

DR OEDEKOVEN, STEFANIE LUISE



For Surgery Use

Urgent ☐ Ring Patient ☐ Make Appointment ☐ Note in Chart ☐ File ☐

Patient **BUISSET, ELODIE**

8 BLISS DR, PALMVIEW, MOOLOOLAH QLD

Sex Female Age 28 Years DOB 16/10/95

Requested 04/01/24

Report For CC Drs: Nil

Collected 04/01/24 11:14 AM

Reported 05/01/24 09:40 AM  
00333425

## CUMULATIVE SERUM THYROID FUNCTION TESTS

Date	31/12/22	05/01/23	11/10/23	04/01/24	
Time	10:07	12:50	15:38	11:14	
Lab No	72136330	72135751	74252079	74377962	
TSH	3.2	2.1	1.2	1.6	mIU/L (0.50-4.00)
free T4	14	14	16	11	pmol/L (10-20)
free T3		5.0			pmol/L (2.8-6.8)
Thyroglobulin AbII	< 1.3			IU/mL (< 4.6)	
Thy. Peroxidase Ab	< 28			IU/mL (< 60)	

The TFT reference intervals for pregnancy are as follows:

	TSH (mIU/L)	FT4 (pmol/L)
First trimester	0.03-2.5	10-21
Second trimester	0.05-3.0	11-18
Third trimester	0.30-3.5	9-17

Progress value

Progress level - On Levothyroxine

The therapeutic target for replacement therapy in primary hypothyroidism is to maintain a normal TSH but it is reasonable to aim for a TSH level in the lower reference interval if the patient has persistent symptoms. In patients with differentiated thyroid cancer, the target TSH level should be subnormal or undetectable depending on individualized post-ablation risk stratification.

Note: Serum TSH should not be used to monitor T4 therapy in central hypothyroidism. Serum fT4 level should be maintained in the upper 50% of the normal range.

Pathology Report

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