

ELPHICK, SOPHIE
1 NORMANS RD, YOUNG. 2594
Phone: 63822536
Birthdate: 11/07/1994 Sex: F Medicare Number: 2733302353
Your Reference: 00122401 Lab Reference: 22-18711225-PTQ-0
Laboratory: Laverty Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: QUANTITATIVE PREG (PTQ-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
14:14

Beta hCG

Specimen Type: Serum
Quant Beta HCG (Siemens) 110 IU/L

Reference Intervals for Pregnancy

Weeks after LMP	Range IU/L	Weeks after LMP	Range IU/L
2 - < 3	0-50	6 - < 7	1,000-50,000
3 - < 4	50-500	7 - < 8	10,000-100,000
4 - < 5	100-5,000	8 - < 10	15,000-200,000
5 - < 6	500-10,000	10 - < 16	10,000-100,000
Non-pregnant reference interval < 5 IU/L			

Requested Tests : VZ, UMM*, SYP, PTQ, RUL*, MBA, HIR, FE, FBE, CHM*

ELPHICK, SOPHIE
1 NORMOYLE 2594

Phone: 63822536

Birthdate: 11/07/1994

Sex: F

Medicare
Number: 27333023531

Your
Reference: 2149587

Lab
Reference: 2149587

Laboratory: YOUNG DIAGNOSTIC IMAGING

Addressee: DR SAJEEVA
POLGOLLA

Referred by: DR SAJEEVA POLGOLLA

Name of test: US PELVIS

Requested 17/02/2022

Collected: 18/02/2022
Reported: 18/02/2022
12:15:00



Patient Name: ELPHICK,
SOPHIE
DOB: 11/07/1994
Gender: F

Address: 1 NORMOYLE
YOUNG NSW 2594
Phone: 63822536
Medicare Number:

[Click here to view all images from study.](#)

This report is for: Dr S. Polgolla

Referred By:

Dr S. Polgolla

US PELVIS 18/02/2022 Reference: 2149587

PELVIC ULTRASOUND

Clinical History: PV bleeding. Beta HCG positive.

Findings:

Transabdominal and transvaginal scanning.

A retroverted uterus noted.

No intrauterine gestational sac features evident.

The endometrium has uniform appearance with thickness of 0.6cm. No endometrial cavity fluid distension.

Ovarian volumes are 4ml on right and 3ml on left side. No adnexal mass evident. There is no sac like structure visualised throughout adnexal distribution on either side however, a small amount of complex appearing fluid within pouch of Douglas measuring approximately 5ml (1.4 x 3.7 x 1.9cm) is noted.

Comment:

No intra or extrauterine gestational sac visualisation. There is however, a small amount of complex appearing fluid within pouch of Douglas, unable to exclude ectopic gestation. Please correlate with

serum HCG levels trend and clinical factors.

Dr Polgolla is being contacted.

(This report and images are available online at
<https://pacs.alpenglow.com.au/InteleConnect>)

Reported by: Dr A. Ko

Sonographer: WALKER-SMITH, SAMANTHA
Typist: J.T

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For any enquiries or problems relating to this report, please contact our reception on 02
6382 6901

ELPHICK, SOPHIE
1 NORMANS RD, YOUNG. 2594
Phone: 63822536
Birthdate: 11/07/1994 Sex: F Medicare Number: 2733302353
Your Reference: 00122401 Lab Reference: 22-18711225-FBE-0
Laboratory: Lavery Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: HAEMATOLOGY (FBE-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 11/02/2022
22:32

HAEMATOLOGY

Date Collected 11 Feb 22
Time Collected 08:05
Specimen Type: EDTA

Hb	129 g/L	(115-165)	WBC	6.1 x10 ⁹ /L	(4.0-11.0)
RCC	4.5 x10 ¹² /L	(3.9-5.8)	Neut	3.1 x10 ⁹ /L	(2.0-7.5)
Hct	0.41	(0.34-0.47)	Lymp	2.4 x10 ⁹ /L	(1.0-4.0)
MCV	91 fL	(79-99)	Mono	0.4 x10 ⁹ /L	(0.2-1.0)
MCH	29 pg	(27-34)	Eos	0.1 x10 ⁹ /L	(< 0.7)
MCHC	319 g/L	(320-360)	Baso	0.1 x10 ⁹ /L	(< 0.2)
RDW	13.0 %	(10.0-17.0)			
Plat	250 x10 ⁹ /L	(150-400)			

HAEMATOLOGY: FBC parameters show no significant abnormality.

