limit	Unit	Comments
Digoxin	0.5 ^[174]	2.0 ^[174]	ng/ml	Narrow therapeutic window
	0.6 ^[174]	2.6 ^[174]	nmol/l	
Lithium	0.4, ^[175] 0.5, ^[176] ^[177] 0.8 ^[178]	1.3 ^[176] ^[177]	mmol/l	Narrow therapeutic window
Paracetamol		30 ^[179]	mg/L	Risk of paracetamol toxicity at higher levels
		200 ^[179]	μmol/L	

See also

- Cardiology diagnostic tests and procedures
- Comprehensive metabolic panel
- Medical technologist
- Reference range

Notes

1. The MCHC in g/dL and the mass fraction of hemoglobin in red blood cells in % are numerically identical in practice, assuming a RBC density of 1g/mL and negligible hemoglobin in plasma.

References

Template:WBC 6.13/UL

External links

- *biochemical reference values* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=724893718>) at GPnotebook
 - Descriptions at amarillomed.com (<http://www.amarillomed.com/howto.htm>)
 - Values at lymphomation.org (<http://www.lymphomation.org/CBC-blood-counts.htm>)
1. "Reference Ranges and What They Mean". Lab Tests Online (USA). Retrieved 22 June 2013.
 2. Page 19 (https://books.google.com/books?id=Je_pJfb2r0cC&pg=PA19) in: Stephen K. Bangert MA MB BChir MSc MBA FRCPath; William J. Marshall MA MSc MBBS FRCP FRCPath FRCPEdIn FIBiol; Marshall, William Leonard (2008). *Clinical biochemistry: metabolic and clinical aspects*. Philadelphia: Churchill Livingstone/Elsevier. ISBN 0-443-10186-8.
 3. Page 34: Units of measurement (<https://books.google.com/books?id=BfdighlyGiwC&printsec=frontcover&hl=en>) in Medical toxicology By Richard C. Dart Edition: 3, illustrated Published by Lippincott Williams & Wilkins, 2004 ISBN 0-7817-2845-2, ISBN 978-0-7817-2845-4 1914 pages
 4. Reference range list from Uppsala University Hospital ("Laborationslista"). Artnr 40284 Sj74a. Issued on April 22, 2008
 5. Arterial versus venous reference ranges - Brief Article (http://findarticles.com/p/articles/mi_m3230/is_4_32/ai_61893437/) Medical Laboratory Observer, April, 2000 by D. Robert Dufour
 6. Abbassi-Ghanavati, M.; Greer, L. G.; Cunningham, F. G. (2009). "Pregnancy and Laboratory Studies". *Obstetrics & Gynecology*. **114** (6): 1326. doi:10.1097/AOG.0b013e3181c2bde8.
 7. Armbruster, David; Miller (August 2007). "The Joint Committee for Traceability in Laboratory Medicine (JCTLM): A Global Approach to Promote the Standardisation of Clinical Laboratory Test Results". *The Clinical Biochemist Reviews*. **28** (3): 105–114. PMC 1994110. PMID 17909615.
 8. PROOPIOMELANOCORTIN; NCBI --> POMC (<http://www.uniprot.org/uniprot/P01189>) Retrieved on September 28, 2009
 9. Last page of Deepak A. Rao; Le, Tao; Bhushan, Vikas (2007). *First Aid for the USMLE Step 1 2008 (First Aid for the UsMLE Step 1)*. McGraw-Hill Medical. ISBN 0-07-149868-0.
 10. Normal Reference Range Table (<http://pathcuric1.swmed.edu/PathDemo/nrrt.htm>) from The University of Texas Southwestern Medical Center at Dallas. Used in Interactive Case Study Companion to Pathologic basis of disease.
 11. Derived from molar values using molar mass of 22.99 g•mol⁻¹
 12. Derived from molar values using molar mass of 39.10 g•mol⁻¹
 13. MERCK MANUALS > Common Medical Tests > Blood Tests (<http://www.merck.com/mmhe/appendices/ap2/ap2b.html>) Last full review/revision February 2003
 14. Derived from molar values using molar mass of 35.45 g•mol⁻¹

