

Patient Name: SWEENEY, DELMA
Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-DD-0
Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Addressee: DR ROBERT G NOLL
Referred by: DR R NOLL
Date Requested: 27/11/2023
Date Performed: 27/11/2023
Date Collected: 27/11/2023
Complete: Final
Specimen:
Subject(Test Name): QUANT D-DIMER (DD-0)
Clinical Information:

D-DIMER FOR VENOUS THROMBOSIS (Plasma)

* D-Dimer . . . : 1.36 ug/ml (< 0.50)
Interpretation : **POSITIVE**

A positive result does not confirm or exclude venous thrombosis. It can be raised in a number of conditions including DIC, ageing, normal pregnancy and pre-eclampsia, and in infection / inflammation.

Please note change in DDimer reference range as of 22/08/2022

Requested Tests : IG, HST, TF, LFT, GA, EUC, CRP, CK, IRS, HAE, EBC, DD, BF

FLCCC protocols.

Nattokinase
Bromelain
Circumin

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Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-HST-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Referred by: DR R NOLL

Addressee: DR ROBERT G NOLL

Date Requested: 27/11/2023

Date Performed: 27/11/2023

Date Collected: 27/11/2023

Complete: Final

Specimen:

Subject(Test Name): HIGH SENSITIVITY TROPONIN (HST-0)

Clinical Information:

High Sensitive Troponin I (hsTnI) - Serum/Plasma

Date of Collection: 27/11/2023

Time of Collection: 12:25

Lab No: 23-88381816

hsTnI (Beckman Coulter): 3 (<11 ng/L)
Z-Score:

Time since last hsTnI collected: / (HH:MM)
Delta change since last hsTnI: / (ng/L)

* Z-score > +/- 2.0 indicates >95% prob of significant change.

* Z-score > +/- 3.0 indicates >99% prob of significant change.

* Normal hs-Troponin is 0-10 ng/L (F) and 0-20 ng/L (M)

* A diagnosis of AMI requires a change (rise or fall) in Troponin with at least one value above the gender-specific reference interval in the presence of suggestive ischaemic symptoms and/or ECG changes.

* Troponin may be increased by causes other than AMI. Caution should be used in comparing results from different instruments as standardisation varies.

Requested Tests : IG*, HST, TF*, LFT*, GA*, EUC*, CRP*, CK*, IRS*, HAE*, EBC*, DD*, BF*

Patient Name:	SWENEY, DELMA	Gender:	F
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D.O.B:	30/09/1958	Provider:	WESTERN DIAGNOSTIC PATHOLOGY
Medicare No.:	2147089859	Referred by:	DR R NOLL
Lab. Reference:	23-88381816-EUC-0		
Addressee:	DR ROBERT G NOLL		
Date Requested:	27/11/2023	Date Performed:	27/11/2023
Date Collected:	27/11/2023	Complete:	Final
Specimen:			
Subject(Test Name):	ELECTROLYTES INC CREAT (EUC-0)		
Clinical Information:			

CUMULATIVE ELECTROLYTES (Serum)

Date	Time	Na mmol/L (135 - 145)	K mmol/L (3.5 - 5.2)	Cl mmol/L (95 - 110)	HCO3 mmol/L (22 - 32)	Urea mmol/L (3.0 - 8.0)	Creat umol/L (45 - 90)	Lab.No.
27/11/23	12:25	140	3.8	102	25	7.3	76	88381816

eGFR : 71 mL/min/1.73m²

EGFR by CKD-EPI formula (Med J Aust 2012; 197:222 -223).

