

Author(s):

| Signature: Sonia A. Cendejas | Digitally signed by Sonia A. Cendejas Date: 2015.12.04 08:43:56 -07'00' |
|------------------------------|--|
| Name: Sonia Cendejas | Title: Laboratory Manager |

Reviewer(s):

| ^{Signature:} Hoda Alamdar | Digitally signed by Hoda Alamdar DN: cn=Hoda Alamdar, o, ou, email=halamdar theranos.com, c=US Date: 2015.12.04 18.09.09 -08.00 |
|------------------------------------|---|
| Name: Hoda Alamdar | Title: General Supervisor |

| signature: Francisco Nepacena | Digitally signed by Francisco Nepacena DN: cris francisco Nepacena o=Theranos ou → IP Lab, email=FNepacena@Theranos.com, c=US Date: 2013:12.07 1 247:11 −08'00' |
|-------------------------------|---|
| Name: Francisco Nepacena | Title: Technical Supervisor |

| Signature: Jennifer Trick | Digitally signed by Jennifer Trick Date: 2015.12.04 08:58:23 -07'00' |
|---------------------------|---|
| Name: Jennifer Trick | Title: General Supervisor |

Approver(s):

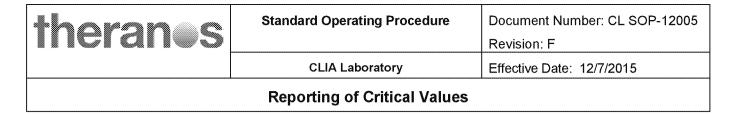
| Signature: Daniel L. Young | Digitally signed by Daniel L. Young Date: 2015.12.04 07:48:32 -08'00' |
|----------------------------|--|
| Name: Daniel Young | Title: Laboratory Director |

| Signature: Swell S. Pleawan M.D. | 12/7/2015 |
|----------------------------------|----------------------------|
| Name Sunil S. Dhawan, MD | Title: Laboratory Director |

The Laboratory Director or designee will review this procedure at least annually including revisions.

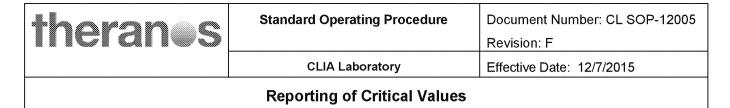
| Reviewed By: | Date: | Comments: |
|--------------|-------|-----------|
| | | |
| | | |
| | | |
| | | |
| | | |

| Theranos Confidential | Page 1 of 14 |
|-----------------------|--------------|
| | |





Theranos Confidential Page 2 of 14



1. Purpose

1.1. The purpose of this procedure is to guide Testing Personnel on how to communicate assay critical value(s) to the appropriate medical care provider, patient/guardian and emergency contact.

2. Scope

2.1. The scope of this procedure is intended to consistently and accurately communicate valuable information to the appropriate medical care provider, patient/guardian and emergency contact with proper documentation.

3. Responsibilities

3.1. Testing Personnel are responsible for following this procedure and informing the medical care provider, parent/guardian and emergency contact of every patient for which a critical value is obtained.

4. Definitions

- 4.1. Adult: Person 18 years old or older
- 4.2. Child: Person aged 1 month to 18 years
- 4.3. Patient: Individual who received testing by Theranos. Patients may also be called for critical results in connection with Direct Testing
- 4.4. Guardian: Legal guardian of a patient who may receive results for patient if patient is unreachable.
- 4.5. Newborn: Person aged one month or less
- 4.6. **Emergency Contact:** Emergency contact provided by patient and who may receive results for patient if patient is unreachable.
- 4.7. Critical Value Any test result that may require rapid clinical attention to avert significant patient morbidity or mortality.
- 4.8. **Medical care provider** A physician, physician's assistant, or nurse who is directly responsible for the patient at the time the critical result is called to access the patient's protected health information
- 4.9. **Testing Personnel** A healthcare professional who performs chemical, hematological, immunologic, microscopic and bacteriological diagnostic analyses on body fluids such as blood, urine, sputum, stool, cerebrospinal fluid (CSF), peritoneal fluid, pericardial fluid and synovial fluid, as well as other specimens.