15. Larsson L, Ohman S (November 1978). "Serum ionized calcium and corrected total calcium in borderline hyperparathyroidism". *Clin. Chem.* **24** (11): 1962–5. PMID 709830.
16. Derived from molar values using molar mass of 40.08 g•mol⁻¹
17. Derived from mass values using molar mass of 40.08 g•mol⁻¹
18. Blood Test Results - Normal Ranges (<http://www.bloodbook.com/ranges.html>) Bloodbook.Com
19. Slon S (2006-09-22). "Serum Iron". University of Illinois Medical Center. Retrieved 2006-07-06.
20. Diagnostic Chemicals Limited > Serum Iron-SL Assay (http://www.dclmexico.com/ingles/hierro_sl.pdf) July 15, 2005
21. Derived from mass values using molar mass of 55.85 g•mol⁻¹
22. Table 1. (<http://www.clinchem.org/cgi/reprint/45/1/131.pdf>) Page 133" *Clinical Chemistry* 45, No. 1, 1999 (stating 1.9–3.3 g/L)
23. Derived by dividing mass values with molar mass
24. Ferritin (<http://www.nlm.nih.gov/medlineplus/ency/article/003490.htm>) by: Mark Levin, MD, Hematologist and Oncologist, Newark, NJ. Review provided by VeriMed Healthcare Network
25. Andrea Duchini. "Hemochromatosis Workup". *Medscape*. Retrieved 2016-07-14. Updated: Jan 02, 2016
26. Derived from mass values using molar mass of 450,000 g•mol⁻¹
27. Mitchell ML, Filippone MD, Wozniak TF (August 2001). "Metastatic carcinomatous cirrhosis and hepatic hemosiderosis in a patient heterozygous for the H63D genotype". *Arch. Pathol. Lab. Med.* **125** (8): 1084–7.
doi:10.1043/0003-9985(2001)125<1084:MCCAHH>2.0.CO;2. PMID 11473464.
28. Diaz J, Tornel PL, Martinez P (July 1995). "Reference intervals for blood ammonia in healthy subjects, determined by microdiffusion". *Clin. Chem.* **41** (7): 1048. PMID 7600690.
29. Derived from molar values using molar mass of 17.03 g/mol
30. Derived from mass values using molar mass of 63.55 g•mol⁻¹
31. *Reference range for copper* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=1040580630>) at GPnotebook
32. Derived from mass using molar mass of 151kDa
33. Walter F. Boron (2005). *Medical Physiology: A Cellular And Molecular Approach*. Elsevier/Saunders. ISBN 1-4160-2328-3. Page 849
34. <http://www.dlolab.com/PDFs/DLO-OCTOBER-2008-LAB-UPDATE.pdf>
35. Derived from molar values using molar mass of 65.38 g/mol
36. Derived from mass values using molar mass of 65.38 g/mol
37. Derived from molar values using molar mass of 24.31 g/mol
38. Derived from mass values using molar mass of 24.31 g/mol
39. Middleton P, Kelly AM, Brown J, Robertson M (August 2006). "Agreements between arterial and central venous values for pH, bicarbonate, base excess, and lactate". *Emerg Med J.* **23** (8): 622–4. doi:10.1136/emj.2006.035915. PMC 2564165. PMID 16858095.
40. The Medical Education Division of the Brookside Associates--> ABG (Arterial Blood Gas) (http://www.brooksidepress.org/Products/OperationalMedicine/DATA/operationalmed/Lab/ABG_ArterialBloodGas.htm) Retrieved on Dec 6, 2009
41. Derived from molar values using molar mass of 1.01 g•mol⁻¹
42. Derived from mmHg values using 0.133322 kPa/mmHg
43. Derived from molar values using molar mass of 44.010 g/mol
44. Derived from molar values using molar mass of 61 g/mol
45. *Reference range (albumin)* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=288686147>) at GPnotebook
46. Derived from mass using molecular weight of 65kD
47. Derived from mass values using molar mass of 585g/mol
48. Derived from molar values using molar mass of 585g/mol
49. Fachwörterbuch Kompakt Medizin E-D/D-E. Author: Fritz-Jürgen Nöhring. Edition 2. Publisher:Elsevier, Urban&FischerVerlag, 2004. ISBN 3-437-15120-7, ISBN 978-3-437-15120-0. Length: 1288 pages
50. GPnotebook > reference range (AST) (<http://www.gpnotebook.co.uk/simplepage.cfm?ID=322240579>) Retrieved on Dec 7, 2009
51. "Gamma-GT". *Leistungsverzeichnis*. Medizinisch-Diagnostische Institute. Retrieved 20 November 2011.
52. *Creatine kinase* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=1436155929>) at GPnotebook
53. Page 585 (https://books.google.com/books?id=AUSIRcV_as0C&pg=PA585) in: Lee, Mary Ann (2009). *Basic Skills in Interpreting Laboratory Data*. Amer Soc of Health System. ISBN 1-58528-180-8.
54. Muscle Information and Courses from MediaLab, Inc. > Cardiac Biomarkers (<http://www.medialabinc.net/muscle-keyword.aspx>) Retrieved on April 22, 2010
55. Brenden CK, Hollander JE, Guss D, et al. (May 2006). "Gray zone BNP levels in heart failure patients in the emergency department: results from the Rapid Emergency Department Heart Failure Outpatient Trial (REDHOT) multicenter study". *American Heart Journal.* **151** (5): 1006–11. doi:10.1016/j.ahj.2005.10.017. PMID 16644322.
56. Strunk A, Bhalla V, Clopton P, et al. (January 2006). "Impact of the history of congestive heart failure on the utility of B-type natriuretic peptide in the emergency diagnosis of heart failure: results from the Breathing Not Properly Multinational Study". *The American Journal of Medicine.* **119** (1): 69.e1–11. doi:10.1016/j.amjmed.2005.04.029. PMID 16431187.
57. Page 220 (https://books.google.com/books?id=AUSIRcV_as0C&pg=PA220) in: Lee, Mary Ann (2009). *Basic Skills in Interpreting Laboratory Data*. Amer Soc of Health System. ISBN 1-58528-180-8.
58. Adëeva Nutritional Canada > Optimal blood test values (<http://www.adeeva.com/resources/bloodtestscomplete.html>) Retrieved on July 9, 2009
59. Derived from values in mg/dl to mmol/l, by dividing by 89, according to faqs.org: What are mg/dl and mmol/l? How to convert? Glucose? Cholesterol? (<http://www.faqs.org/faqs/diabetes/faq/part1/section-9.html>) Last Update July 21, 2009. Retrieved on July 21, 2009