Instrument: Siemens Atellica

Requested Tests : IG*, HST, TF*, LFT*, GA*, EUC, CRP*, CK*, IRS*, HAE*, EBC*, DD*, BF*

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Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-CRP-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Referred by: DR R NOLL

Date Requested: 27/11/2023

Date Performed: 27/11/2023

Date Collected: 27/11/2023

Complete: Final

Specimen:

Subject(Test Name): C-REACTIVE PROTEIN (CRP) (CRP-0)

Clinical Information:

C-REACTIVE PROTEIN (Serum) (Reference Range < 5)

Date	Time	Result mg/L	Lab. No.
27/11/23	12:25	3	88381816

Instrument: Siemens Atellica

Requested Tests : IG*, HST, TF*, LFT*, GA*, EUC, CRP, CK*, IRS*, HAE*, EBC*, DD*, BF*

Patient Name: SWEENEY, DELMA
Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-BF-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
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Addressee: DR ROBERT G NOLL

Date Requested: 27/11/2023

Date Performed: 27/11/2023

Date Collected: 27/11/2023

Complete: Final

Specimen:

Subject(Test Name): B12 +RBC FOLATE ENQUIRIES (BF-0)
Clinical Information:

VITAMIN B12 and FOLATE (serum)

Vitamin B12 : 520 pmol/L (< 120 Deficient)
(150-750 Normal)

COMMENT: Normal vitamin B12 status.

Instrument: Siemens Atellica

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE*, EBC*, DD*, BF

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Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-CK-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
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Addressee: DR ROBERT G NOLL

Date Requested: 27/11/2023

Date Performed: 27/11/2023

Date Collected: 27/11/2023

Complete: Final

Specimen:

Subject(Test Name): CK TOTAL (CK-0)

Clinical Information:

TOTAL CK (Serum) (Reference Range (< 200))

Date	Time	Result U/L	Lab. No.
27/11/23	12:25	91	88381816

Instrument: Siemens Atellica

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE*, EBC*, DD*, BF

Patient Name: SWEENEY, DELMA
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D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-IG-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Referred by: DR R NOLL

Date Requested: 27/11/2023
Date Collected: 27/11/2023
Specimen:

Date Performed: 27/11/2023
Complete: Final

Subject(Test Name): IMMUNOGLOBULIN ASSAY (IG-0)
Clinical Information:

IMMUNOGLOBULINS (Serum)

IgG	8.50 g/L	(6.10 - 13.00)
IgA	1.58 g/L	(0.69 - 3.10)
IgM	2.10 g/L	(0.53 - 3.32)

Instrument: Siemens Atellica

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE*, EBC*, DD*, BF

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D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-IRS-0
Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC PATHOLOGY
Addressee: DR ROBERT G NOLL
Referred by: DR R NOLL
Date Requested: 27/11/2023
Date Performed: 27/11/2023
Date Collected: 27/11/2023
Complete: Final
Specimen:
Subject(Test Name): IRON STUDIES ENQUIRIES (IRS-0)
Clinical Information:

CUMULATIVE IRON STUDIES (serum)

Date	Iron umol/L	Transferrin umol/L	TFN Satn %	Ferritin ug/L	Lab.No.
27/11/23	12	41	15	119	88381816
Ref:	(11 - 27)	(20 - 45)	(15 - 55)	(30 - 300)	

88381816 Ferritin suggests adequate iron stores.

- As ferritin is influenced by acute phase responses results in the lower-normal range (30-100) may not exclude iron deficiency.
- Ferritin levels >100 and < upper limit usually reflect adequate iron stores.
- Serum iron is useless in determining tissue iron stores.

Instrument: Siemens Atellica

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE*, EBC*, DD*, BF

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D.O.B:	30/09/1958	Gender:	F
Medicare No.:	2147089859	IHI No.:	
Lab. Reference:	23-88381816-LFT-0	Provider:	WESTERN DIAGNOSTIC PATHOLOGY
Addressee:	DR ROBERT G NOLL	Referred by:	DR R NOLL
Date Requested:	27/11/2023	Date Performed:	27/11/2023
Date Collected:	27/11/2023	Complete:	Final
Specimen:			
Subject(Test Name):	LIVER FUNCTION TESTS (LFT-0)		
Clinical Information:			

CUMULATIVE LIVER FUNCTION TEST (Serum)
Please note change in report format as of 14/12/2021

Collection Date:	27/11/23
Collection Time:	12:25
Lab No:	88381816

Bilirubin:	16	umol/L	(< 16)
Alk Phos:	92	U/L	(30 - 110)
Gamma GT:	28	U/L	(< 36)
ALT:	34	U/L	(< 36)
AST:	28	U/L	(< 36)
Albumin:	52	g/L	(36 - 48)
Protein:	80	g/L	(60 - 80)
Globulin Gap:	28	g/L	(22 - 38)

