

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 6369051Z047
Addressee: DR OKWUN OJAH
Date Requested: 1/12/2023
Date Collected: 8/12/2023
Specimen:
Subject(Test Name): IRON STUDIES
Clinical Information:

Gender: F
IHI No.:
Provider: SYDPATH
Referred by: Dr OKWUN OJAH
Date Performed: 8/12/2023
Complete: Final

Date:	Current Result	Previous results for comparison only				Reference (for this collection)
Time:						
Request No.:						
	08/12/23	19/07/23	25/03/21	20/02/20		
	08:20	13:15	08:25	11:50		
	6369051	6360177	6190011	6166513	Units	
Iron Studies						
Ferritin serum	99	129	178 H	286 H	ug/L	15-150
Iron serum	14	8 L	16	14	umol/L	10-30
Transferrin	3.0	2.3	2.2	2.2	g/L	2.0-3.5
Transferrin satn	19	14 L	29	25	%	15-50
Ferritin com.				FERCOM		

Clinical History: 26-28/40 WEEKS

Tests Pending: Syphilis Antibody

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-GTT-0
Addressee: DR OKWUN OJAH

Gender: F
IHI No.:
Provider: Lavery Pathology
Referred by: Dr A Woods

Date Requested: 22/12/2023
Date Collected: 22/12/2023
Specimen:

Date Performed: 22/12/2023
Complete: Final

Subject(Test Name): 2 HR GLUC TOLERANCE TEST (GTT-0)
Clinical Information:

Clinical Notes : Pregnant 27weeks 5days.

2 HR GLUCOSE TOLERANCE TEST

75 grams oral glucose given at zero time

Specimen Type: Fluoride / Oxalate Plasma

Time(Hours)	Glucose mmol/L	Reference ranges	Diabetic ranges	Gestational diabetic ranges
Fasting	4.9	(3.4-5.4)	(> 6.9)	(>=5.1)
1	7.9			(>=10.0)
2	5.5	(< 7.8)	(> 11.0)	(>=8.5)

Fasting glucose <5.1 mmol/L, 1 hour glucose <10.0 mmol/L and 2 hour glucose <8.5 mmol/L is consistent with normal glucose tolerance in pregnancy. Reference: ADIPS 2014.

Please note that the criteria for gestational diabetes used in the previous ADIPS guidelines (ADIPS 1998) were:

- Fasting glucose >= 5.5 mmol/L, and/or
- 2 hour glucose >= 8.0 mmol/L

These cut-offs are still recommended by some Australian professional groups, including the RACGP.

Requested Tests : VBF, SYP, GTT, FE, FBE, DVI

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-VBF-0
Addressee: DR OKWUN OJAH
Gender: F
IHI No.:
Provider: Lavery Pathology
Referred by: Dr A Woods
Date Requested: 22/12/2023
Date Collected: 22/12/2023
Specimen:
Subject(Test Name): B12, FOLATE, R.C.FOLATE (VBF-0)
Clinical Information:

Date Performed: 22/12/2023
Complete: Final

Clinical Notes : Pregnant 27weeks 5days.

VITAMIN B12 AND FOLATE STUDIES

Active B12 67 pmol/L (> 40)
 Serum Folate 24.8 nmol/L (> 9.0)

Serum Active B12 Assay:

This active B12 result indicates that the patient is likely to be vitamin B12 sufficient. Patients with renal impairment may still be B12 depleted despite an active B12 level within this range. For these patients, correlation with total B12, homocysteine and/or methylmalonate is required.

Folate Interpretation:

	DEFICIENCY	BORDERLINE	SUFFICIENCY
Serum Folate:	<4.5 nmol/L	4.5 - 9.0 nmol/L	>9.0 nmol/L
RBC Folate:	<340 nmol/L	340 - 570 nmol/L	>570 nmol/L

Serum Folate Assay:

In the absence of recent oral intake, a serum folate >9.0 nmol/L effectively rules out folate deficiency.

Red cell folates (RCF) are no longer processed routinely. If you have requested a RCF, and require a result for appropriate clinical reasons, this will need to be discussed and agreed with a Consultant Haematologist on +61290027085 or Dr. Lucinda Wallman, Consultant Pathologist in Immunology and Medical Director on telephone number +61 290057179

Requested Tests : VBF, SYP, GTT*, FE, FBE, DVI

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-DVI-0
Addressee: DR OKWUN OJAH
Gender: F
IHI No.:
Provider: Lavery Pathology
Referred by: Dr A Woods
Date Requested: 22/12/2023
Date Collected: 22/12/2023
Specimen:
Subject(Test Name): VITAMIN D (DVI-0)
Clinical Information:

Clinical Notes : Pregnant 27weeks 5days.

