

Client: Example Client ABC123  
123 Test Drive  
Salt Lake City, UT 84108  
UNITED STATES

Physician: Doctor, Example

**Patient: Patient, Example**

**DOB:** 4/1/2014  
**Gender:** Male  
**Patient Identifiers:** 01234567890ABCD, 012345  
**Visit Number (FIN):** 01234567890ABCD  
**Collection Date:** 01/01/2017 12:34

**Creatine Disorders Panel, Serum or Plasma**

ARUP test code 2002328

Creatine Disorder Serum/Plasma Interp

**See Note \***

ABNORMAL. Markedly elevated plasma guanidinoacetate and creatine most consistent with guanidinoacetate methyltransferase (GAMT) deficiency and creatine supplementation.

INTERPRETIVE INFORMATION: Creatine Disorders Panel, Plasma/Serum

Test developed and characteristics determined by ARUP Laboratories. See Compliance Statement B: aruplab.com/CS

Creatine, Serum/Plasma **900.2 umol/L H (Ref Interval: 37.0-117.0)**

Guanidinoacetic acid, Serum/Plasma **3.59 umol/L H (Ref Interval: 0.50-1.80)**

VERIFIED/REPORTED DATES

Procedure	Accession	Collected	Received	Verified/Reported
Creatine Disorder Serum/Plasma Interp	19-035-127943	2/4/2019 1:30:00 PM	2/7/2019 5:58:15 AM	2/12/2019 5:45:00 PM
Creatine, Serum/Plasma	19-035-127943	2/4/2019 1:30:00 PM	2/7/2019 5:58:15 AM	2/12/2019 5:45:00 PM
Guanidinoacetic acid, Serum/Plasma	19-035-127943	2/4/2019 1:30:00 PM	2/7/2019 5:58:15 AM	2/12/2019 5:45:00 PM

END OF CHART

**H=High, L=Low, \*=Abnormal, C=Critical**

Unless otherwise indicated, testing performed at:

**ARUP LABORATORIES | 800-522-2787 | aruplab.com**  
500 Chipeta Way, Salt Lake City, UT 84108-1221  
Tracy I. George, MD, Laboratory Director

Patient: Patient, Example  
ARUP Accession: 19-035-127943  
Patient Identifiers: 01234567890ABCD, 012345  
Visit Number (FIN): 01234567890ABCD  
Page 1 of 1 | Printed: 1/19/2021 12:49:16 PM  
4848