5. Materials

- 5.1. Appendix A Critical Values
- 5.2. Appendix B Direct Testing Critical Values
- 5.3. Appendix C Scenarios for Patient, Provider and Government requests for results
- 5.4. Appendix D Critical Results Not Requiring Call to Medical Care Provider
- 5.5. CL FRM-12005-F1 Critical Value Log Sheet
- 5.6. CL FRM-12007-F3 Results Request Call Log

| Theranos Confidential | Page 3 of 14 |
|-----------------------|--------------|

| theranos | Standard Operating Procedure | Document Number: CL SOP-12005 Revision: F |
|------------------------------|------------------------------|---|
| | CLIA Laboratory | Effective Date: 12/7/2015 |
| Reporting of Critical Values | | |

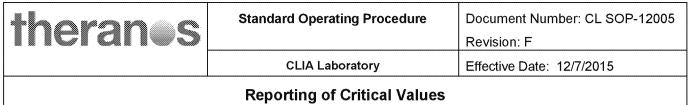
6. Timing

6.1. Critical calls to medical care providers, patient/guardian and emergency contact should be made immediately upon identification of a critical result. If the first attempt is unsuccessful, secondary and tertiary attempts should be made as appropriate.

7. Procedure

- 7.1. Reporting Critical Results to Medical Provider:
 - 7.1.1. If a patient's sample exhibits any of the critical values listed in Appendix A, follow the procedure below:
 - 7.1.2.Call the medical care provider listed on the requisition. This first call/attempt should happen immediately upon identification of a critical result, regardless of time of day
 - 7.1.3. Tell the medical care provider the following:
 - 7.1.3.1. The patient's name, date of birth, gender and Reference ID (this is the LIS Accession Number
 - 7.1.3.2. The name of the test(s) and its critical value(s)
 - 7.1.3.3. Ask the medical care provider to repeat it back to you
 - 7.1.4.Document this event on a Critical Value Log sheet Form (CL FRM-12005-F1)
 - 7.1.5.If there is no answer, leave the following scripted message.
 - 7.1.5.1. This message is for Dr. ______. My name is ______ and I am a <insert title> for Theranos. I have an urgent message that needs your immediate attention concerning your patient and a critical value. Please call 650-461-7653 (for Arizona) 855-843-7200 (for Newark) and ask for me or the <insert title> on duty. Your reference ID is <LIS Accession Number>
 - 7.1.6. When the medical care provider calls back, verify the provider's identity in accordance with **Authentication Matrix (see Appendix C)** and then follow step 7.1.3. Ensure that you ask for the Reference D to quickly locate Caller the visit in return LIS.
 - 7.1.7.Note: If the call is made towards the end of the shift and there will not be a person at Theranos Request that the Doctor return your call within one hour because there would be not be a person to answer to answer the call, leave the patient's name, Date of Birth, gender and the critical value. his/her call until the following day
 - 7.1.8.If an answering service answers your phone call, communicate the following scripted message:
 - 7.1.8.1. My name is _____ and I am a <insert title> for Theranos. Please have the "on call "doctor" paged. I have an urgent message that needs his/her immediate attention concerning a patient and a critical value. Please call 650-461-7653 (for Arizona) 855-843-7200 (for Newark) and ask for me or the <insert title> on duty. Your reference ID is <LIS Accession Number>
 - 7.1.9. When the medical care provider calls back, verify the provider's identity in accordance with the **Authentication Matrix (see Appendix C)** and then follow step 7.1.3. Ensure that you ask for the Reference ID to quickly locate the visit in LIS.
 - 7.1.10. Note: If the call is made towards the end of the shift and there will not be a person at Theranos to answer the return call, leave the patient's name, Date of Birth, gender and the critical value. Request that the Doctor return your call within one hour because there would not be a person to answer his/her call until the following day.