60. Derived from values in mg/dl to mmol/l, using molar mass of 386.65 g/mol
61. Reference range (cholesterol) (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=214630397>) at GPnotebook
62. Royal College of Pathologists of Australasia; Cholesterol (HDL and LDL) - plasma or serum (<http://www.rcpamanual.edu.au/sections/pathologytest.asp?s=33&i=450>) Last Updated: Monday, 6 August 2007
63. Derived from values in mmol/l, using molar mass of 386.65 g/mol
64. What Your Cholesterol Levels Mean. (<http://www.americanheart.org/presenter.jhtml?identifier=183>) American Heart Association. Retrieved on September 12, 2009
65. American Association for Clinical Chemistry; HDL Cholesterol (<http://www.labtestsonline.org/understanding/analytes/hdl/test.html>)
66. GP Notebook > range (reference, ca-125) ([http://www.gpnotebook.co.uk/simplepage.cfm?ID=100270014](https://www.gpnotebook.co.uk/simplepage.cfm?ID=100270014)) Retrieved on Jan 5, 2009
67. ClinLab Navigator > Test Interpretations > CA-125 (<http://www.clinlabnavigator.com/Test-Interpretations/ca-125.html>) Retrieved on March 8, 2011
68. Bjerner J, Høgetveit A, Wold Akselberg K, et al. (June 2008). "Reference intervals for carcinoembryonic antigen (CEA), CA125, MUC1, Alfa-foeto-protein (AFP), neuron-specific enolase (NSE) and CA19.9 from the NORIP study". *Scandinavian Journal of Clinical and Laboratory Investigation*. **68** (8): 1–12. doi:10.1080/00365510802126836. PMID 18609108.
69. Carcinoembryonic Antigen(CEA) (http://www.medicinenet.com/carcinoembryonic_antigen/article.htm) at MedicineNet
70. Basuyau JP, Mallet E, Leroy M, Brunelle P (October 2004). "Reference intervals for serum calcitonin in men, women, and children". *Clinical Chemistry*. **50** (10): 1828–30. doi:10.1373/clinchem.2003.026963. PMID 15388660.
71. The TSH Reference Range Wars: What's "Normal?", Who is Wrong, Who is Right... (<http://thyroid.about.com/od/gettestedanddiagnosed/a/tshtestwars.htm>) By Mary Shomon, About.com. Updated: June 19, 2006. About.com Health's Disease and Condition
72. 2006 Press releases: Thyroid Imbalance? Target Your Numbers (<http://www.aace.com/newsroom/press/2006/index.php?r=20060110>) Contacts: Bryan Campbell [American] Association of Clinical Endocrinologists
73. The TSH Reference Range Wars: What's "Normal?", Who is Wrong, Who is Right... (<http://thyroid.about.com/od/gettestedanddiagnosed/a/tshtestwars.htm>) By Mary Shomon, About.com. Updated: June 19, 2006
74. Demers, Laurence M.; Carole A. Spencer (2002). "LMPG: Laboratory Support for the Diagnosis and Monitoring of Thyroid Disease". National Academy of Clinical Biochemistry (USA). Retrieved 2007-04-13. - see Section 2. Pre-analytic factors
75. Free T4; Thyroxine, Free; T4, Free (http://labs.unchealthcare.org/labstestinfo/f_tests/free_t4.htm) UNC Health Care System
76. Derived from molar values using molar mass of 776.87 g/mol
77. Derived from mass values using molar mass of 776.87 g/mol
78. Table 4: Typical reference ranges for serum assays (<http://www.thyroidmanager.org/chapter6/Ch-6b-2.htm>) - Thyroid Disease Manager
79. van der Watt G, Haarburger D, Berman P (July 2008). "Euthyroid patient with elevated serum free thyroxine". *Clinical Chemistry*. **54** (7): 1239–41. doi:10.1373/clinchem.2007.101428. PMID 18593963.
