

Dr. MARIA JOSE PINZON GARCIA
RED COLOMBIANA DE MEDICINA GENETICA SAS - PREGEN
BOGOTA
CARRERA 15 A # 106 - 42
11001 BOGOTA
Colombia

Date of Report 10.04.2026
Sample Received 07.04.2026
Date of Sampling 18.03.2026
LAB-ID 262015549

Medical Report

Patient name	COLMENARES MOREAU CARLA LUCIA	Sample-ID	A0362014
Date of Birth	18.03.2026	Gender	F

Indication: Newborn Screening

Method(s): Immunoassay, Tandem mass spectrometry from Dried Blood Spot

Results:

Parameter	Value	Unit	Reference
Birth weight (g)	2950	g	-
17-hydroxyprogesterone (17OHP)	21.5	nmol/L	< 90.0
Thyroid-stimulating hormone (TSH)	22.0	μU/mL	< 15.0
Biotinidase	109.9	U	> 51.0
Galactose-1-P-uridylyltransferase (GALT)	6.1	U/g Hb	> 2.5
Immunoreactive trypsinogen (IRT)	43.3	ng/mL	< 65.0
Phenylalanine	34.7	μmol/L	< 150.0
Amino acid profile	negative		-
Acylcarnitine profile	negative		-

Interpretation: **POSITIVE RESULT.**

TSH is elevated. Local TSH, T4, T3 and free T4, free T3 testing from serum is recommended. All other tests were normal.

Please note: Inconspicuous biochemical results cannot exclude any metabolic disease with certainty. We recommend genetic testing if clinical symptoms suggest any inborn error of metabolism. For further information please contact us: info@archimedlife.com. All methods are fully validated* and accredited.

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Date of Birth	18.03.2026

Sample-ID	A0362014
Gender	F

Results:

Amino Acids

Parameter	Value	Unit	Reference
Phenylalanine (Phe)	34.7	µmol/L	< 150.0
Phenylalanine / Tyrosine ratio (Phe/Tyr)	0.65	µmol/L	< 2.20
Tyrosine (Tyr)	53.3	µmol/L	< 200.0
Leucine (Leu)	66.2	µmol/L	< 270.0
Valine (Val)	51.0	µmol/L	< 200.0
Methionine (MET)	20.1	µmol/L	< 78.0
Methionine / Phenylalanine (Met/Phe)	0.58	µmol/L	< 1.60
Citrulline (Cit)	15.1	µmol/L	< 50.0
Ornithine (Orn)	49.9	µmol/L	< 250.0
Ornithine / Citrulline ratio (Orn/Cit)	3.30	µmol/L	1.50 - 20.00
Proline (Pro)	59.4	µmol/L	< 350.0
Alanine (Ala)	150.9	µmol/L	< 750.0
Arginine (Arg)	12.2	µmol/L	< 100.0
Aspartic acid (Asp)	30.2	µmol/L	< 100.0
Glutamic acid (Glu)	191.1	µmol/L	< 600.0
Glycamine (Gly)	202.5	µmol/L	< 700.0

Acylcarnitines

Free carnitine (C0)	12.87	µmol/L	6.00 - 100.00
acetylcarnitine (C2)	9.51	µmol/L	1.34 - 48.81
propionylcarnitine (C3)	0.92	µmol/L	0.13 - 6.60
butyryl-/isobutyrylcarnitine (C4)	0.19	µmol/L	0.03 - 0.90
isovaleryl-/2-methylbutyrylcarnitine(C5)	0.07	µmol/L	0.02 - 2.00
tiglylcarnitine (C5:1)	0.02	µmol/L	< 0.20
hydroxyvalerylcarnitine (C5OH)	0.14	µmol/L	0.02 - 0.57
glutarylacetyl carnitine (C5DC)	0.04	µmol/L	< 0.30
hexanoylcarnitine (C6)	0.03	µmol/L	0.01 - 0.13
octanoylcarnitine (C8)	0.02	µmol/L	0.01 - 0.30
decanoylcarnitine (C10)	0.02	µmol/L	0.01 - 0.36
decenoylcarnitine (C10:1)	0.07	µmol/L	< 0.30
decadienoylcarnitine (C10:2)	0.02	µmol/L	< 0.10
dodecanoylcarnitine (C12)	0.05	µmol/L	0.10 - 0.60
myristoylcarnitine (C14)	0.12	µmol/L	0.01 - 0.57
tetradecenoylcarnitine (C14:1)	0.07	µmol/L	0.10 - 0.38
palmitoylcarnitine (C16)	1.67	µmol/L	0.62 - 7.81
3-hydroxypalmitoylcarnitine (C16OH)	0.02	µmol/L	< 0.10
stearoylcarnitine (C18)	0.72	µmol/L	0.30 - 2.40
oleylcarnitine (C18:1)	1.80	µmol/L	0.06 - 3.86
3-hydroxystearoylcarnitine (C18OH)	0.01	µmol/L	< 0.09
malonylcarnitine (C3DC)	0.02	µmol/L	< 0.50

Amino acid levels are indicators of phenylketonuria, tyrosinemia, MSUD, hydroxyprolinuria, hypermethioninemia (homocystinuria), citrullinemia, argininosuccinate aziduria, hyperargininemia, and hyperprolinemia. Acylcarnitine levels are indicators of carnitine uptake disorders, CPT-I deficiency, CPT-II deficiency, CAT deficiency, propionaciduria, methylmalonic aciduria, malonic aciduria, SCAD deficiency/ethylmalonic aciduria, isovaleric aciduria, HMG-CoA lyase deficiency, 3-methylcrotonyl-CoA carboxylase deficiency, methylglutaconiduria, MCAD deficiency, VLCAD deficiency, LCHAD deficiency, glutaraziduria I, multiple acyl-CoA dehydrogenase deficiency (MAD deficiency/glutaraziduria II), and Beta-ketothiolase deficiency.

Please note: Inconspicuous negative biochemical results cannot exclude any inborn error of metabolism or endocrine disorder with certainty in newborns. We recommend any follow-up or genetic testing if any clinical symptoms are present.

Authorized By: Assoc.-Prof. Dr. Andrea-Romana KASPER, MD, PhD
[Specialist for Pediatrics, Neonatology and Nutrition]

Report was electronically signed and approved.

Contact Details

Assoc.-Prof. Dr. Andrea-Romana KASPER, MD, PhD
E-Mail: info@archimedlife.com

ARCHIMEDlife GmbH
International Medical Laboratory+
Leberstrasse 20/2 | 1110 Vienna, Austria
www.archimedlife.com