### Ordered Items
Procalcitonin

<table>
<thead>
<tr>
<th>TESTS</th>
<th>RESULT</th>
<th>FLAG</th>
<th>UNITS</th>
<th>REFERENCE</th>
<th>INTERVAL</th>
<th>LAB</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procalcitonin</td>
<td>0.08</td>
<td>01</td>
<td>ng/mL</td>
<td>0.00 - 0.08</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The change of PCT concentration over time provides prognostic information about the risk of mortality within 28 days for patients diagnosed with severe sepsis or septic shock coming from the emergency department, ICU, other medical wards, or directly from outside the hospital. Data supports the use of PCT determinations from the day severe sepsis or septic shock is first diagnosed (Day 0) or the day thereafter (Day 1) and the fourth day after diagnosis (Day 4) for the classification of patients into higher and lower risk for mortality within 28 days according to the workflow below:

$$\text{delta PCT} = \frac{\text{PCT Day 0 (or Day 1)} - \text{PCT Day 4}}{\text{PCT Day 0 (or Day 1)}} \times 100\%$$

A decrease of PCT levels below or equal to 80% defines a positive delta PCT test result representing a higher risk for 28-day all-cause mortality of patients diagnosed with severe sepsis or septic shock. A decreased of PCT levels of more than 80% defines a negative delta PCT result representing a lower risk for 28-day all-cause mortality of patients diagnosed with severe sepsis or septic shock.

To determine delta PCT results from the absolute PCT concentrations of a patient obtained on the day severe sepsis or septic shock was first diagnosed (or 24 hours later) and on Day 4, go to www.BRAHMS-PCT-Calculator.com.
General Comments & Additional Information
Clinical Info: ABNORMAL REPORT

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<tbody>
<tr>
<td>Procalcitonin</td>
<td>0.09</td>
<td>High</td>
<td>ng/mL</td>
<td>0.00 - 0.08</td>
<td>01</td>
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</tbody>
</table>

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For inquiries, the physician may contact Branch: 800-222-7566 Lab: 336-436-2762