80. Derived from mass values using molar mass of 650.98 g/mol
81. Cioffi M, Gazzero P, Vietri MT, et al. (2001). "Serum concentration of free T3, free T4 and TSH in healthy children". *Journal of Pediatric Endocrinology & Metabolism*. **14** (9): 1635–9. doi:10.1515/jpem.2001.14.9.1635. PMID 11795654. INIST:13391788.
82. Life Extension Foundation > Blood Testing Protocols (http://www.lef.org/protocols/appendix/blood_testing_03.htm)
83. Andrology Australia: Your Health > Low Testosterone > Diagnosis (<http://www.andrologyaustralia.org/pageContent.asp?pageCode=LOWTESTDIAG#LOWTESTDIAGNORM>)
84. Derived from mass values using molar mass of 288.42g/mol
85. Derived from molar values using molar mass of 288.42g/mol
86. MedlinePlus > Testosterone (<http://www.nlm.nih.gov/medlineplus/ency/article/003707.htm#Normal%20Values>) Update Date: 3/18/2008. Updated by: Elizabeth H. Holt, MD, PhD, Yale University. Review provided by VeriMed Healthcare Network. Also reviewed by David Zieve, MD, MHA, Medical Director
87. Derived from mass values using molar mass of 330.46g/mol
88. reference range (FSH) ([http://www.gpnotebook.co.uk/simplepage.cfm?ID=436600899](https://www.gpnotebook.co.uk/simplepage.cfm?ID=436600899)) GPnotebook. Retrieved on September 27, 2009
89. Values taken from day 1 after LH surge in: Stricker R, Eberhart R, Chevailer MC, Quinn FA, Bischof P, Stricker R (2006). "Establishment of detailed reference values for luteinizing hormone, follicle stimulating hormone, estradiol, and progesterone during different phases of the menstrual cycle on the Abbott ARCHITECT analyzer". *Clinical Chemistry and Laboratory Medicine*. **44** (7): 883–7. doi:10.1515/CCLM.2006.160. PMID 16776638.
90. New York Hospital Queens > Services and Facilities > Patient Testing > Pathology > New York Hospital Queens Diagnostic Laboratories > Test Directory > Reference Ranges (http://www.nyhq.org/Reference_Ranges&) Retrieved on Nov 8, 2009
91. Mayo Medical Laboratories > Test ID: LH, Luteinizing Hormone (LH), Serum (<http://www.mayomedicallaboratories.com/test-catalog/Clinical+and+Interprete/8663>), retrieved December 2012
92. GPNotebook - reference range (oestradiol) ([http://www.gpnotebook.co.uk/simplepage.cfm?ID=570818627&linkID=24801&cook=yes](https://www.gpnotebook.co.uk/simplepage.cfm?ID=570818627&linkID=24801&cook=yes)) Retrieved on September 27, 2009
93. Derived from molar values using molar mass of 272.38g/mol
94. Total amount multiplied by 0.022 according to 2.2% presented in: Wu CH, Motohashi T, Abdel-Rahman HA, Flickinger GL, Mikhail G (August 1976). "Free and protein-bound plasma estradiol-17 beta during the menstrual cycle". *J. Clin. Endocrinol. Metab.* **43** (2): 436–45. doi:10.1210/jcem-43-2-436. PMID 950372.
95. Derived from mass values using molar mass of 314.46 g/mol
96. Bhattacharya Sudhindra Mohan (July/August 2005) Mid-luteal phase plasma progesterone levels in spontaneous and clomiphene citrate induced conception cycles (<http://medind.nic.in/jaq/t05/i4/jaqt05i4p350.pdf>) J Obstet Gynecol India Vol. 55, No. 4 : July/August 2005 Pg 350-352

