

COOPER, WENDY-LEE A
2 CAMPHOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 681544531-C-H245
Laboratory: SNP
Addressee: DR MICHAELA M PROVE Referred by: DR MICHAELA M PROVE

Name of Test: .ANAEMIA
Requested: 26/06/2023 Collected: 31/07/2023 Reported: 01/08/2023
04:39

Clinical notes: recheck iron after oral supplementation

Clinical Notes : recheck iron after oral supplementation

Haematinics

					Latest Results	
Date	27-Feb-21	21-Jul-22	07-Sep-22	31-Jul-23		
Time F-Fast	0818 F	0719 F	0744 F	1531		
Lab Id.	658189796	668023700	667992713	681544531	Reference	Units
Iron	9				(5-30)	umol/L
Transferrin	2.6				(1.9-3.1)	g/L
TIBC	64				(47-77)	umol/L
Trans Sat	14 L				(20-45)	%
Ferritin	70	52		64	(30-300)	ug/L
CRP			11 H	12 H	(<5)	mg/L
Vitamin B12	360				(>150)	pmol/L
Active B12	>128				(>35)	pmol/L
Folate serum	18				(>7.0)	nmol/L

Comments on Collection 31-Jul-23 1531:

Ferritin

Normal iron stores.

Note that in uraemic patients a functional iron deficiency may be present at ferritin levels up to 200 ug/L.

CA

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

Tests Completed: Ferritin,CRP,FBE
Tests Pending :
Sample Pending :

COOPER, WENDY-LEE A
2 CAMPHOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 681544531-C-C290
Laboratory: SNP
Addressee: DR MICHAELA M PROVE Referred by: DR MICHAELA M PROVE

Name of Test: S-C REACTIVE PROTEIN
Requested: 26/06/2023 Collected: 31/07/2023 Reported: 01/08/2023
04:39

Clinical notes: recheck iron after oral supplementation

Clinical Notes : recheck iron after oral supplementation

	Latest Results			
Date	07-Sep-22	31-Jul-23		
Time F-Fast	0744 F	1531		
Lab Id.	667992713	681544531	Reference	Units
CRP	11 H	12 H	(<5)	mg/L

Comments on Collection 31-Jul-23 1531:

C Reactive Protein

Interpretation: Elevation in CRP indicates disease activity of an inflammatory, infective or neoplastic nature. CRP is a more sensitive early indicator of an acute phase response than is the ESR. It also returns towards normal more rapidly with improvement or resolution of the disease process.

Artefactually decreased CRP values occur when patients are treated with antibiotics containing carboxypenicillins including Ticarcillin.

AJ

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

Tests Completed: Ferritin, CRP, FBE
Tests Pending :
Sample Pending :

COOPER, WENDY-LEE A
 2 CAMPHOR WOOD COURT, ROBINA. 4226
 Phone: 0449049470
 Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
 Your Reference: Lab Reference: 681544531-H-H900
 Laboratory: SNP
 Addressee: DR MICHAELA M PROVE Referred by: DR MICHAELA M PROVE

Name of Test: .BLOOD COUNT
 Requested: 26/06/2023 Collected: 31/07/2023 Reported: 01/08/2023
 04:39

Clinical notes: recheck iron after oral supplementation

Clinical Notes : recheck iron after oral supplementation

Haematology

Date	Latest Results					
	27-Feb-21	21-Jul-22	07-Sep-22	31-Jul-23		
Time F-Fast	0818 F	0719 F	0744 F	1531		
Lab Id.	658189796	668023700	667992713	681544531	Reference	Units
Haemoglobin	127	124	128	128	(115-165)	g/L
Haematocrit	0.40	0.39	0.42	0.40	(0.35-0.47)	
RCC	4.8	4.7	5.0	4.8	(3.9-5.6)	10*12/L
MCV	83	84	85	82	(80-100)	fL
WCC	9.6	9.0	9.1	9.0	(3.5-12.0)	10*9/L
Neutrophils	6.40	5.66	5.82	6.32	(1.5-8.0)	10*9/L
Lymphocytes	2.28	2.40	2.38	1.93	(1.0-4.0)	10*9/L
Monocytes	0.65	0.64	0.64	0.53	(0-0.9)	10*9/L
Eosinophils	0.23	0.28	0.18	0.15	(0-0.6)	10*9/L
Basophils	0.04	0.04	0.05	0.06	(0-0.15)	10*9/L
Platelets	292	273	303	256	(150-400)	10*9/L

HA

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Tests Completed: Ferritin, CRP, FBE
 Tests Pending :
 Sample Pending :

COOPER, WENDY
2 CAMPOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 23-9940367-HPM-0
Laboratory: 4Cyte Pathology
Addressee: Dr MICHAELA PROVE Referred by: Dr MICHAELA PROVE

Name of Test: Full Blood Count
Requested: 07/03/2023 Collected: 07/03/2023 Reported: 08/03/2023
15:00

Clinical Notes:
Pathologist: Dr C. Harris

Full Blood Count (Whole Blood)

Coll Date: 07/03/23
Coll Time: 15:42
Lab Number: 9940367

HAEMOGLOBIN	125	(115-165)	g/L
RBC	4.8	(3.8-5.8)	10 ¹² /L
HCT	0.40	(0.32-0.46)	
MCV	82.6	(80.0-100.0)	fL
MCH	26	(26-32)	pg
MCHC	314	(300-360)	g/L
RDW	14.8	(< 15.1)	%

WCC	12.8	H	(4.0-11.0)
Neutrophils	9.3	H	(2.0-8.0)
Lymphocytes	2.2		(1.0-4.0)
Monocytes	0.9		(0.2-1.0)
Eosinophils	0.3		(< 0.8)
Basophils	0.1		(< 0.2)

PLATELETS	250		(150-400)	10 ⁹ /L
MPV	11.6	H	(6.5-11.0)	fL

\$WBC

Mild neutrophilia.