Requested Tests : VZ*, UMM*, SYP*, PTQ*, RUL*, MBA*, HIR*, FE*, FBE, CHM*

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Laboratory: Laverty Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: SERUM CHEMISTRY (MBA-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
12:44

SERUM CHEMISTRY

Specimen Type: Serum

Haemolysis	Nil
Icterus	Nil
Lipaemia	Nil

Sodium	137	mmol/L	(135-145)
Potassium	4.0	mmol/L	(3.6-5.4)
Chloride	102	mmol/L	(95-110)
Bicarbonate	22	mmol/L	(22-32)
Anion Gap	17	mmol/L	(10-20)
Urea	4.7	mmol/L	(2.5-6.7)
Creatinine	65	umol/L	(45-90)
eGFR	> 90		mL/min/1.73m ²

eGFR $\geq$ 90 mL/min/1.73m² usually indicates normal kidney function but does not exclude patients with early kidney damage (those with albuminuria, haematuria or abnormal kidney imaging).

Requested Tests : VZ*, UMM*, SYP*, PTQ*, RUL*, MBA, HIR*, FE*, FBE, CHM*

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Your Reference: 00122401 Lab Reference: 22-18711225-FE-0
Laboratory: Laverty Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: IRON STUDIES (FE-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
12:47

IRON STUDIES

Specimen Type: Serum		
Serum Iron	13	umol/L (10-30)
Transferrin	29	umol/L (32-48)
Transferrin Saturation	23	% (13-45)
Serum Ferritin	78	ug/L (30-165)

Transferrin may be decreased by inflammation (acute or chronic) or protein deficiency or loss.

Requested Tests : VZ*, UMM*, SYP*, PTQ*, RUL*, MBA, HIR*, FE, FBE, CHM*

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Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: HIV - NON COMMERCIAL (HIR-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
13:01

HIV SEROLOGY

HIV 1 and 2 Ab/Ag: Negative

This result does not exclude infection with HIV virus. If serum was tested within 3 months of exposure please retest after that time.

All testing performed on serum or plasma unless otherwise specified.

Requested Tests : VZ*, UMM*, SYP*, PTQ*, RUL*, MBA, HIR, FE, FBE, CHM*

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Birthdate: 11/07/1994 Sex: F Medicare Number: 2733302353
Your Reference: 00122401 Lab Reference: 22-18711225-SYP-0
Laboratory: Lavery Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: TREPONEMAL SEROLOGY (SYP-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
13:03

Syphilis (CMIA) SYPHILIS SEROLOGY
Negative

Antibodies to Treponema pallidum NOT detected by chemiluminescent immunoassay (CMIA). This result suggests either no exposure to T. pallidum or very early primary syphilis infection prior to the development of antibodies. If early infection is suspected, please repeat in 14 days.

All testing performed on serum or plasma unless otherwise specified.

Requested Tests : VZ*, UMM*, SYP, PTQ*, RUL*, MBA, HIR, FE, FBE, CHM*

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Laboratory: Laverty Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: VARICELLA ZOSTER (VZ-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
13:16

Varicella Zoster Serology
Varicella-Zoster IgG (EIA) DETECTED

Consistent with past Chickenpox infection or vaccination. If recent contact or infection is suspected, please request VZV IgM antibodies and, if lesions are present, send a swab for VZV PCR.

All testing performed on serum or plasma unless otherwise specified.

Requested Tests : VZ, UMM*, SYP, PTQ*, RUL*, MBA, HIR, FE, FBE, CHM*

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Laboratory: Lavery Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: RUBELLA SEROLOGY (RUL-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
15:07

Rubella IgG RUBELLA SEROLOGY
8 IU/mL

No serological evidence of immunity to Rubella. If a recent infection (or contact during pregnancy) is suspected, please request Rubella IgM testing and send a further sample in 7-10 days.'

All testing performed on serum or plasma unless otherwise specified.

Requested Tests : VZ, UMM*, SYP, PTQ, RUL, MBA, HIR, FE, FBE, CHM*

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Laboratory: Laverty Pathology
Addressee: DR SAJEEVA POLGOLLA Referred by: DR SAJEEVA POLGOLLA

Name of Test: CHLAMYDIA + GONORR. NAT (CHM-0)
Requested: 10/02/2022 Collected: 11/02/2022 Reported: 12/02/2022
19:31

NUCLEIC ACID TESTING (NAT)

Specimen / site	URINE
Chlamydia trachomatis	Not detected
Neisseria gonorrhoeae	Not detected

This specimen has been tested using the Roche cobas CT/NG 6800 assay.

These assays are validated for first void urine, thin prep cytology specimens, endocervical and vaginal swabs. Anorectal and oropharyngeal (CT/NG) and meatal (TV/MG) swabs are also validated samples. For all other specimen types, results should be evaluated clinically.

Requested Tests : VZ, UMM*, SYP, PTQ, RUL, MBA, HIR, FE, FBE, CHM