97. Dehydroepiandrosterone Sulfate (DHEA-S), Serum (<http://www.mayomedicallaboratories.com/test-catalog/Clinical+and+Interpretive/8493>) at Mayo Foundation For Medical Education And Research. Retrieved July 2012
98. Unit Code 91215 (http://www.mayomedicallaboratories.com/test-catalog/print.php?unit_code=91215) at Mayo Clinic Medical Laboratories. Retrieved April 2011
99. Antimüllerian Hormone (AMH), Serum (<http://www.mayomedicallaboratories.com/test-catalog/print/89711>) from Mayo Medical Laboratories. Retrieved April 2012.
100. Derived from mass values using 140,000 g/mol, as given in:
- Hampl R, Šnajderová M, Mardešić T (2011). "Antimüllerian hormone (AMH) not only a marker for prediction of ovarian reserve" (PDF). *Physiological Research*. **60** (2): 217–23. PMID 21114374.
101. Derived from mass values using molar mass of 4540g/mol. This molar mass was taken from: PROOPIOMELANOCORTIN; NCBI --> POMC (<http://www.uniprot.org/uniprot/P01189>) Retrieved on September 28, 2009
102. "Adrenocorticotrophic Hormone:Normal". WebMD. 09-03-2006. Retrieved 2008-11-09. Check date values in: |date= (help)
103. Derived from molar values using molar mass of 4540g/mol. This molar mass was taken from: PROOPIOMELANOCORTIN; NCBI --> POMC (<http://www.uniprot.org/uniprot/P01189>) Retrieved on September 28, 2009
104. Biochemistry Reference Ranges at Good Hope Hospital (<http://www.goodhope.org.uk/departments/pathweb/refranges.htm>) Retrieved on Nov 8, 2009
105. Derived from molar values using molar mass of 362 g/mol
106. Friedrich N, Alte D, Völzke H, et al. (June 2008). "Reference ranges of serum IGF-1 and IGFBP-3 levels in a general adult population: results of the Study of Health in Pomerania (SHIP)". *Growth Hormone & IGF Research*. **18** (3): 228–37. doi:10.1016/j.ghir.2007.09.005. PMID 17997337.
107. Taken from the assay method giving the lowest and highest estimate, respectively, from Table 2 (<http://www.clinchem.org/cgi/content/full/54/10/1673/T2>) in: Beltran L, Fahie-Wilson MN, McKenna TJ, Kavanagh L, Smith TP (October 2008). "Serum total prolactin and monomeric prolactin reference intervals determined by precipitation with polyethylene glycol: evaluation and validation on common immunoassay platforms". *Clinical Chemistry*. **54** (10): 1673–81. doi:10.1373/clinchem.2008.105312. PMID 18719199.
108. Derived from molar values using molar mass of 9.4 kDa
109. Table 2 (<http://www.ncbi.nlm.nih.gov/pmc/articles/mid/NIHMS10653/table/T2/>) in: Aloia JF, Feuerman M, Yeh JK (2006). "Reference range for serum parathyroid hormone". *Endocr Pract*. **12** (2): 137–44. doi:10.4158/ep.12.2.137. PMC 1482827. PMID 16690460.
110. Derived from mass values using molar mass of 9.4 kDa
111. Derived from molar values using molar mass 400.6 g/mol
112. Bender, David A. (2003). "Vitamin D". *Nutritional biochemistry of the vitamins*. Cambridge: Cambridge University Press. ISBN 0-521-80388-8. Retrieved December 10, 2008 through Google Book Search.
113. Bischoff-Ferrari HA, Dietrich T, Orav EJ, et al. (September 2004). "Higher 25-hydroxyvitamin D concentrations are associated with better lower-extremity function in both active and inactive persons aged > or = 60 y". *The American Journal of Clinical Nutrition*. **80** (3): 752–8. PMID 15321818.
114. Reusch J, Ackermann H, Badenhoop K (May 2009). "Cyclic changes of vitamin D and PTH are primarily regulated by solar radiation: 5-year analysis of a German (50 degrees N) population". *Horm. Metab. Res.* **41** (5): 402–7. doi:10.1055/s-0028-1128131. PMID 19241329.
115. Vasquez A, Cannell J (July 2005). "Calcium and vitamin D in preventing fractures: data are not sufficient to show inefficacy". *BMJ*. **331** (7508): 108–9; author reply 109. doi:10.1136/bmj.331.7508.108-b. PMC 558659. PMID 16002891.
116. Converted from values in mcU/mL by dividing with a factor of 11.2 mcU/mL per ng/(mL*hour), as given in:
- New Assays for Aldosterone, Renin and Parathyroid Hormone (<http://depts.washington.edu/labweb/referencelab/print/endo.pdf>) University of Washington, Department of Laboratory Medicine. Retrieved Mars 2011
117. Pratt RE, Flynn JA, Hobart PM, Paul M, Dzau VJ (March 1988). "Different secretory pathways of renin from mouse cells transfected with the human renin gene". *The Journal of Biological Chemistry*. **263** (7): 3137–41. PMID 2893797.
118. New Assays for Aldosterone, Renin and Parathyroid Hormone (<http://depts.washington.edu/labweb/referencelab/print/endo.pdf>) University of Washington, Department of Laboratory Medicine. Retrieved Mars 2011
119. Converted from values in ng/(mL*hour) by multiplying with a factor of 11.2 mcU/mL per ng/(mL*hour), as given in:
- New Assays for Aldosterone, Renin and Parathyroid Hormone (<http://depts.washington.edu/labweb/referencelab/print/endo.pdf>) University of Washington, Department of Laboratory Medicine. Retrieved Mars 2011
120. Converted from mass values using molar mass of 360.44 g/mol
121. Tiu SC, Choi CH, Shek CC, et al. (January 2005). "The use of aldosterone-renin ratio as a diagnostic test for primary hyperaldosteronism and its test characteristics under different conditions of blood sampling". *The Journal of Clinical Endocrinology and Metabolism*. **90** (1): 72–8. doi:10.1210/jc.2004-1149. PMID 15483077.
122. Central Manchester University Hospitals --> Reference ranges (<http://www.cmft.nhs.uk/directorates/labmedicine/USERGUIDE/pdfs/Haem%20-%20Coagulation%20Ref%20Ranges.pdf>) Retrieved on July 9, 2009
123. University of Kentucky Chandler Medical Center > Clinical Lab Reference Range Guide (<http://www.hosp.uky.edu/Clinlab/report.pdf>) Retrieved on April 28, 2009
124. Derived from mass values using molar mass of 441 mol-1
125. GPnotebook > B12 (<http://www.gpnotebook.co.uk/simplepage.cfm?ID=-2087059389&linkID=35554&cook=no>) Retrieved on April 28, 2009
126. Derived form molar values using molar mass of 1355g/mol