Tests to follow: All Tests now completed

COOPER, WENDY
2 CAMPOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 23-9940367-VBM-0
Laboratory: 4Cyte Pathology
Addressee: Dr MICHAELA PROVE Referred by: Dr MICHAELA PROVE

Name of Test: B12/folate Master
Requested: 07/03/2023 Collected: 07/03/2023 Reported: 08/03/2023
11:05

Clinical Notes:
Pathologist: Dr C. Harris

B12/Folate (Serum)

Coll Date: 07/03/23
Coll Time: 15:42
Lab Number: 9940367

Vitamin B12	208	(156-670)	pmol/L
Active Vit. B12	95	(> 35)	pmol/L

Tests to follow: FBC

COOPER, WENDY
 2 CAMPOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 **Sex:** F **Medicare Number:** 3900895196
Your Reference: **Lab Reference:** 23-9940367-RCM-0
Laboratory: 4Cyte Pathology
Addressee: Dr MICHAELA PROVE **Referred by:** Dr MICHAELA PROVE

Name of Test: Biochemistry, Serum
Requested: 07/03/2023 **Collected:** 07/03/2023 **Reported:** 08/03/2023
 09:37

Clinical Notes:
Pathologist: Dr P. Stewart

Biochemistry (Serum)

Coll Date: 07/03/23
 Coll Time: 15:42
 Lab Number: 9940367

Sodium	139	(135-145)	mmol/L
Potassium	4.2	(3.5-5.5)	mmol/L
Chloride	109	(95-110)	mmol/L
Bicarbonate	24	(22-32)	mmol/L
Anion Gap	10	(8-19)	mmol/L
Urea	5.4	(3.2-8.2)	mmol/L
Creatinine	59	(45-90)	umol/L
eGFR	> 90	(> 59)	
Urate	0.40	(0.15-0.40)	mmol/L
Total Protein	70	(60-80)	g/L
Globulin	33	(23-39)	g/L
Albumin	37	(34-50)	g/L
Bilirubin	4	(< 21)	umol/L
Alk. Phosphatase	83	(30-110)	U/L
Gamma GT	31	(< 36)	U/L
ALT	24	(< 35)	U/L
AST	24	(< 30)	U/L
LD	236	(120-250)	U/L
Calcium	2.25	(2.10-2.60)	mmol/L
Adj. Calcium	2.31	(2.10-2.60)	mmol/L
Phosphate	0.83	(0.75-1.50)	mmol/L
Status	Random		
Cholesterol	4.4	(< 5.6)	mmol/L
Triglyceride	3.2 H	(< 2.1)	mmol/L

Tests to follow: B12/FOL,FBC

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2 CAMPOR WOOD COURT, ROBINA. 4226
Phone: 0449049470
Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 23-9940367-GLM-0
Laboratory: 4Cyte Pathology
Addressee: Dr MICHAELA PROVE Referred by: Dr MICHAELA PROVE
Name of Test: Glucose
Requested: 07/03/2023 Collected: 07/03/2023 Reported: 08/03/2023
08:14

Clinical Notes:
Pathologist: Dr P. Stewart

Glucose (Serum)

Coll Date: 07/03/23
Coll Time: 15:42
Lab Number: 9940367

Glucose Random 4.7 (3.0-7.7) mmol/L

Diabetes unlikely (no documented laboratory history of diabetes). Retest every 3 years if low risk.

Tests to follow: B12/FOL,CHEM,FBC

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Birthdate: 30/11/1970 Sex: F Medicare Number: 3900895196
Your Reference: Lab Reference: 23-9940367-FEM-0
Laboratory: 4Cyte Pathology
Addressee: Dr MICHAELA PROVE Referred by: Dr MICHAELA PROVE

Name of Test: Iron Studies
Requested: 07/03/2023 Collected: 07/03/2023 Reported: 08/03/2023
08:14

Clinical Notes:
Pathologist: Dr C. Harris

Iron Studies (Serum)

Coll Date: 07/03/23
Coll Time: 15:42
Lab Number: 9940367

Ferritin	24	L	(30-200)	ug/L
Iron	6	L	(9-30)	umol/L
Transferrin	2.3		(2.0-3.6)	g/L
Transferrin Sat.	10	L	(15-50)	%

Ferritin result is consistent with iron deficiency. During reproductive years, iron deficiency in women is usually due to menorrhagia. Other causes include: other blood loss (e.g. H. pylori, occult blood), pregnancy/lactation and decreased absorption (e.g. diet, coeliac).

Tests to follow: B12/FOL,CHEM,FBC