| Page 4 of 14 |
|--------------|
| |



- 7.1.11. See Appendix D for critical results and associated ICD-9 codes that do not require a call to the medical care provider
- 7.1.12. If critical result cannot be given to the medical care provider on the first attempt, log the attempt into the log and release the result through the LIS
- 7.1.13. Review log for necessary secondary and tertiary calls and make the appropriate calls and log appropriately until 3 attempts for every critical result have been completed
- 7.2. Reporting Critical Results to Patient for Direct Testing:
 - 7.2.1. If a patient's sample exhibits any of the critical values listed in Appendix B, follow the procedure below:
 - 7.2.2. Call the patient/guardian listed on the requisition. This first call/attempt should happen immediately upon identification of a critical result, regardless of time of day
 - 7.2.3. Tell the patient/guardian the following:
 - 7.2.3.1. The patient's name, date of birth, gender and Reference ID (this is the LIS Accession Number)
 - 7.2.3.2. The name of the test(s) and its critical value(s)
 - 7.2.3.3. Ask the patient/guardian to repeat it back to you
 - 7.2.3.4. Please contact your healthcare provider regarding these results and obtaining appropriate medical care. If your healthcare provider is not available please seek immediate medical attention. **Do not provide any interpretative information.**
 - 7.2.4. Document this event on the Critical Value Log sheet Form (CL FRM-12005-F1)
 - 7.2.5. If there is no answer, leave the following scripted message:
 - 7.2.5.1. This message is for ______ and I am a <insert title> for Theranos. I have an urgent message that needs your immediate attention concerning a critical value for a test that was performed by our laboratory. Please call 650-461-7653 (for Arizona) 855-843-7200 (for Newark) and ask for me or the <insert title> on duty. Your reference ID is <LIS Accession Number>
 - 7.2.6. When the patient/guardian calls back, verify the patient/guardian's identity in accordance with the **Authentication Matrix (see Appendix C)** and then follow step 7.2.3. Ensure that you ask for the Reference ID to quickly locate the visit in LIS
 - 7.2.7. Note: If the call is made towards the end of the shift and there will not be a person at Theranos to answer the return call, leave the patient's name, Date of Birth, gender and the fact that a critical value has been obtained for a lab result from the patient's visit. Request that the patient return your call back immediately.
 - 7.2.8.If critical result cannot be given to the patient on the first attempt, log the attempt into the **Critical**Value Log sheet Form (CL FRM-12005-F1) and release the result through the LIS
 - 7.2.9.Review log for necessary secondary and tertiary calls and make the appropriate calls and log appropriately until 3 attempts for every critical result have been completed
 - 7.2.10. If a patient/guardian does not answer on the first attempt then we contact the Emergency Contact using the following script:
 - 7.2.10.1. Hello, My name is _____ and I am a <insert title> for Theranos. We are trying to reach <patient> regarding a critical result for a test that was performed by our laboratory. Can you assist us in reaching this individual?

| Theranos Confidential | Page 5 of 14 |
|-----------------------|--------------|
|-----------------------|--------------|



| Standard Operating Procedure | Document Number: CL SOP-12005 | |
|------------------------------|-------------------------------|--|
| | Revision: F | |
| CLIA Laboratory | Effective Date: 12/7/2015 | |
| | | |

| 7.2.11. | If you need to | leave a message, | utilize the | following script: |
|---------|----------------|------------------|-------------|-------------------|
| | | | | |

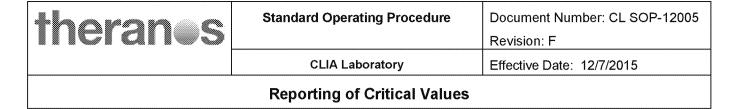
| 7.2.11.1. | This message is for | My name is | and I am a <insert title=""> for</insert> |
|-----------|--|---|---|
| The | eranos. I have an urgent messa | ge that needs your immediate | attention concerning a critical |
| val | ue for <patient> for a test that wa</patient> | as performed by our laborator | y. We are calling you because |
| yoι | ı are listed as <patient> Emergei</patient> | ncy Contact. Please call 650- | -461-7653 (for Arizona) 855- |
| 843 | 3-7200 (for Newark) and ask for i | me or the <insert title=""> on dut</insert> | y. Please also contact |
| < | atient> and inform them of the ne | ed to contact our laboratory i | mmediately at this number. |
| Yο | ur reference ID is <lis accession<="" td=""><td>n Number></td><td></td></lis> | n Number> | |

