Patient Name:

STANFORD, ALISHA ANNE

Patient Address:

176 TUPPIARA ROAD JACKS CREEK, NARRABRI 2390

D.O.B:

7/01/1989

Gender:

Medicare No.: Lab. Reference:

5005474848

IHI No.: Provider:

RIS.HNEI

Addressee:

DR OKWUN

Referred by:

DR OKWUN

OJAH

OJAH

Date Requested:

27/10/2022

Date Performed:

27/10/2022

Date Collected:

27/10/2022

Complete:

Final

Specimen:

CT ABDOMEN AND PELVIS

Subject(Test Name): CT ABDOMEN AND PELVIS

## To view full multimedia report and images please click here

# For GENIE users to view full multimedia report and images please click here

## Narrabri Radiology

Ref Dr: Dr Okwun Ojah

Narrabri Medical Centre, 110 Tibbereena Street

Narrabri NSW 2390

Fax: 02 6792 3995 Delivery Method: EDI

MRN: 2318266/N0118507 Ward/Clinic: NDH Emergency Dept.

Patient: ALISHA STANFORD

DOB: 07/01/1989 Reported By: Dr Amy Khoo (Lumus)

Address: PO BOX 3027

NARRABRI 2390

Exam Date: 27/10/2022 03:00 PM

## CT ABDOMEN & PELVIS

CLINICAL HISTORY: Left-sided abdominal pain since yesterday. Pain started from left renal angle and radiated through her abdomen to suprapubic area. Rule out renal calculus.

TECHNIQUE: Non-contrast CT abdomen and pelvis.

COMPARISON: None available.

## FINDINGS:

Both kidneys are normal in size. There is no radiopaque renal or ureteric calculi, hydronephrosis or hydroureter. No perinephric fat stranding or collection.

The urinary bladder is unremarkable with no calculus seen.

The remaining solid visceral organs and bowel loops are unremarkable.

No free gas, free fluid or lymphadenopathy in the abdomen or pelvis

There is bibasal atelectasis.

## CONCLUSION:

No radiopaque renal or ureteric calculi or hydronephrosis.

Electronically Signed by: Dr Amy Khoo Alternate Patient ID2318266HNE

GP: Dr Okwun Ojah Narrabri Medical Centre, 110 Tibbereena Street Narrabri NSW 2390 02 6792 3995 (EDI)

Signed by: Dr Amy Khoo (Lumus) 27/10/2022 03:40 PM

Name: STANFORD, ALISHA ANNE

Address: 176 Tuppiara Road Jacks Creek

Narrabri, 2390

D.O.B.: 07/01/1989 Gender: F

**Medicare No:** 

IHI No:

Lab. Reference: 5005474848 Date Requested: 27/10/2022 Addressee: DR OKWUN OJAH Referred by: DR OKWUN OJAH Collected: 27/10/2022 15:16

Specimen: CT Abdomen and Pelvis Test Name: CT Abdomen and Pelvis

Clinical information:

Copies to:

Dr OKWUN OJAH

**CT Abdomen and Pelvis** Lab. Reference: 5005474848

Requested: 27/10/2022 Complete: Final

Collected: 27/10/2022

RIS.HNEI

CT Abdomen and Pelvis (CT Abdomen and Pelvis) Narrabri Radiology

MRS ALISHA ANNE STANFORD

MRN: 2318266 [Dob: 07/01/1989] [Sex: Female] 176 Tuppiara Road Jacks Creek, Narrabri NSW 2390

Ward/Clinic: NDH Emergency Dept. Reported By: Dr Amy Khoo (Lumus)

03:00 PM Exam Date: 27/10/2022

CT ABDOMEN & PELVIS

CLINICAL HISTORY: Left-sided abdominal pain since yesterday. Pain started from left renal angle and radiated through her abdomen to suprapubic area. Rule out renal calculus. \*\*\* Final Report \*\*\*

TECHNIQUE: Non-contrast CT abdomen and pelvis.

COMPARISON: None available.

There is bibasal atelectasis.

#### FINDINGS:

Both kidneys are normal in size. There is no radiopaque renal or ureteric calculi, hydronephrosis or hydroureter. No perinephric fat stranding or collection. The urinary bladder is unremarkable with no calculus seen. The remaining solid visceral organs and bowel loops are unremarkable. No free gas, free fluid or lymphadenopathy in the abdomen or pelvis

#### CONCLUSION:

3995

No radiopaque renal or ureteric calculi or hydronephrosis.

