



Ordering Physician:

John Doe, MD

**1234 Main St.
Anywhere, GA 30096**

Accession #: **A1107010113**
Order #: G1234567
Reference #:
Patient: **Sample Report**
Date of Birth: 02/05/1962
Age: 49
Sex: Female
Reprinted: 07/10/2013
Comment:

Date Collected: 06/30/2011
Date Received: 07/01/2011
Date of Report: 07/01/2011

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0060 Porphyrins Profile - Urine

Methodology: UPLC/Fluorescence detection, Colorimetry

Porphyrins - Urine Interpretation

For interpretive information, visit www.metamatrix.com/files/test-menu/interpretive-guides/Porphyrins-IG.pdf



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Ranges are for ages 13 and over

Compound Tested	Results nmol/g creatinine	Quintile Ranking 1st 2nd 3rd 4th 5th	95% Reference Range
Porphyrin Pathway Intermediates			
1. Uroporphyrin I & III	7.1		<= 27.2
2. Heptacarboxy porphyrin	2.6		<= 11.2
3. Hexacarboxy porphyrin	<DL		<= 3.3
4. Pentacarboxy porphyrin	<DL		<= 5.4
5. Precoproporphyrin*	7.2		<= 14.8
6. Coproporphyrin I	16		<= 56
7. Coproporphyrin III	35		<= 159
Calculated Values			
8. Total Porphyrins	61		<= 233
9. Precopro/Uro I & III	1.01 H		<= 1.11
10. Copro I/Copro III	0.46		<= 0.87

Creatinine = 175 mg/dL

<DL = less than detection limit

*Precoporphyrin is an atypical porphyrin associated with mercury toxicity.^{1,2}

1. J.S. Woods, M.A. Bowers, H.A. Davis, Toxicology and Applied Pharmacology 110, 464-476 (1991).
2. D. Echeverria et al., Neurotoxicology and Teratology 28 (2006) 39-48.



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No significant abnormalities are found at this time. This finding is inconsistent with the presence of active genetic porphyrias or toxic effects from mercury, arsenic or lead.

Although precoproporphyrin is not elevated, the relationship of its level to the level of Uroporphyrin I & III makes the ratio high. This pattern is consistent with the effect caused by mercury but may not warrant therapy in the absence of other evidence of mercury toxicity.

Although the Genova Diagnostics, Inc. profile will reveal disruptions in the heme pathway, the data is not reviewed by a specialist who can make a diagnosis of hereditary porphyrias. Abnormalities may be due to combinations of genetic or physiological factors and environmental exposures. All potential impacts on porphyrin synthesis should be considered when interpreting the results. The comments provided are intended to help alert clinicians to factors that may be relevant according to publ