- 7.2.12. When the Emergency Contact calls back, verify the Emergency Contact's identity in accordance with the Authentication Matrix (see Appendix C) and then follow step 7.2.3. Ensure that you ask for the Reference ID to quickly locate the visit in LIS
- 7.2.13. Second Attempt to Emergency Contact will use the following process:
- 7.2.14. Tell the Emergency Contact the following:
 - 7.2.14.1. The patient's name, date of birth, gender and Reference D (LIS Accession Number)
 - 7.2.14.2. The fact that a critical value has been obtained for a result on the patient's visit
 - 7.2.14.3. Ask the Emergency Contact to repeat it back to you
 - 7.2.14.4. Please contact <patient> and have <patient> contact his/her healthcare provider regarding these results and obtaining appropriate medical care. If <patient>'s healthcare provider is not available, please advise <patient> to seek immediate medical attention. Do not provide any interpretative information.
- 7.2.15. Document this event on the Critical Value Log sheet Form (CL FRM-12005-F1)
- 7.2.16. If you need to leave a message, utilize the following script:
 - 7.2.16.1. This message is for _______ and I am a <insert title> for ______ Theranos. I have an urgent message that needs your immediate attention concerning a critical value for <patient>: We are calling you because you are listed as <patient> Emergency Contact. Please call 650-461-7653 (for Arizona) 855-843-7200 (for Newark) and ask for me or the <insert title> on duty. Please also contact <patient> and inform them of the need to contact our laboratory immediately at this number. Your reference ID is <LIS Accession Number>
- 7.3. Releasing Partial CBC Results for HGB and HCT (rest are pending slide review):
 - 7.3.1. CBC results are imported
 - 7.3.2. One or both of HGB and/or HCT are critical AND there is a need to perform a slide review
 - 7.3.3. Team calls critical for HGB and/or HCT
 - 7.3.4. Team wishes to report HGB and HCT because neither will be changed based on slide review
 - 7.3.5. When there is a pending Action on CBC, the team cannot Approve All. However, the team can Approve Checked or edit and release any individual result on the visit

7.4. Calling Slide Review Results:

7.4.1.When a Slide Review is needed to confirm results, the Newark team will confirm/modify the results based on slide review. The Newark team will then call any critical results that have been confirmed and/or modified. See above instructions for calling critical results to medical care provider and/or patient

| Page 6 of 14 |
|--------------|
| |



7.5. No Diagnosis Code:

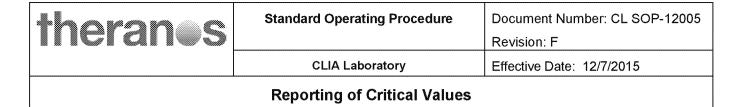
7.5.1. If no diagnosis code is written on the order, you must call on any critical results (see appendix D for Critical Results Not Requiring Call to Medical Care Provider

7.6. Requests for Results

Theranos Confidential

- 7.6.1.Laboratory may be contacted or results to be send by patient, provider and/or government agency. Results can be obtained through the Customer Service Department or the Laboratory Rersonnel (see Appendix C for call scenarios)
- 7.6.2. Authenticate caller using 3 elements in accordance with Authentication Matrix (see Appendix C)
- 7.6.3. After the caller has been authenticated, release requested information
 - If the caller cannot be authenticated, notify the caller that results cannot be released at this time and escalate the issue to a supervisor immediately
- 7.6.4. Document all calls and any actions taken on CL FRM-12007-F3 Inbound Outbound Call Log