Electronically Signed by: Dr Amy Khoo Alternate Patient ID2318266HNE

Signed by: Dr Amy Khoo (Lumus)

Narrabri Medical Centre, 110 Tibbereena Street Narrabri NSW 2390 02 6792

Referring Physician: Dr Okwun Ojah , Narrabri Medical Centre, 110 Tibbereena Street Narrabri NSW 2390 Fax: 0267923995

27/10/2022 03:40 PM

cc: DR Okwun Ojah

GP: Dr Okwun Ojah

(EDI)

\*\*\* Final Report \*\*\*

Patient Address: 176 TUPPIARI ROAD JACKS CREEK, NARRABRI 2390

D.O.B: 7/01/1989 Gender: F

 Medicare No.:
 2612631437
 IHI No.:

 Lab. Reference:
 63334691103
 Provider:
 SYDPATH

Addressee: DR OKWUN OJAH Referred by: Dr OKWUN OJAH

**Date Requested:** 27/10/2022 **Date Collected:** 27/10/2022

Specimen:

Subject(Test Name): CRP (BARWON)

**Clinical Information:** 

Current

Previous results for comparison only Result Reference 06/08/21 13/11/20 13/02/20 27/10/22 Date: (for this 09:10 13:58 09:12 13:02 Time: collection) 6182663 6166065 Units 6198313 Request No.: 6333469

Acute Phase Reactants (serum/plasma)

CRP 20.0 H <5.0 <5.0 mg/L <5.0

CRP Comment CRPBCOM CRPBCOM CRPBCOM CRPBCOM

Comments: (27/10/2022 13:58 Episode No. 6333469)

CRPBCOM: CRP Note: CRP was noted by standard assay. High sensitivity CRP results, for cardiovascular risk assessment, must be specifically requested and testing will be performed in the Sydney Laboratory.

Tests Pending: BhCG, UEC, LFT, ESR (Manual), Urine Culture

Patient Address: 176 TUPPIARI ROAD JACKS CREEK, NARRABRI 2390

D.O.B: 7/01/1989 Gender: F

 Medicare No.:
 2612631437
 IHI No.:

 Lab. Reference:
 6333469Z001
 Provider:
 SYDPATH

Addressee: DR OKWUN OJAH

Referred by: Dr OKWUN OJAH

**Date Performed:** 27/10/2022

Complete: Final

Date Requested:
Date Collected:

27/10/2022 27/10/2022

Specimen:

Subject(Test Name): ROUTINE CHEMISTRY

**Clinical Information:** 

Date: Time: Request No.:	Current Result 27/10/22 13:58 6333469	Previous 22/11/21 09:55 6314455	results for 06/08/21 09:12 6198313	comparison 06/05/21 09:40 6192451	only Units	Reference (for this collection)
Electrolytes	(serum/plasma)					
Sodium	139	146	<b>H</b> 143	141	$\mathtt{mmol/L}$	135-145
Potassium	4.2	4.6	4.5	4.6	mmol/L	3.5-5.2
Chloride	103	107	107	106	$\mathtt{mmol/L}$	95-110
Bicarbonate	23	27	27	25	mmol/L	22-32
Urea	3.3	5.0	6.0	3.6	mmol/L	3.0-7.0
Creatinine	85	69	68	72	umol/L	45-90
eGFR	78	>90	>90	>90	mL/mn/1	.73m2>60
eGFR comment	gfrmild					

Comments: (27/10/2022 13:58 Episode No. 6333469)

gfrmild: eGFR 60 - 90 mL/min/1.73m2 is likely to be normal for elderly patients. Note change to CKD-EPI equation. See www.sydpath.stvincents.com.au/eGFR.htm

Liver Function Tests	(serum/p	plasma)				
Total protein	74	69	71	74	g/L	60-80
Albumin	42	39	39	43	g/L	33-48
Bilirubin total	18	9	11	14	umol/L	0-20
Alkaline phosphat	60	47	56	60	U/L	30-110
ALT	15	17	18	20	U/L	0-35
AST	26	24	26	28	U/L	0-30
GGT	10	12	13	9	U/L	0-35
LDH	182	164	165	194	U/L	0-430

Tests Pending: BhCG, ESR (Manual), Urine Culture

Patient Address: 176 TUPPIARI ROAD JACKS CREEK, NARRABRI 2390

Gender: F **D.O.B:** 7/01/1989 IHI No.:

**Medicare No.:** 2612631437 Provider: SYDPATH **Lab. Reference:** 6333469Z020

Addressee: DR OKWUN OJAH Referred by: Dr OKWUN OJAH

**Date Requested:** 27/10/2022 Date Collected: 27/10/2022

**Date Performed:** 27/10/2022

Specimen:

Complete: Final

Subject(Test Name): HAEMATOLOGY

Clinical Information:

