NMS Labs
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Robert A. Middleberg, PhD, F-ABFT, DABCC-TC, Laboratory Director

CONFIDENTIAL

Demo Report

Report Issued 03/30/2020 13:27
Last Report Issued 05/12/2015 09:15

88888
Clinical Example Report
Attn: Example Reports
200 Welsh Road
Horsham, PA 19044

Patient Name 4261B
Patient ID 4261B
Chain 15001007
Age Not Given **DOB** Not Given
Gender Not Given
Workorder 15001007

Received 05/12/2015 08:56

Sample ID 15001007-001
Matrix Blood
Patient Name 4261B
Patient ID 4261B
Container Type Clear vial

Collect Dt/Tm Not Given
Source Not Given

Approx Vol/Weight Not Given

Receipt Notes None Entered

Analysis and Comments	Result	Units	Reporting Limit	Notes
4261B Hypoglycemic Panel, Blood				
Analysis by High Performance Liquid Chromatography/ Tandem Mass Spectrometry (LC-MS/MS)				
Rosiglitazone	None Detected	ng/mL	40	
Synonym(s): Avandia®; Avandaryl®; Avandamet®				
Peak plasma concentrations of approximately 70 - 430 ng/mL and 240 - 830 ng/mL were achieved 1 hour after administration of4 mg and 8 mg daily doses, respectively.				
The blood to plasma ratio of Rosiglitazone is not known.				
Chlorpropamide	None Detected	mcg/mL	0.10	
Synonym(s): Diabinese®				
Peak plasma concentrations of approximately 75 - 360 mcg/mL were achieved 2 hours following chronic daily doses of 250 - 1000 mg.				
The blood to plasma ratio of Chlorpropamide is not known.				
Tolbutamide	None Detected	mcg/mL	0.10	

Results for sample 15001007-001 are continued on next page

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Sample ID 15001007-001
Matrix Blood
Patient Name 4261B
Patient ID 4261B

Collect Dt/Tm Not Given
Source Not Given

Analysis and Comments	Result	Units	Reporting Limit	Notes
Synonym(s): Orinase®				
Peak plasma concentrations of approximately 50 - 100 mcg/mL were achieved 3 -5 hours following chronic daily doses.				
The reported blood to plasma ratio of Tolbutamide is 0.5 - 0.6.				
Glipizide	None Detected	ng/mL	40	
Synonym(s): Glynase; Glucotrol®; Glibenese				
Peak plasma concentrations of approximately 310 - 610 ng/mL were achieved after administration of a single 5 mg dose of both immediate and extended release formulations. Maximum concentrations were reached in approximately 1.5 - 4.5 and 3.5 - 7 hours after immediate and extended release dosing, respectively.				
The blood to plasma ratio of Glipizide is not known.				
Pioglitazone	None Detected	ng/mL	40	
Synonym(s): ActoPlus Met®; Duetact®; Oseni®; Actos®				
Peak plasma concentrations of approximately 530 - 2600 ng/mL were achieved 1 - 4 hour after administration of 45 mg of pioglitazone.				
The blood to plasma ratio of pioglitazone is not known.				
Glyburide	None Detected	ng/mL	40	
Synonym(s): PresTab®; Glynase®; Glibenclamide; Micronase®				
Peak plasma concentrations of approximately 130 - 200 ng/mL following a single 5 mg dose have been reported. A group of ten diabetic patients given daily oral 2.5 mg doses for 6 weeks attained peak plasma glyburide concentrations averaging 140 ng/mL at 3 hours after the first dose and 240 ng/mL at 2.4 hours after the last dose.				
The reported blood to plasma ratio of Glyburide is 0.5.				
Glimepiride	None Detected	ng/mL	25	
Synonym(s): Duetact®; Avandaryl®; Amaryl®				

Results for sample 15001007-001 are continued on next page

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Sample ID 15001007-001
Matrix Blood
Patient Name 4261B
Patient ID 4261B

Collect Dt/Tm Not Given
Source Not Given

Analysis and Comments	Result	Units	Reporting Limit	Notes
Peak plasma concentrations of approximately 60 - 340 ng/mL were achieved 2 - 3 hours after administration of 4 mg of glimepiride. The blood to plasma ratio of Glimepiride is not known.				
Nateglinide	None Detected	mcg/mL	0.10	
Synonym(s): Starlix® Peak plasma concentrations of approximately 1.3 - 7.5 mcg/mL were achieved 0.5 hours following a single 60 mg dose. The blood to plasma ratio of Nateglinide is not known.				
Repaglinide	None Detected	ng/mL	10	
Synonym(s): PrandiMet®; Prandin® Peak plasma concentrations of approximately <10 - 180 ng/mL were achieved 1 hour after administration of 4 mg of repaglinide. The reported blood to plasma ratio of Repaglinide is 0.6 - 0.7.				

This test was developed and its performance characteristics determined by NMS Labs. It has not been cleared or approved by the US Food and Drug Administration.