8. Revision History

| REVISION HISTORY | | | | |
|------------------|---|-------------------------------------|--|--|
| Revision Level | Effective Date | Initiator | DCO Number | |
| A | 4/1/2014 | L. Gee | CL DCO-00007 | |
| В | 5/2/2014 | L. Gee | CL DCO-00012 | |
| С | 8/1/2014 | L. Gee | CL DCO-00029 | |
| D | 10/7/2015 | S. Cendejas | CL DCO-00103 | |
| E | 09/19/2015 | L Gee | CL DCO-00100 | |
| F | 12/2/2015 | S. Çendejas | CL DCO-00109 | |
| Section Number | Description and Justification of Changes | | | |
| All | Adding in timing of critical result directions for direct testing and confirmed/modified by slide reviews | critical calls to patients, and res | and hematocrit results, sponsibility for critical calls | |
| All | Added section 7.6 for Authentication of Callers. Added Appendixes A, B & C for SOP references | | | |
| Rev. E | Removed crystals in Urinalysis section | | | |
| Rev. F | Update definitions, materials, | and procedure. Adding in | direct testing critical results | |

| Theranos Confidential | Page 8 of 14 |
|-----------------------|--------------|



| Standard Operating Procedure | Document Number: CL SOP-12005 | |
|------------------------------|-------------------------------|--|
| | Revision: F | |
| CLIA Laboratory | Effective Date: 12/7/2015 | |

Appendix A

CHEMISTRY

| Test | Units | Age | Lower Limit | Upper Limit |
|-----------------------------------|--------|----------|---|-------------|
| Albumin | g/dL | Children | 1.7 | 6.8 |
| Bicarbonate (CO2) | mmol/L | Any age | 10 | 40 |
| Bilirubin, total | mg/dL | < 1 year | | 75 |
| Urea Nitrogen, Serum or plasma | mg/dL | Adult | | 80 |
| Urea Nitrogen, Serum or plasma | mg/dL | Children | - (| 55 |
| Calcium | mg/dL | Adult | 6 | 13 |
| Calcium | mg/dL | Children | 6.5 | 12.7 |
| Chloride | mEq/L | Any age | 80 | 120 |
| Creatinine | mg/dL | Adult | | 5 |
| Creatinine | mg/dL | Children | | 3.8 |
| Glucose | mg/dL | Newborn | 40 | 200 |
| Glucose | mg/dL | Children | 46 | 445 |
| Glucose | mg/dL | Adult | 40 | 450 |
| Iron | ug/dL | Any age | \ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \ | 500 |
| Magnesium | ug/dL | Any age | <u> 1</u> | 4.7 |
| Phosphorus | mg/dL | Any age | 1 | 9 |
| Potassium | mEq/L | Newborn | 2.8 | 6.2 |
| Potassiûm | mEq/L | Adult | 2.8 | 6.2 |
| Protein, total | g/dL | Children | 3.4 | 9.5 |
| Sodium | mEq/L | Any age | 120 | 160 |
| Troponin | ng/mt_ | Any age | - | 1.0 |

| Theranos Confidential | Page 9 of 14 |
|-----------------------|--------------|
|-----------------------|--------------|



| Standard Operating Procedure | Document Number: CL SOP-1200 | |
|------------------------------|------------------------------|--|
| | Revision: F | |
| CLIA Laboratory | Effective Date: 12/7/2015 | |

COAGULATION

| Test | Units | Age | Lower Limit | Upper Limit |
|------------|-------|---------|-------------|-------------|
| aPTT | sec | Any age | - | 100 |
| Fibrinogen | mg/dL | Any age | 100 | 800 |
| INR | - | Any age | - | >5 |
| PT | sec | Any age | - | 45 |

