

EARL, KELLYANN

270 GUN CLUB RD, NARRABRI. 2390

Phone: 0428565136

Birthdate: 24/01/2008 Sex: F Medicare Number: 2862725592

Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-A1C-0

Laboratory: Lavery Pathology

Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS

Copy to:

DR JULIAN WHITE

Name of Test: GLYCATED HAEMOGLOBIN (A1C-0)

Requested: 28/09/2023 Collected: 09/10/2023 Reported: 09/10/2023

23:24

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

GLYCATED HAEMOGLOBIN (HbA1c)

Specimen Type: EDTA

HbA1c- NGSP

5.0

%

(4.0-6.0)

HbA1c- IFCC

31

mmol/mol

(20-42)

The WHO recommends that an HbA1c cut-off of  $\geq 6.5\%$  (48 mmol/mol) is used to diagnose type 2 diabetes.

While it is recognised that HbA1c levels approaching this cut-off place patients at increasingly higher risk of developing diabetes ( $<6.5\%$ ), there is no consensus as to exactly which cut-off at the lower end of the continuum to use for categorising patients as high risk. Various groups quote lower limits for at-risk patients that vary between 5.5% and 6.0% (37 and 42 mmol/mol).

Please note that HbA1c should not be used for diagnosing diabetes mellitus in the following circumstances:

- Children and young people
- Pregnancy - current or within the past 2 months
- Suspected Type 1 diabetes mellitus
- Symptoms of diabetes for  $<2$  months
- Patients who are acutely ill
- Patients taking drugs that can cause rapid onset hyperglycaemia such as corticosteroids, antipsychotic drugs
- Acute pancreatic damage or pancreatic surgery
- Kidney failure
- Patients being treated for HIV infection

Please be cautious when requesting or interpreting HbA1c when patients:

- May have an abnormal haemoglobin
- May be anaemic
- May have an altered red cell lifespan (e.g. post-splenectomy)
- May have had a recent blood transfusion

Requested Tests : TFT\*, PRL\*, ANE\*, 17H\*, MBA\*, HOR\*, FE\*, COR\*, AND\*, A1C

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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-MBA-0  
Laboratory: Laverty Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
Copy to:  
DR JULIAN WHITE

Name of Test: SERUM CHEMISTRY (MBA-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
10:59

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

	<u>SERUM CHEMISTRY</u>		
Specimen Type: Serum			
Haemolysis	Nil		
Icterus	Nil		
Lipaemia	Nil		
Sodium	142	mmol/L	(135-145)
Potassium	4.7	mmol/L	(3.8-5.5)
Chloride	104	mmol/L	(95-110)
Bicarbonate	26	mmol/L	(22-32)
Anion Gap	17	mmol/L	(10-20)
Urea	5.0	mmol/L	(2.5-6.7)
Creatinine	50	umol/L	(45-90)
Bilirubin	5	umol/L	(< 20)
AST	23	U/L	(< 30)
ALT	14	U/L	(< 30)
GGT	11	U/L	(< 30)
Alkaline Phosphatase	76	U/L	(45-140)
Protein	72	g/L	(60-82)
Albumin	44	g/L	(38-50)
Globulin	28	g/L	(20-39)

Paediatric reference intervals are guidelines only.

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR\*, FE\*, COR\*, AND\*, A1C

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Phone: 0428565136  
Birthdate: 24/01/2008 Sex: F Medicare Number: 2862725592  
Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-PRL-0  
Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
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Name of Test: SERUM PROLACTIN (PRL-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
10:59

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

PROLACTIN

Specimen Type: Serum

Request Number	Date Collected Ref Range	Prolactin mIU/L (40-570)
24481950	09/10/23	149

Day 14-16

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR\*, FE\*, COR\*, AND\*, A1C

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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-TFT-0  
Laboratory: Laverty Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
Copy to:  
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Name of Test: THYROID FUNCTION TEST (TFT-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
10:59

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

		THYROID PROFILE		
Request Number		21278382	21278383	24481950
Date Collected		7 Oct 22	7 Oct 22	9 Oct 23
Time Collected		08:19	08:19	08:03
Specimen Type:	Serum			
TSH	(0.5-4.3) mIU/L	3.4	3.2	1.4
FT4	(10-21) pmol/L	14		
FT3	(3.5-7.3) pmol/L	5.2		

Result(s) consistent with euthyroidism.