127. Derived from mass values using molar mass of 1355g/mol
128. The Doctor's Doctor: Homocysteine (<http://www.thedoctorsdoctor.com/labtests/homocysteine.htm>)
129. Derived from molar values using molar mass of 135 g/mol
130. Derived from mass values using molar mass of 176 grams per mol
131. For Driving under the influence by country, see Drunk driving law by country
132. Derived from mass values using molar mass of 46g/mol
133. Derived from mass values using 64,500 g/mol. This molar mass was taken from: Van Beekvelt MC, Colier WN, Wevers RA, Van Engelen BG (2001). "Performance of near-infrared spectroscopy in measuring local O₂ consumption and blood flow in skeletal muscle". *J Appl Physiol.* **90** (2): 511–519. PMID 11160049.
134. Normal Lab Values (<http://musom.marshall.edu/usmle/usmlelabvalues.htm>) at Marshall University Joan C. Edwards School of Medicine. Retrieved July 2013
135. molar concentration as given for *hemoglobin* above, but multiplied by 4, according to: Lodemann P, Schorer G, Frey BM (February 2010). "Wrong molar hemoglobin reference values-a longstanding error that should be corrected". *Annals of Hematology.* **89** (2): 209. doi:10.1007/s00277-009-0791-x. PMID 19609525.
136. Derived from mass concentration, using molar mass of 64,458 g/mol. This molar mass was taken from: Van Beekvelt MC, Colier WN, Wevers RA, Van Engelen BG (2001). "Performance of near-infrared spectroscopy in measuring local O₂ consumption and blood flow in skeletal muscle". *J Appl Physiol.* **90** (2): 511–519. PMID 11160049.. Subsequently, 1 g/dL = 0.1551 mmol/L
137. lymphomation.org > Tests & Imaging > Labs > Complete Blood Count (<http://www.lymphomation.org/CBC-blood-counts.htm>) Retrieved on May 14, 2009
138. Clinical Laboratory Medicine. By Kenneth D. McClatchey. Page 807. (<https://books.google.com/books?id=3PJVLH1NmQAC>)
139. Determination of monocyte count by hematological analyzers, manual method and flow cytometry in polish population (http://www.termedia.pl/magazine.php?magazine_id=10&article_id=6801&magazine_subpage=ABSTRACT) Central European Journal of Immunology 1-2/2006. (Centr Eur J Immunol 2006; 31 (1-2): 1-5) authors: Elżbieta Górska, Urszula Demkow, Roman Pińkowski, Barbara Jakubczak, Dorota Matuszewicz, Jolanta Gawęda, Wioletta Rzeszotarska, Maria Wąsik,
140. gpnotebook.co.uk > blood constituents (reference range) (<http://www.gpnotebook.co.uk/simplepage.cfm?ID=-637140985>) Retrieved on May 14, 2009
141. Demirin H, Ozhan H, Ucgun T, Celer A, Bulur S, Cil H, Gunes C, Yildirim HA (2011). "Normal range of mean platelet volume in healthy subjects: Insight from a large epidemiologic study". *Thromb. Res.* **128** (4): 358–60. doi:10.1016/j.thromres.2011.05.007. PMID 21620440.
142. Normal Values: RBC, Hgb, Hct, Indices, RDW, Platelets, and MPV (Conventional Units) (http://www.labcareplus.org/docs/REFERENCE_RANGES.pdf) From labcareplus. Retrieved 4 nov, 2010
