

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-ZN-0
Addressee: DR CORNE MARE
Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE, DR. CORNE
Date Requested: 7/11/2021
Date Collected: 8/11/2021
Specimen:
Subject(Test Name): ZINC, SERUM
Clinical Information:

Serum Zinc 15 umol/L (10-25)

Tests Completed: CA19-9, IRON STUDIES, SHBG, PROGESTERONE, E2, LH, FSH, FBC
Tests Completed: ACTIVE VITAMIN B12, SE E/LFT, SE ZINC, SE VIT D, SE HOMOCYSTEINE
Tests Completed: SE CEA, ESR, SE COPPER
Tests Pending : LEUKAEMIA MARKER STUDIES

iherb. online. *

Thorne Zinc Picolinate.
25/30??

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-FHM-0
Addressee: DR CORNE MARE

Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE, DR. CORNE

Date Requested: 7/11/2021
Date Collected: 8/11/2021

Date Performed: 8/11/2021
Complete: Final

Specimen:
Subject(Test Name): FERTILITY HORMONE MASTER
Clinical Information:

Luteinizing Hormone	9	IU/L	
Follicle Stimulating Hormone	5	IU/L	
Oestradiol	310	pmol/L	
Progesterone	26	nmol/L	
Sex Hormone Binding Globulin	78	nmol/L	(18-114)

Ranges:	Follicular Phase	Midcycle Peak	Luteal Phase	Post-Menopausal
LH	2 - 12	10 - 130	1 - 17	15 - 60
FSH	1 - 10	3 - 33	1 - 9	20 - 140
Oestradiol	70 - 530	230 - 1310	200 - 790	< 120
Progesterone	< 5	rising	20 - 110	< 3

Pattern suggests normal Luteal phase with ovulation likely to have occurred.

Tests Completed: IRON STUDIES, SHBG, PROGESTERONE, E2, LH, FSH, FBC, SE E/LFT, SE VIT D
Tests Completed: SE HOMOCYSTEINE, SE CEA, ESR
Tests Pending : CA19-9, LEUKAEMIA MARKER STUDIES, ACTIVE VITAMIN B12, SE ZINC
Tests Pending : SE COPPER

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-CMM-0
Addressee: DR CORNE MARE

Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE, DR. CORNE

Date Requested: 7/11/2021
Date Collected: 8/11/2021

Date Performed: 8/11/2021
Complete: Final

Specimen:
Subject(Test Name): MASTER LYMPHOMA/LEUKAEMIA
Clinical Information:

CELL SURFACE MARKER ANALYSIS

Specimen Submitted : Peripheral blood
Population Reported: Standard Lymphoid Phenotype Reported.

T CELL LINEAGE		B CELL LINEAGE	
CD 7	84 %	CD19	12 %
CD 2	87 %	CD20	12 %
CD 5	82 %	SmIg	12 %
CD 3	81 %	kappa	7 %
CD 4	59 %	lambda	5 %
CD 8	18 %		
CD56	5 %		
CD16	6 %		
CD4:8	3.2		

Total Lymphocyte Count		1.9	$\times 10^9$ /L	(1.1-4.0)
Subsets:				
CD19+	Total B Cells	0.22	$\times 10^9$ /L	(0.06-0.60)
CD3+	Mature T Cells	1.51	$\times 10^9$ /L	(0.80-2.40)
CD4+	T Cell Subset	1.10	$\times 10^9$ /L	(0.50-1.60)
CD8+	T Cell Subset	0.34	$\times 10^9$ /L	(0.20-1.00)
CD56+	NK Cells	0.09	$\times 10^9$ /L	(0.07-0.60)
CD16+	NK Cells	0.11	$\times 10^9$ /L	

Comment:

B cell and T cell subset numbers are within normal limits.

The majority of lymphoid cells are T cells. The B cells present are polyclonal. There is no evidence of a B cell lymphoproliferative disorder.

Dr P. Davidson [Haematologist]

C11-365; BE03515

Tests Completed: CA19-9, IRON STUDIES, SHBG, PROGESTERONE, E2, LH, FSH
Tests Completed: LEUKAEMIA MARKER STUDIES, FBC, ACTIVE VITAMIN B12, SE E/LFT, SE ZINC
Tests Completed: SE VIT D, SE HOMOCYSTEINE, SE CEA, ESR, SE COPPER
Tests Pending :

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-HOM-0
Addressee: DR CORNE MARE

Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE, DR. CORNE

Date Requested: 7/11/2021

Date Performed: 8/11/2021

Date Collected: 8/11/2021

Complete: Final

Specimen:

Subject(Test Name): HOMOCYSTEINE, SERUM

Clinical Information:

CUMULATIVE SERUM HOMOCYSTEINE

Date

08/11/21

Time

06:55

Lab No

67970519

Homocysteine

11.3 umol/L (0.0-15.0)

67970519 High normal value.

With this level, the heterozygous state for defects of transsulphuration (homocysteinaemia) is unlikely. However the risk of coronary artery disease may be mildly elevated over the baseline. This is independent of other risk factors.

