In-Common Laboratories
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Patient Name	Sex	Date of Birth (mm/dd/yyyy)
TEST, COPEPTIN	**M**	**02/19/1996**

Order ID
423223

Client's File No.

Health Number

ICL Login Date (mm/dd/yyyy)
08/11/2023 10:43AM EDT

Report Printed
08/14/2023 4:12PM EDT

Authorized Requester
ICL, ICL

Copeptin, Plasma/Serum

Sample ID: LON230811002

Final - Received 08/14/2023 3:30PM EDT

Collection Date/Time (mm/dd/yyyy)
08/11/2023 10:44AM EDT

Order Choice Plasma
Comments:

TEST	RESULT	FLAG	NORMAL/THERAPEUTIC RANGE	UNITS	TEST SITE
Copeptin,P	27.0			pmol/L	LON
Copeptin Interpretation	See Interp				LON

ADULT (>=18 YEARS):
Reference Interval (Non-Stimulated, Non-Fasting): <13.1 pmol/L (Keller T et al., JACC 2010; 55(19):2096-2106)

Nephrogenic Diabetes Insipidus (DI):
Baseline copeptin >=21.4 pmol/L in adults with polyuria-polydipsia syndrome had 100% sensitivity (sens) and specificity (spec) (Timper K et al., JCEM 2015; 100(6):2268-2274)

Central DI:
* Following hypertonic saline infusion, copeptin <=4.9 pmol/L identified complete/partial central DI (vs. primary polydipsia (PP)) with 93% sens and 100% spec (Fenske W et al., NEJM 2018; 379:428-439)
* At 60 min following arginine stimulation, copeptin <=3.8 pmol/L identified complete/partial central DI (vs. PP) with 93% sens and 92% spec (Winzeler B et al., Lancet 2019; 394(10198):587-595)

Reporting Laboratories:
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