88381816 Dehydration is a possible cause of the observed hyperalbuminaemia. Further clinical correlation is recommended.

Instrument: Siemens Atellica

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE*, EBC*, DD*, BF

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Patient Address: 6 LACEBARK CT, ELLENBROOK 6069
D.O.B: 30/09/1958
Medicare No.: 2147089859
Lab. Reference: 23-88381816-HAE-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Referred by: DR R NOLL

Addressee: DR ROBERT G NOLL

Date Requested: 27/11/2023
Date Collected: 27/11/2023

Date Performed: 27/11/2023
Complete: Final

Specimen:
Subject(Test Name): HAEM MASTER - ENQUIRIES (HAE-0)
Clinical Information:

ROUTINE HAEMATOLOGY (Whole Blood)

RCC	4.46	$\times 10^{12}/L$	HAEMOGLOBIN	137	(115 - 160)	g/L
	(3.80 - 5.80)		MCV	91	(80 - 98)	fL
HCT	0.405		MCHC	338	(315 - 360)	g/L
	(0.370 - 0.470)		RDW	13	(< 16)	%
MCH	30.7	pg				
	(27.0 - 34.0)					
			ESR	25	(1 - 30)	mm/h
			PLATELETS	373	(150 - 450)	$\times 10^9/L$
			WHITE CELLS	10.1	(4.0 - 11.0)	$\times 10^9/L$
			Neut	65%	(2.0 - 8.0)	" "
			Lymph	26%	(1.0 - 4.0)	" "
			Mono	7%	(0.2 - 1.2)	" "
			Eosin	2%	(< 0.7)	" "

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE, EBC*, DD*, BF

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D.O.B:	30/09/1958	Gender: F
Medicare No.:	2147089859	IHI No.:
Lab. Reference:	23-88381816-EBC-0	Provider: WESTERN DIAGNOSTIC PATHOLOGY
Addressee:	DR ROBERT G NOLL	Referred by: DR R NOLL
Date Requested:	27/11/2023	Date Performed: 27/11/2023
Date Collected:	27/11/2023	Complete: Final
Specimen:		
Subject(Test Name):	EBV AND CMV SEROLOGY (EBC-0)	
Clinical Information:		

EBV AND CMV SEROLOGY

Date	Epstein Barr Virus			Cytomegalovirus		Lab No.
	IgG	IgM	EBNA IgG	IgG	IgM	
27/11/23	Positive	Negative	Positive			88381816

88381816 Epstein Barr Virus comment:
Epstein Barr virus serology is consistent with past infection.

Requested Tests : IG, HST, TF, LFT, GA*, EUC, CRP, CK, IRS, HAE, EBC, DD*, BF

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Medicare No.: 2147089859
Lab. Reference: 23-88381816-GA-0

Gender: F
IHI No.:
Provider: WESTERN DIAGNOSTIC
PATHOLOGY
Referred by: DR R NOLL

Addressee: DR ROBERT G NOLL

Date Requested: 27/11/2023

Date Performed: 27/11/2023

Date Collected: 27/11/2023

Complete: Final

Specimen:

Subject(Test Name): GLYCOSYLATED HB A1C (GA-0)

Clinical Information:

GLYCATED HAEMOGLOBIN (Blood)

Date	Hb A1C %	mmol/mol(IFCC)	Lab No
27/11/23	5.7	39	88381816

Diagnostic threshold for type 2 diabetes mellitus:

>= 6.5% (>= 48 mmol/mol).

General treatment target for patients with known diabetes mellitus:

<= 7.0 % (<= 53 mmol/mol). Higher or lower targets are appropriate for some patients.

See www.wdp.com.au/HbA1c for more information on the use and interpretation of HbA1c.

Requested Tests : IG, HST, TF, LFT, GA, EUC, CRP, CK, IRS, HAE, EBC, DD*, BF