Homocysteine Related Risk

Plasma level (umol/L)	Risk Average
Below 9.0	No increase
9.0 - 14.9	x 2
15.0 - 19.9	x 3
20.0 or greater	x 4.5

Risks approximated from New Eng J Med 1997 (337:230-236)

Tests Completed: IRON STUDIES, FBC, SE E/LFT, SE VIT D, SE HOMOCYSTEINE, SE CEA, ESR

Tests Pending : CA19-9, SHBG, PROGESTERONE, E2, LH, FSH, LEUKAEMIA MARKER STUDIES

Tests Pending : ACTIVE VITAMIN B12, SE ZINC, SE COPPER

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-VD-0
Addressee: DR CORNE MARE

Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE,DR. CORNE

Date Requested: 7/11/2021

Date Performed: 8/11/2021

Date Collected: 8/11/2021

Complete: Final

Specimen:

Subject(Test Name): VITAMIN D,SERUM

Clinical Information:

CUMULATIVE SERUM VITAMIN D

Date	27/03/21	08/11/21
Time	10:15	06:55
Lab No	69916821	67970519
Vitamin D3	70	127 nmol/L (> 49)

67970519

** Progress report.

Please note that as of 05/07/2021, QML Pathology changed to the Liaison XL analyser for Vitamin D testing at our Murrarie laboratory. Comparison studies have shown good agreement between the methods and the reference intervals have not changed. If further information is required, please contact a Chemical Pathologist on (07) 3121 4444. Patients should contact their referring doctor in regard to this result.

Tests Completed:IRON STUDIES, FBC, SE VIT D, ESR

Tests Pending :CA19-9, SHBG, PROGESTERONE, E2, LH, FSH, LEUKAEMIA MARKER STUDIES

Tests Pending :ACTIVE VITAMIN B12, SE E/LFT, SE ZINC, SE HOMOCYSTEINE, SE CEA

Tests Pending :SE COPPER

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-CEA-0
Addressee: DR CORNE MARE

Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE,DR. CORNE

Date Requested: 7/11/2021

Date Performed: 8/11/2021

Date Collected: 8/11/2021

Complete: Final

Specimen:

Subject(Test Name): CARCINOEMBRYONIC ANTIGEN

Clinical Information:

CUMULATIVE SERUM CARCINOEMBRYONIC ANTIGEN (CEA)

Date	30/09/21	08/11/21
Time	08:10	06:55
Lab No	67086815	67970519

CEA	< 0.5	< 0.5	ug/L (up to 4.6)
-----	-------	-------	------------------

CEA is elevated in over 50% of gastrointestinal malignancies and in some lung and breast malignancies. It is occasionally increased (up to 10 ug/L) in some non-malignant conditions.

Tests Completed: IRON STUDIES, FBC, SE E/LFT, SE VIT D, SE HOMOCYSTEINE, SE CEA, ESR
Tests Pending : CA19-9, SHBG, PROGESTERONE, E2, LH, FSH, LEUKAEMIA MARKER STUDIES
Tests Pending : ACTIVE VITAMIN B12, SE ZINC, SE COPPER

Patient Name: SARKIS, GEORGINA
Patient Address: U 2 40 CHELTENHAM DR, ROBINA 4226
D.O.B: 24/10/1976
Medicare No.: 25361510541
Lab. Reference: 21-67970519-TMM-0
Addressee: DR CORNE MARE
Gender: F
IHI No.:
Provider: QML Pathology
Referred by: MARE,DR. CORNE
Date Requested: 7/11/2021
Date Collected: 8/11/2021
Specimen:
Subject(Test Name): TUMOUR MARKER MASTER
Clinical Information:

CA 19-9 (Siemens) 26 U/mL (< 30)

CA19-9 is associated with mucinous epithelium, and may be elevated with inflammation or Neoplasia.

Tests Completed:CA19-9, IRON STUDIES, SHBG, PROGESTERONE, E2, LH, FSH, FBC, SE E/LFT
Tests Completed:SE VIT D, SE HOMOCYSTEINE, SE CEA, ESR
Tests Pending :LEUKAEMIA MARKER STUDIES, ACTIVE VITAMIN B12, SE ZINC, SE COPPER