

Lab document for Danny D Jackson for the following tests and procedures: ALBUMIN/CREAT URINE RATIO.

Jackson, Danny D (MRN 4007083)

Encounter Date: 12/05/2025



**Kidney Care of Oregon**

1077 GATEWAY LOOP  
SPRINGFIELD OR 97477-1114

**Phone:** 541-485-6478  
**Fax:** 541-485-0452

**Patient Information:**

**Name:** Danny D. Jackson

**Phone:** 541-654-6044

**MRN:** 4007083

**Address:** 1507 Bennett Creek Rd

**Gender:** M **Sex:** M

Cottage Grove OR 97424

**Date of Birth:** 2/18/1944

**Insurance Information:**

<b>Primary Insurance:</b>	<b>Secondary Insurance:</b>
<b>Ins Co Name:</b> Medicare <b>Address 1:</b> PO BOX 1030 <b>Address 2:</b> <b>City, State Zip:</b> MARION, IL 62959-7530 <b>Policy Number:</b> 4YX0EK8YT41 <b>Group #:</b>	<b>Ins Co Name:</b> AARP Supplemental (36273) <b>Address 1:</b> PO BOX 1878 <b>Address 2:</b> <b>City, State Zip:</b> SOUTHAMPTON, PA 18966-9998 <b>Policy Number:</b> 03450428711 <b>Group #:</b>
<b>Primary Policy Holder / Insured:</b>	<b>Secondary Policy Holder / Insured:</b>
<b>Name:</b> JACKSON,DANNY D <b>Address:</b> 1507 Bennett Creek Rd Cottage Grove, OR 97424 <b>Pt Relation to</b> Self <b>Subscriber:</b>	<b>Name:</b> JACKSON,DANNY D <b>Address:</b> 1507 Bennett Creek Rd Cottage Grove, OR 97424 <b>Pt Relation to</b> Self <b>Subscriber:</b>

**Orders**

**Date Ordered:** Dec 5, 2025

**Time Ordered:** 12:04 PM

**Urine Albumin / Creatinine Ratio**

**Comments:**

**Order ID:** 636755499

**Expires:** 1/5/2027

**Expected:** 12/5/2025

**Specimen Source:** Urine, Clean Catch

**Count:** 1

**Order Priority:** Routine

**Associated Diagnoses:**

Other proteinuria (R80.8); Membranous glomerulonephritis (N03.2)

**Order Entered by:** Sanghvi, Shalin, MD

**Authorizing Provider:** Sanghvi, Shalin, MD (NPI: 1366490914)

**Electronically Signed by:** Sanghvi, Shalin, MD