

Patient Name: MOREMON, MELINDA
Patient Address: 18 GLEN EAGLE RD, WATERVIEW HEIGHTS 2460
D.O.B: 27/04/1988
Medicare No.: 2624737145
Lab. Reference: 666273903-E-E030
Addressee: DR RACHEL B ALLIN
Gender: F
IHI No.:
Provider: SNP
Referred by: Dr Rachel Allin

Date Requested: 17/01/2022
Date Collected: 2/02/2022
Specimen:
Date Performed: 2/02/2022
Complete: Final

Subject(Test Name): S- THYROID FUNCTION
Clinical Information:

Clinical Notes : ?PCOS

Thyroid Function Tests

Date	12/09/17	19/09/17	11/03/21	02/02/22		
Time F-Fast	0811 F	1541	1155	1258 F		
Lab Id.	638791251	637062247	658899687	666273903	Units	Reference
Free T4	12.3		12.1		pmol/L	(9.0-19.0)
TSH	1.3	1.0	0.9	1.1	mIU/L	(0.3-3.5)

Comments on Collection 02/02/22 1258 F:
 Euthyroid

EA

Sullivan Nicolaides Pty Ltd. ABN 38 078 202 196. NATA/RCPA Accreditation No 1964

Tests Completed: Ferritin, E/LFT, TSH, Testosterone, SHBG, Vitamin D,
 Calculated FTe, FBE

Tests Pending :
 Sample Pending :