

Patient: **SAMPLE  
PATIENT**

DOB:

Sex:

MRN:

## Vitamin D

Methodology: Chemiluminescent

	Inside Range	Reference Range:
25-Hydroxyvitamin D ♦	<b>55</b>	30-100 ng/mL

Deficiency:	<20 ng/mL
Insufficiency:	20-29 ng/mL
Sufficient:	30-100 ng/mL
Recommended:	50-80 ng/mL
Excessive:	>100 ng/mL

There is no consensus in the literature regarding optimal levels of 25-Hydroxyvitamin D. Higher levels of 25-Hydroxyvitamin D may be concerning in patients with renal failure. Levels below 30 ng/mL are considered insufficient by most medical associations.

Holick MF, et al. *J Clin Endocrinol Metab.* 2011;96(7):1911-1930.

Vitamin D Council: <https://www.vitamindcouncil.org/>

## Commentary

The performance characteristics of all assays have been verified by Genova Diagnostics, Inc. Unless otherwise noted with ♦, the assay has not been cleared by the U.S. Food and Drug Administration.

Commentary is provided to the practitioner for educational purposes, and should not be interpreted as diagnostic or as treatment recommendations. Diagnosis and treatment decisions are the practitioner's responsibility.

### Sufficient levels:

Vitamin D is a hormone produced in the skin during exposure to sunlight or consumed in the diet, and converted to its active form, calcitriol, in the liver and kidneys. Vitamin D helps regulate serum calcium and phosphorus levels by increasing intestinal absorption of calcium and stimulating tubular reabsorption of calcium. Vitamin D also affects numerous other functions in the body.

Recommended levels are protective against osteoporosis as well as infection, autoimmune disease, hypertension, arteriosclerosis, diabetes and insulin resistance, musculoskeletal pain, epilepsy, and migraine.