Please note the above reference intervals have been developed from a non-pregnant healthy general population study.

Paediatric reference intervals are guidelines only.

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR\*, FE\*, COR\*, AND\*, A1C

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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-FE-0  
Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
Copy to:  
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Name of Test: IRON STUDIES (FE-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
11:04

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

	<u>IRON STUDIES</u>		
Specimen Type: Serum			
Serum Iron	13	umol/L	(6-18)
Transferrin	29	umol/L	(32-48)
Transferrin Saturation	23	%	(13-45)
Serum Ferritin	52	ug/L	(30-165)

Paediatric reference intervals are guidelines only.

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

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR\*, FE, COR\*, AND\*, A1C

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Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
Copy to:  
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Name of Test: ANDROGENS (AND-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
12:55

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

SERUM ANDROGENS			
Total Testosterone (Siemens)	0.6	nmol/L	
Sex Hormone Binding Globulin	<b>16</b>	nmol/L	(20-118)
DHEAS	5.6	umol/L	(3.3-12)
Calculated Free Testosterone	15.1	pmol/L	(3.5-46.0)

SHBG result is elevated. Common causes are oestrogen/OCP therapy.

Pre-pubertal testosterone concentrations are usually less than 0.4 nmol/L, and the adult female range is 0.6 - 2.5 nmol/L.

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR\*, FE, COR\*, AND, A1C

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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-HOR-0  
Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
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Name of Test: HORMONE PROFILE (HOR-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
16:09

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

		SERUM HORMONE PROFILE						
Specimen Type:	Serum							
Request Number	Date Collected	FSH IU/L	LH IU/L	PROG nmol/L	E2 (ATEL) pmol/L	E2 (BECK) pmol/L	LH/FSH Ratio	
24481950	9 Oct 23	6	6.6		215			
Reference Ranges		FSH	LH	PROG	OESTRADIOL			
Follicular		2-12	2-12	0.5-4.5	100-530			
Midcycle		12-30	>15		235-1300			
Luteal		2-12	2-15	10.6-89.1	205-790			
Menopausal		>25	>10		<100			
Prepubertal		<6	<4					

PLEASE NOTE:

'E2 (ATEL)' - Oestradiol by Siemens Atellica assay  
'E2 (BECK)' - Oestradiol by Beckman Access assay

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR, FE, COR\*, AND, A1C

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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-ANE-0  
Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
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Name of Test: ANDROSTENEDIONE (ANE-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
17:05

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

REFERENCE REPORT

The following test has been sent to:  
THE NEW CHILDREN'S HOSPITAL - ANDROSTENEDIONE  
Usually a result will be available in 30 days

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR, FE, COR\*, AND, A1C



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Your Reference: GTU41565\_A4120 Lab Reference: 23-24481950-COR-0  
Laboratory: Laverty Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
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Name of Test: SERUM CORTISOL (COR-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 10/10/2023  
17:50

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

SERUM CORTISOL

Time 08:03  
Cortisol 524 nmol/L

AM Reference Interval 120-620 nmol/L

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR, FE, COR, AND, A1C

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Laboratory: Lavery Pathology  
Addressee: DR JULIAN WHITE Referred by: DR RACHEL COLLINGS  
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Name of Test: 17 HYDROXYPROGESTERONE (17H-0)  
Requested: 28/09/2023 Collected: 09/10/2023 Reported: 11/10/2023  
14:29

Clinical notes: Weight gain, rule out pathology.

Clinical Notes : Weight gain, rule out pathology.

REFERENCE REPORT

The following test has been sent to:  
PRINCE OF WALES HOSPITAL - 17 HYDROXYPROGESTERONE  
Usually a result will be available in 7 days

Requested Tests : TFT, PRL, ANE\*, 17H\*, MBA, HOR, FE, COR, AND, A1C