HEMATOLOGY

| Test | Units | Age | Lower Limit | Upper Limit |
|--------------|-------------------|------------------|------------------|---|
| ANC | K/μL | Any age | 0.5 | |
| Hct (PCV) | % | Any age | 21.0 | 65.0 |
| Hgb | g/dL | Any age | 77.0 | |
| Plt | K/μL | Any age 🔨 | <u></u> | |
| Plt | K/μL | Any age | √\100\if.2+\ | |
| | - | | microanglopathic | |
| | | | changes \ | |
| WBC | K/μL | Any age | 0.5 | 50.0 |
| | · | (outpatient) | | |
| Manual | % | Any age | / />/ | Blasts >0 (1st time or |
| Differential | | | | relapse) |
| | - / | 11 (1 / 1 / 1) | Smear | Depranocytes (sickle |
| | | | consistent | cells) present (1st time or |
| | <u>-</u> <\ \ | | with aplastic | relapse) |
| | | | anemia | Intracellular organisms |
| | $L \cap L \cap M$ | | | present |

URINALYSIS

| Test | Units | Age | Upper Limit |
|---------|-------|---------|-------------|
| Glucose | mg/dL | Any age | 500 |
| Ketones | mg/dL | Any age | 80 |

Theranos Confidential Page 10 of 14



| Standard Operating Procedure | Document Number: CL SOP-12005 | |
|------------------------------|-------------------------------|--|
| | Revision: F | |
| CLIA Laboratory | Effective Date: 12/7/2015 | |

Appendix B

Direct Testing Critical Values

GENERAL IMMUNOLOGY

| | • | 7 7 8 7 7 9 |
|---|---------------------|-------------|
| Test | Age | Result |
| Chlamydia, DNA, Qualitative | Any age | Positive |
| Gonorrhea, DNA, Qualitative | Any age | Positive |
| HbsAg | Any age | Reactive |
| HCV Antibody Screen | Any age | Reactive |
| HIV 1 Antibody Screen w/ reflex to IHC-1/HIV-2 Antibody | Any age | Reactive |
| Differentiation | $I/I \cap I \cap I$ | |
| HIV 2 Antibody Screen w/ reflex to IHC-1/HIV-2 Antibody | Any age | Reactive |
| Differentiation | | |
| HIV-1/HIV-2 Antibody Differentiation | Any age | Reactive |
| Treponema pallidum Ab | Any age | Reactive |

CHEMISTRY

| Test | Units | Age | Lower Limit | Upper Limit |
|-----------------------------------|--------|----------|-------------|-------------|
| Albumin | g/dL | Children | 1.7 | 6.8 |
| Bicarbonate (CO2) | mmol/L | Any age | 710 | 40 |
| Bilirubin, total | mg/dL | < 1 year | <u> </u> | 15 |
| Urea Nitrogen, Serum or plasma | mg/dL | Adult | - | 80 |
| Urea Nitrogen, Serum or plasma | mg/dL | Children | - | 55 |
| Calcium > | mg/dL | Adult | 6 | 13 |
| Calcium | mg/dL | Children | 6.5 | 12.7 |
| Chloride | mEq/L | Any age | 80 | 120 |
| Creatinine | mg/dL | Adult | - | 5 |
| Creatinine | mg/dL | Children | - | 3.8 |
| Glucose | mg/dL | Newborn | 40 | 200 |
| Glucose | mg/dL | Children | 46 | 445 |
| Glucose | mg/dL | Adult | 40 | 450 |
| Iron | ug/dL | Any age | - | 500 |
| Magnesium | ug/dL | Any age | 1 | 4.7 |
| Phosphorus | mg/dL | Any age | 1 | 9 |
| Potassium | mEq/L | Newborn | 2.8 | 6.2 |
| Potassium | mEq/L | Adult | 2.8 | 6.2 |
| Protein, total | g/dL | Children | 3.4 | 9.5 |

Theranos Confidential Page 11 of 14



| Standard | Operating | Procedure |
|----------|-----------|-----------|
|----------|-----------|-----------|

Document Number: CL SOP-12005

Revision: F

CLIA Laboratory

Effective Date: 12/7/2015

Reporting of Critical Values

| Sodium | mEq/L | Any age | 120 | 160 |
|----------|-------|---------|--------------|-----|
| Troponin | Ng/mL | Any age | - | 1.0 |