VITAMIN D

Haemolysis	Nil	
Serum 25(OH) Vitamin D	46	nmol/L

Suggested decision limits for Vitamin D status:

Sufficiency	51 -200	nmol/L
Mild deficiency	25 - 50	nmol/L
Marked deficiency	< 25	nmol/L
Toxicity	>250	nmol/L

References: Vitamin D and health in adults in Australia and New Zealand:
Position Statement. MJA 2012 June 18; 196(11),686-687.

Requested Tests : VBF*, SYP, GTT*, FE, FBE, DVI

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-SYP-0
Addressee: DR OKWUN OJAH

Gender: F
IHI No.:
Provider: Lavery Pathology
Referred by: Dr A Woods

Date Requested: 22/12/2023
Date Collected: 22/12/2023

Date Performed: 22/12/2023
Complete: Final

Specimen:
Subject(Test Name): TREPONEMAL SEROLOGY (SYP-0)
Clinical Information:

Clinical Notes : Pregnant 27weeks 5days.

	<u>SYPHILIS SEROLOGY</u>	
Request Number	21278114	25594846
Date Collected	10 Nov 22	22 Dec 23
Time Collected	08:28	09:59
Syphilis Screen (CMIA)	Negative	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.

Requested Tests : VBF*, SYP, GTT*, FE, FBE, DVI*

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-FE-0
Addressee: DR OKWUN OJAH

Date Requested: 22/12/2023
Date Collected: 22/12/2023
Specimen:
Subject(Test Name): IRON STUDIES (FE-0)
Clinical Information:

Gender: F
IHI No.:
Provider: Lavery Pathology
Referred by: Dr A Woods

Date Performed: 22/12/2023
Complete: Final

Clinical Notes : Pregnant 27weeks 5days.

IRON STUDIES

Request Number	12244125	21278114	25594846
Date Collected	3 Sep 21	10 Nov 22	22 Dec 23
Time Collected	08:23	08:28	09:59
Specimen Type: Serum			
Iron (10-30) umol/L	8	13	
T'ferrin(32-48) umol/L	27	26	
T. Sat. (13-45)	15	26	
Ferritin(30-165) ug/L	237	187	66

Normal serum ferritin result noted. However, this result does not exclude iron deficiency if the patient has concurrent inflammation. If there is clinical suspicion of iron deficiency and/or a concurrent inflammatory condition, suggest measurement of full iron studies and CRP.

Requested Tests : VBF*, SYP*, GTT*, FE, FBE, DVI*

Patient Name: STOVE, MELISSA
Patient Address: 17 COOMA RD, NARRABRI 2390
D.O.B: 11/12/1986
Medicare No.: 2610085427
Lab. Reference: 23-25594846-FBE-0
Addressee: DR OKWUN OJAH

Gender: F
IHI No.:
Provider: Laverty Pathology
Referred by: Dr A Woods

Date Requested: 22/12/2023
Date Collected: 22/12/2023

Date Performed: 22/12/2023
Complete: Final

Specimen:
Subject(Test Name): HAEMATOLOGY (FBE-0)
Clinical Information:

Clinical Notes : Pregnant 27weeks 5days.

		HAEMATOLOGY		
Request Number		12244125	21278114	25594846
Date Collected		3 Sep 21	10 Nov 22	22 Dec 23
Time Collected		08:23	08:28	09:59
Specimen Type: EDTA				
Hb (105-145)	g/L	131	132	113
Hct (0.30-0.42)		0.40	0.40	0.34
RCC (3.3-4.9)	x10 ¹² /L	4.5	4.5	3.7
MCV (79-99)	fL	89	90	92
MCH (27-34)	pg	29	30	31
MCHC (320-360)	g/L	328	331	334
RDW (10.0-17.0)	%	12.1	11.9	12.4
WBC (4.0-14.5)	x10 ⁹ /L	7.0	6.2	10.8
Neut (2.0-11.0)	x10 ⁹ /L	4.5	3.7	8.9
Lymph (1.0-4.0)	x10 ⁹ /L	1.6	1.8	1.3
Mono (0.2-1.0)	x10 ⁹ /L	0.8	0.5	0.5
Eos (< 0.7)	x10 ⁹ /L	0.1	0.1	0.1
Baso (< 0.2)	x10 ⁹ /L	0.0	0.1	0.0
Plat (150-400)	x10 ⁹ /L	172	173	215

HAEMATOLOGY: Haematology results are normal for pregnancy.

Requested Tests : VBF*, SYP*, GTT*, FE*, FBE, DVI*