143. Lozano M, Narváez J, Faúndez A, Mazzara R, Cid J, Jou JM, Marín JL, Ordinas A (1998). "[Platelet count and mean platelet volume in the Spanish population]". *Med Clin (Barc)* (in Spanish). **110** (20): 774–7. PMID 9666418.
144. MedlinePlus Encyclopedia 003652 (<https://medlineplus.gov/ency/article/003652.htm>)
145. *Antithrombin III* (<http://emedicine.medscape.com/article/2084978-overview>) at eMedicine
146. Antithrombin CO000300 (<http://mghlabtest.partners.org/coagbook/co000300.htm>) in *Coagulation Test Handbook* at Massachusetts General Hospital. In turn citing:
 - Elizabeth M. Van Cott, M.D., and Michael Laposata, M.D., Ph.D., "Coagulation." In: Jacobs DS et al, ed. *The Laboratory Test Handbook*, 5th Edition. Lexi-Comp, Cleveland, 2001; 327-358.
147. [1] (<http://pathology.bsuh.nhs.uk/pathology/Default.aspx?tabid=108>) Retrieved on November 20, 2009
148. Miller A, Green M, Robinson D (January 1983). "Simple rule for calculating normal erythrocyte sedimentation rate". *British Medical Journal.* **286** (6361): 266. doi:10.1136/bmj.286.6361.266. PMC 1546487. PMID 6402065.
149. Böttiger LE, Svedberg CA (1967). "Normal erythrocyte sedimentation rate and age". *Br Med J.* **2** (5544): 85–7. doi:10.1136/bmj.2.5544.85. PMC 1841240. PMID 6020854.
150. *C-reactive protein* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=946536472>) at GPnotebook
151. 2730 Serum C-Reactive Protein values in Diabetics with Periodontal Disease (http://iadr.confex.com/iadr/2008Toronto/techprogram/abstract_106289.htm) A.R. Choudhury, and S. Rahman, Birdem, Diabetic Association of Bangladesh, Dhaka, Bangladesh. (the diabetics were not used to determine the reference ranges)
152. Derived from mass using molar mass of 25,106 g/mol
153. Sipahi T, Kara C, Tavil B, Inci A, Oksal A (March 2003). "Alpha-1 antitrypsin deficiency: an overlooked cause of late hemorrhagic disease of the newborn". *Journal of Pediatric Hematology/Oncology.* **25** (3): 274–5. doi:10.1097/00043426-200303000-00019. PMID 12621252.
154. Derived from mass values using molar mass of 44324.5 g/mol
155. Derived from molar values using molar mass of 44324.5 g/mol
156. "Procalcitonin, Serum". <http://www.mayomedicallaboratories.com/>. Mayo Clinic. Retrieved 2015-03-01. External link in |website= (help)
157. The Society for American Clinical Laboratory Science > Chemistry Tests > Immunoglobulins (<http://www.ascls.org/labtesting/labchem.asp>) Retrieved on Nov 26, 2009
158. All values cited from Chronolab are given for ELISA
159. chronolab.com > Autoantibodies associated with rheumatic diseases > Reference ranges (<http://www.chronolab.com/rheumatic/range.htm>) Retrieved on April 29, 2010
160. Rajkumar SV, Kyle RA, Therneau TM, et al. (August 2005). "Serum free light chain ratio is an independent risk factor for progression in monoclonal gammopathy of undetermined significance". *Blood.* **106** (3): 812–7. doi:10.1182/blood-2005-03-1038. PMC 1895159.