COAGULATION

| Test | Units | Age | Lower Limit | Upper Limit |
|------------|-------|---------|-------------|-------------|
| aPTT | sec | Any age | | 100 |
| Fibrinogen | mg/dL | Any age | 100 | 800 |
| INR | - | Any age | - \ | > 5 |
| PT | sec | Any age | - /^\ | 45 |

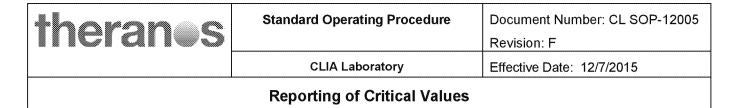
HEMATOLQGY

| Test | Units | Age | Lower Limit | Upper Limit |
|--------------|--------------------|-----------------------------|---------------------------|---|
| ANC | K/μL | Any age | 0.5 | |
| Hct (PCV) | % | Any age | 21.0 | 65.0 |
| Hgb | g/dL | Any age | 7.0 | <u>-</u> |
| Plt | K/μL | Any age | \ \10\ \ \ | - |
| Plt | K/μL | Any age | 100 if 2+ | |
| | · | | microangiopathic | |
| | | | changes | |
| WBC | K/μL | Any age | ∖(``\0.5 | 50.0 |
| | | (outpatient) | : \``\`` | |
| Manual | % 🐴 🔪 | Any age | ~_) - | Blasts >0 (1st time or |
| Differential | | | | relapse) |
| | I/n^{-1} | | Smear | Depranocytes (sickle |
| | | $N \setminus N \setminus M$ | consistent | cells) present (1st time or |
| \ , < | $>$ N - γ | | with aplastic | relapse) |
| | | 2 \ | anemia | Intracellular organisms |
| | | ~ <i>/</i> | | present |
| | | > | | , |

URINALYSIS

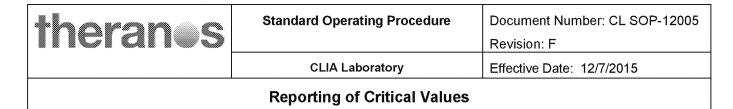
| Test | Units | Age | Upper Limit |
|---------|-------|---------|------------------------------|
| Glucose | mg/dL | Any age | 500 |
| Ketones | mg/dL | Any age | 80 |
| Micro | - | Any age | Pathological crystals |
| | | | (e.g., Urate, Cys, Leu, Tyr) |

Theranos Confidential Page 12 of 14



Appendix C

HIPAA Caller Authentication Matrix - Customer Service Department MUST authenticate (3) or more data elements before releasing PHI Healthcare Authentication Parent / **Emergency** Provider/Practice **Patient** Plans/Government **Data Elements** Guardian Contact Agencies Patient Name Х Х Х Patient DoB Х **Patient Address** Х Contact Name Relationship to Patient Accession Number / Sample ID (SID) Provider / Х Practice Name Provider / Practice Phone Number



Appendix D

| | Critical Results Not Requiring Call to Medical Care Provider | | | |
|---------------------------|--|--|--|--|
| ICD-9 Code | Test | ICD-9 Long Description | | |
| V42.23, V42.33, V58.61 | PT and INR | | | |
| 268.9 | Vitamin D | Unspecified Vitamin D Deficiency (toxic/critical Vitamin D results) | | |
| 244.9 | TSH, Free T4, T3 | Unspecified hypothyroidism | | |
| 786 | CO2/Bicarbs | Hyperventialtion for CO2/Bicarbs | | |
| 276 | K | Hyperkalemia for Potassium (also we can include hypo as well). Also with electrolytes. | | |
| 585 | BUN, eGFR Crea | Kidney dse For BUN, eGFR and Crea (mostly for CMP's) | | |
| 204, 205, 208 | CBC | Leukemia's for CBC's | | |
| 287 | PLT | Thom/ocytopenia/purpura for PLT | | |
| 791 | Ketones | Elevated Urine ketones | | |

Theranos Confidential Page 14 of 14