Date: Time: Request No.:	Current Result 27/10/22 13:58 6333469	Previous 22/11/21 09:55 6314455	results for 06/08/21 09:12 6198313	comparison or 06/05/21 09:40 6192451	nly Units	Reference (for this collection)
Full Blood Count White Cell Count Red Cell Count Haemoglobin Haematocrit MCV MCH MCHC RDW Platelet Count	11.0 4.8 149 0.43 89 31.1 348 13.4 252	6.3 4.8 144 0.44 90 29.8 331 13.1 259	5.6 4.6 143 0.42 90 30.8 343 14.1 268	7.2 4.7 141 0.42 90 29.9 334 14.0 278	10^9/L 10^12/L g/L fL pg g/L % 10^9/L	4.0-11.0 3.8-5.8 115-165 0.37-0.47 76-96 27.0-32.0 320-360 11.5-14.5 150-400
Neutrophils Lymphocytes Monocytes Eosinophils Basophils Manual Haematolo ESR (Manual)	9.0 H 1.2 L 0.7 0.1 0.0	3.8 1.8 0.4 0.3 0.0	1.6 0.4 0.2	1.9 0.6 0.4 0.0	10^9/L 10^9/L 10^9/L 10^9/L 10^9/L	2.0-7.5 1.5-4.0 0.2-1.0 0.0-0.4 0.0-0.1

Tests Pending: BhCG, Urine Culture

STANFORD, ALISHA Patient Name:

Patient Address: 176 TUPPIARI ROAD JACKS CREEK, NARRABRI 2390

Gender: F 7/01/1989 D.O.B: IHI No.:

Medicare No.: 2612631437 Provider: SYDPATH **Lab. Reference:** 6333469Z049

Addressee: DR OKWUN OJAH Referred by: Dr OKWUN OJAH

27/10/2022 Date Requested: 27/10/2022 **Date Collected:** 

**Date Performed:** 27/10/2022 Complete: Final

Specimen:

Subject(Test Name): BHCG

**Clinical Information:** 

Current

Previous results for comparison only Result

06/08/21 10/10/18 Date: 27/10/22

13:58 09:12 08:45 Time: Units 6198313 6141438 Request No .: 6333469

BhCG (serum/plasma)

IU/L 11700 bhCG <2 <2

bhCG comment hcqfn hcgfn hcqfn

Comments: (27/10/2022 13:58 Episode No. 6333469)

hcgfn: b-hCG Reference Intervals (serum/plasma on Beckman-Coulter DXI):

Females:

0-5 IU/L Less than 40 years: 40 years or older: 0-10 IU/L

- negative (repeat if <4 weeks past last period)
- borderline (suggest repeat in 48 hours)</pre> Pregnancy: < 5 IU/L 5 - 25 IU/L

- pregnant 3rd or 4th week from last period. 25 - 250 IU/L

- pregnant 4th,5th or 6th week from last period.# 250 - 1,200 IU/L

1,200 - 5,000 IU/L - pregnant 4th,5th or 6th week from last period.#

1,200 - 5,000 IU/L - pregnant 5th or 6th week from last period.#

5,000 - 10,000 IU/L - pregnant 5th,6th or 7th week from last period.#

10,000 - 40,000 IU/L - pregnant 6th or 7th week from last period.#

40,000 - 200,000 IU/L - pregnant 7th to 12th week from last period.#

# As hCG rises to a peak at 12 weeks then falls towards term these values may also be found in the 2nd and 3rd trimester.

NOTE: If hCG is elevated without an obvious cause please contact lab.

Tests Pending: Urine Culture

Patient Address: 176 TUPPIARI ROAD JACKS CREEK, NARRABRI 2390

Gender: F **D.O.B:** 7/01/1989

IHI No.: Medicare No.: 2612631437

Provider: SYDPATH **Lab. Reference:** 6333469M165-1

Referred by: Dr OKWUN OJAH Addressee: DR OKWUN OJAH

Date Performed: 27/10/2022 Date Requested: 27/10/2022 Complete: Final Date Collected: 27/10/2022

Specimen:

Subject(Test Name): URINE CULTURE

**Clinical Information:** 

Urine Culture

Anatomical Site: Urine Accession No: M22280095 A

## Urine Dipstick Chemistry:

Glucose Negative

+++ Haemoglobin 5.5 рН

Protein

[5.0-8.0]

#### Urine Microscopy:

>100 x10^6/L Polymorphs >100 x10^6/L Red cells 10-100 x10^6/L Epithelial Cells Negative Casts

Negative Crystals

#### Culture:

10^7-10^8 CFU/L Escherichia coli Possible urinary tract infection. Note epithelial cell contamination.

Norfloxacin, Nitrofurantoin, and Trimethoprim are effective antimicrobials for uncomplicated lower urinary tract infections such as cystitis. It is recommended that Clinical Microbiology advice be obtained before prescribing these drugs for complicated UTI, upper tract infections such as pyelonephritis, or for patients with sepsis.

Direct susceptibility testing was performed.

#### Antimicrobial Sensitivities

Escherichia coli	Result
Trimethoprim	S
Nitrofurantoin	S
Ampicillin/Amoxicillin	S
Cephalexin	S
Norfloxacin	S
Gentamicin	S

S = Sensitive R = Resistant SIE = Sensitive, Increased ExposureHLR = High Level Resistance P = Positive N = Negative LS = Less Sensitive NI = No Interpretation