

Referrer **Dr Georgla Bavin**

Address THE BUBBLE LAUNCESTON 4/23 BRISBANE ST
LAUNCESTON TAS 7250

Phone 0367243063

Lab ID **413183784**

DOB 20/12/1985 (37 Yrs FEMALE)

Your ref. 1990

Address 54 TALBOT RD
SOUTH LAUNCESTON TAS 7249

Phone 0407079396

Copy to

Clinical Notes aim day 2-3

Requested 26/10/2023

Collected 04/11/2023 07:24

Received 04/11/2023 07:28

SEROLOGY

Specimen Type: SERUM

Syphilis Antibody NON-REACTIVE

Rubella IgG Ab IU/mL 21.40 IU/mL
Rubella IgG Antibody DETECTED

Rubella IgG antibody detected suggesting past infection or immunisation. This level of antibody is usually consistent with a protective level of immunity. In rare cases re-infection with rubella has been reported. If the patient is pregnant, and there is concern regarding possible recent Rubella infection, suggest repeat testing for Rubella IgM and IgG within 7-14 days.

Hep B core Total Antibody NOT DETECTED

Hepatitis C Antibody NOT DETECTED

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Comments

No serological evidence of Treponemal infection (syphilis, yaws or pinta).

Serology may be negative in the early stages of syphilis. If recent infection is suspected, consider swabbing the base of any ulcer that is present for syphilis PCR and repeating serology in 2 - 4 weeks.

Syphilis serology is recommended for pregnant women at their first antenatal visit and repeated at 26-28 weeks gestation and for anyone as part of a routine STI screen or in the presence of a clinically compatible illness.

Please refer to sti.guidelines.org.au for further testing information.

No evidence of past infection with Hepatitis B.
If not already done, consider testing for HepBsAb to determine immune status in accordance with the National Hepatitis B Testing Policy.

For further information please contact a Clinical Microbiologist or see Diagnostic Strategies:
www.testingportal.ashm.org.au/hbv/diagnostic-strategies

No serological evidence of Hepatitis C virus infection. As seroconversion can be delayed for up to 3 months, re-testing at 3 months after a significant exposure is recommended, if clinically indicated.
For further information, please contact a Clinical Microbiologist or see Diagnostic Strategies: www.testingportal.ashm.org.au/national-hcv-testing-policy/diagnostic-strategies/

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HOBART PATHOLOGY NATA ACCREDITATION NO. 2270

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