



310 SELBY STREET NORTH, OSBORNE PARK WA 6017  
TEL (08) 9371 4200 FAX (08) 9371 4444  
NATA Accreditation Number 2619

Clinipath Pathology Pty Ltd trading as Clinipath Pathology and Bunbury Pathology.  
ABN 57 008 185, a subsidiary of Sonic Healthcare Limited (APA) ABN 24 004 196 909.

**RESULTS: TEL 9371 4340**

**HANSEN**  
**MR DAVID ROBERT**  
41 Shelburn Rd  
Thornlie 6108

Sex: Male **DOB: 15/04/1973**  
Tel: 0418106130

**Requested: 10/10/2017**

Collected: 10/10/2017 TOC: 09:33

Printed: 25/07/2018 TOP: 15:10

Reference: 00167752

**Lab No: 427068577**

**Z13**

**To: Kylie Robshaw**  
Wellness Perth Natural Med  
19 Gillings Parade  
WATTLE GROVE 6107

Referrer: Dr Muhammad Mian-Rehan

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### General Chemistry

Urea	4.0	mmol/L	(3.0-8.0)
Creatinine	95	umol/L	(60-110)
eGFR	84		(>59)
Sodium	141	mmol/L	(135-145)
Potassium	4.0	mmol/L	(3.5-5.5)
Chloride	96	mmol/L	(95-110)
Bicarbonate	32	mmol/L	

Bicarbonate, (also called  $\text{HCO}_3^-$ ) is an alkaline reserve for the body. Our healthy bicarbonate level is 26-31mmol/L. If blood is not the correct pH, alkaline minerals are utilised to buffer acidity within the kidneys which depletes the minerals via urine.

Anion Gap: Our healthy range 7-12. Your anion gap is: 17\*\*  
Anion gap is the calculated difference between primary measured cations (sodium  $\text{Na}^+$  & potassium  $\text{K}^+$ ) and primary measured anions (chloride  $\text{Cl}^-$  & bicarbonate  $\text{HCO}_3^-$ ) in serum. Anion gap is a marker of blood acidity/alkalinity. An elevated anion gap indicates a level of metabolic acidosis, an unhealthy state for the human body.

#### Anion Gap Levels:

12+: Slightly overall risk of all-cause mortality.

13-14: Systolic BP may increase as a result of mild acidosis.

16+: May cause elevated cortisol via mild acidosis as well as correlating strongly with insulin resistance due to elevated

### C Reactive Protein

CRP **174** mg/L

CRP: C-Reactive Protein, CRP is a marker of non-specific inflammation.

Our healthy reference range for CRP is <0.3mg/L.

Elevated CRP is commonly associated with an elevated risk of cardiovascular disease; autoimmune illnesses; pain disorders; difficulty losing weight; and less healthful adrenal and thyroid health.

Clinical Notes: Cellulitis

Tests Completed: SE- Renal Function, SE-Electrolytes, SE-C Reactive Protein

ED-FBE. Pending: None (Report complete)

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Dr Sydney Sacks



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### Haematology

Haemoglobin	148	g/L	(130-180)
Red cell count	5.0	$\times 10^{12}/L$	(4.5-6.5)
Haematocrit	0.45		(0.40-0.54)
MCV	88	fL	(80-100)
MCH	29	pg	(27-32)
MCHC	333	g/L	(310-360)
RDW	13.1		(10-15)
<b>White cell count</b>	<b>10.5</b>	<b><math>\times 10^9/L</math></b>	<b>(5.0-7.5)</b>
Neutrophils	<b>8.3 H</b>	<b><math>\times 10^9/L</math></b>	<b>(2.0-7.5)</b>
Lymphocytes	<b>1.0 L</b>	<b><math>\times 10^9/L</math></b>	<b>(1.5-4.0)</b>
Monocytes	1.0	$\times 10^9/L$	(0.2-1.0)
Eosinophils	0.2	$\times 10^9/L$	(0.0-0.5)
Basophils	<0.1	$\times 10^9/L$	(0.0-0.1)
Platelets	262	$\times 10^9/L$	(150-400)

Clinical Notes: Cellulitis

Tests Completed: SE- Renal Function, SE-Electrolytes, SE-C Reactive Protein  
ED-FBE. Pending: None (Report complete)

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Drs Tampi, Barr, Cannell, Herrmann