



**Sullivan
Nicolaides**
PATHOLOGY

Quality is in our DNA

5 Jan 2024
CHARMAINE SAVAGE

Referrer Dr Chaudhry F Masud

Address EACHAM MEDICAL CENTRE 17 CATHERINE ST
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Phone 0740965999

Lab ID 684957918

Your ref. 21716

Address 48 BELLAMY DRIVE
TOLGA QLD 4882

Phone 0435805605

DOB 08/01/1972 (51 Yrs FEMALE)

Copy to

Clinical Notes Raised APTT, dysmenorrhoea

Requested 06/12/2023

Collected 05/01/2024 09:29

Received 05/01/2024 09:31

Special Coagulation Assays

Factor VIIIc	0.81	0.50 - 2.00	U/mL
vWF:Ag	0.74	0.50 - 2.00	U/mL
vWF:Activity	0.69	0.50 - 2.00	U/mL
Factor IX	0.90	0.50 - 2.00	U/mL
Factor XI	0.85	0.50 - 2.00	U/mL
Factor XII	0.86	0.50 - 2.00	U/mL
PT	10	8 - 14	s
APTT	51 H	23 - 38	s

Comments

Normal levels of Factors VIIIc, IX, XI and XII.

The von Willebrand screen demonstrates normal levels of antigen and activity.

Severe von Willebrand disease has been excluded.

Von Willebrand factor levels may increase due to inflammation, stress, exercise, pregnancy and oral contraceptive use.

Repeat testing on up to three occasions could be considered if there is clinical suspicion of a possible bleeding disorder. Correlate also with results of other investigations.

Testing should be performed when the patient is clinically stable and has rested at least 30 minutes.

Dr Rebecca Adams.



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Pro-thrombotics Studies

Lupus Anticoagulant	Equivocal		
PT	10	8 - 14	s
APTT	51 H	23 - 38	s

- not true or -ve *3/1/24*

Comments

Equivocal result for lupus anticoagulant.

The panel of assays performed is APTT, PTT-LA and dRVVT.

Suggest repeat, together with ANA, anti-cardiolipin antibodies,

anti Phosphatidylserine /Prothrombin antibodies and

anti-Beta2 glycoprotein 1 antibodies, in 12 weeks, if clinically

indicated.

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Bleeding Studies

INR	0.9	0.8 - 1.2	
PT	10	8 - 14	s
APTT	51 H	23 - 38	s
Fibrinogen	2.72	1.80 - 4.20	g/L
Thrombin Clotting Time	15	13 - 23	s
Platelet Count	214	150 - 400	10 ⁹ /L

5/1/24

Comments

Prolonged APTT

Correlate with patient's medication and clinical history. If this is an unexpected result, suggest repeat to confirm in the first instance. If this prolongation persists, further investigation is recommended. Causes of prolonged APTT include factor deficiency, inhibitors, lupus anticoagulant and anticoagulant therapy. A haematologist is available for consultation if required.



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Haematology

Test Name	Result	Units	Reference Interval
Haemoglobin	138	g/L	115 - 165
Haematocrit	0.40		0.35 - 0.47
Red cell count	4.2	10 ¹² /L	3.9 - 5.6
MCV	97	fL	80 - 100
White cell count	5.3	10 ⁹ /L	3.5 - 12.0
Neutrophils	3.46	10 ⁹ /L	1.5 - 8.0
Lymphocytes	1.39	10 ⁹ /L	1.0 - 4.0
Monocytes	0.40	10 ⁹ /L	0 - 0.9
Eosinophils	0.03	10 ⁹ /L	0 - 0.6
Basophils	0.03	10 ⁹ /L	0 - 0.15
Platelets	214	10 ⁹ /L	150 - 400

HA