PMID 15855274.

161. *Reference range (amylase)* (<https://www.gpnotebook.co.uk/simplepage.cfm?ID=309002307>) at GPnotebook
162. Ageno W, Finazzi S, Steidl L, et al. (2002). "Plasma measurement of D-dimer levels for the early diagnosis of ischemic stroke subtypes". *Archives of Internal Medicine*. **162** (22): 2589–93. doi:10.1001/archinte.162.22.2589. PMID 12456231.
163. Kline JA, Williams GW, Hernandez-Nino J (May 2005). "D-dimer concentrations in normal pregnancy: new diagnostic thresholds are needed". *Clinical Chemistry*. **51** (5): 825–9. doi:10.1373/clinchem.2004.044883. PMID 15764641.
164. Gardner MD, Scott R (April 1980). "Age- and sex-related reference ranges for eight plasma constituents derived from randomly selected adults in a Scottish new town". *Journal of Clinical Pathology*. **33** (4): 380–5. doi:10.1136/jcp.33.4.380. PMC 1146084. PMID 7400337.
165. Finney H, Newman DJ, Price CP (January 2000). "Adult reference ranges for serum cystatin C, creatinine and predicted creatinine clearance". *Annals of Clinical Biochemistry*. **37** (1): 49–59. doi:10.1258/0004563001901524. PMID 10672373.
166. Derived from molar values by multiplying with the molar mass of 113.118 g/mol, and divided by 10.000 to adapt from µg/L to mg/dL
167. MedlinePlus Encyclopedia *Glucose tolerance test* (<https://medlineplus.gov/ency/article/003466.htm>)
168. Derived from molar values using molar mass of 180g/mol
169. Derived from mass values using molar mass of 180g/mol
170. "Diabetes - Prevention". *Cleveland Clinic*. Retrieved 2016-06-23. Last revised 1/15/2013
171. Derived from mass values using molar mass of 90.08 g/mol
172. Derived from mass values using molar mass of 88.06 g/mol
173. *Ketones* (<http://emedicine.medscape.com/article/2087982-overview>) at eMedicine
174. Page 700 (<https://books.google.com/books?id=BfdighlyGiwC&pg=PA700>) in:
Richard C. Dart. *Medical Toxicology*. Lippincott Williams & Wilkins=year=2004. ISBN 9780781728454.
175. The UK Electronic Medical Compendium recommends 0.4–0.8 mmol/l plasma lithium level in adults for prophylaxis of recurrent affective bipolar manic-depressive illness Camcolit 250 mg Lithium Carbonate (<http://www.medicines.org.uk/emc/document.aspx?documentId=1239>) Revision 2 December 2010, Retrieved 5 May 2011
176. Amdisen A. (1978). "Clinical and serum level monitoring in lithium therapy and lithium intoxication". *J. Anal. Toxicol.* **2**: 193–202. doi:10.1093/jat/2.5.193.
177. R. Baselt, *Disposition of Toxic Drugs and Chemicals in Man*, 8th edition, Biomedical Publications, Foster City, CA, 2008, pp. 851–854.
178. One study (Solomon, D.; Ristow, W.; Keller, M.; Kane, J.; Gelenberg, A.; Rosenbaum, J.; Warshaw, M. (1996). "Serum lithium levels and psychosocial function in patients with bipolar I disorder". *The American Journal of Psychiatry*. **153** (10): 1301–1307. PMID 8831438.) concluded a "low" dose of 0.4–0.6 mmol/L serum lithium treatment for patients with bipolar 1 disorder had less side effects, but a higher rate of relapse, than a "standard" dose of 0.8–1.0 mmol/l. However, a reanalysis of the same experimental data (Perlis, R.; Sachs, G.; Lafer, B.; Otto, M.; Faraone, S.; Kane, J.; Rosenbaum, J. (2002). "Effect of abrupt change from standard to low serum levels of lithium: A reanalysis of double-blind lithium maintenance data". *The American Journal of Psychiatry*. **159** (7): 1155–1159. doi:10.1176/appi.ajp.159.7.1155. PMID 12091193.) concluded the higher rate of relapse for the "low" dose was due to abrupt changes in the lithium serum levels
179. John Marx; Ron Walls; Robert Hockberger (2013). *Rosen's Emergency Medicine - Concepts and Clinical Practice*. Elsevier Health Sciences. ISBN 9781455749874.

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