Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	TRANSFUSION MEDICINE		
Clinical Information:			

Blood Group

ABO/RhD Group: A Rh(D) Pos

Tests Pending: Hepatitis B Surface Antigen,Hepatitis C Antibody,Rubella IgG Serology,Syphilis Antibody,HIV Ag/Ab

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	HIV AG/AB		
Clinical Information:			

HIV Serology
NSW STATE REF LAB FOR HIV

HIV Ag/Ab Non Reactive

HIV Comment

Antibodies to HIV-1 and HIV-2 and/or HIV p24 antigen NOT detected. A non reactive HIV antibody test does not necessarily exclude the possibility of exposure to, or infection with, HIV. If this serum was taken less than 3 months after a suspected exposure, this patient should be retested after that time. The impact of any recent antiretroviral therapy is unknown. For information about sexually transmitted infections and HIV for doctors and patients, visit www.health.nsw.gov.au/publichealth/sexual health or call NSW Sexual Health Infoline 1800 451 624.

Tests Pending: Hepatitis B Surface Antigen,Hepatitis C Antibody,Rubella IgG Serology,Syphilis Antibody

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	HEPATITIS B SURFACE ANTIGEN		
Clinical Information:			

Hepatitis Serology (serum)
Hepatitis B Surface Antigen NonReactive

Tests Pending: Rubella IgG Serology

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	HEPATITIS C ANTIBODY MEASUREMENT		
Clinical Information:			

Hepatitis Serology (serum)

Hepatitis C Antibody	NonReactive
HCV Comment:	No serological evidence of HCV infection. If clinically indicated, it is recommended a serum sample be collected in 2 months for further anti-HCV testing or a HCV RNA PCR test be performed.

Tests Pending: Rubella IgG Serology

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	SYPHILIS ANTIBODY		
Clinical Information:			

Bacterial Serology (serum)

Syphilis TP CMIA NonReactive

Syphilis Comment: No serological evidence of recent or past syphilis infection. Please send a serum 14-21 days after onset of symptoms if infection is clinically indicated.

Tests Pending: Rubella IgG Serology

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	RUBELLA IGG SEROLOGY		
Clinical Information:			

Viral Serology (serum)

Rubella IgG 28.9 IU/mL
Rubella IgG Interp Immune

Rubella Comment

0.0-4.9 IU/mL Non Immune
5.0-9.9 IU/mL Equivocal
10.0-500.0 IU/mL Immune
Indicates current or past infection or immunisation.

Tests Pending: IVF testing

Patient Name:	BERGER, ASHLEIGH		
Patient Address:	150 GWYDIR STREET, MOREE 2400		
D.O.B:	23/04/1991	**Gender:**	F
Medicare No.:	2701941463	**IHI No.:**	
Lab. Reference:	5503789	**Provider:**	SYDPATH
Addressee:	DR CALLUM FEALY	**Referred by:**	DR MARK LIVINGSTONE 0964546K
Date Requested:	1/11/2023	**Date Performed:**	2/11/2023
Date Collected:	2/11/2023	**Complete:**	Final
Specimen:			
Subject(Test Name):	IVF TESTING		
Clinical Information:			

IVF testing

FSH	5.0	IU/L	
Oestradiol	348	pmol/L	
Progesterone	0.9	nmol/L	
Total Beta HCG (Genea)	0.1	mIU/ml	[0.0-5.0]
Comments	Test performed by Genea Genetics - Tel:(02)9229-6471.		