

HOLLIDAY, PANDORA  
2137 MITCHELL HWY, VITTORIA. 2799

Phone: 0413558946

Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899005

Your Reference: 00054208 Lab Reference: 23-23699655-FBE-0

Laboratory: Laverty Pathology

Addressee: DR JESSICA FARDON Referred by: DR JESSICA FARDON

Name of Test: HAEMATOLOGY (FBE-0)

Requested: 17/07/2023 Collected: 18/07/2023 Reported: 18/07/2023  
23:24

Clinical notes: Post partum.

Clinical Notes : Post partum.

| HAEMATOLOGY                       |           |          |          |           |
|-----------------------------------|-----------|----------|----------|-----------|
| Request Number                    | 20307296  | 20298561 | 20298562 | 23699655  |
| Date Collected                    | 24 Jan 23 | 6 Mar 23 | 6 Mar 23 | 18 Jul 23 |
| Time Collected                    | 10:43     | 10:58    | 10:59    | 11:34     |
| Specimen Type: EDTA               |           |          |          |           |
| Hb (115-165) g/L                  | 126       | 120      | 123      | 131       |
| Hct (0.34-0.47)                   | 0.36      | 0.34     | 0.35     | 0.40      |
| RCC (3.9-5.8) $\times 10^{12}$ /L | 4.2       | 4.1      | 4.2      | 4.6       |
| MCV (79-99) fL                    | 85        | 83       | 84       | 86        |
| MCH (27-34) pg                    | 30        | 29       | 30       | 28        |
| MCHC (320-360) g/L                | 351       | 351      | 353      | 329       |
| RDW (10.0-17.0) %                 | 12.9      | 13.0     | 13.1     | 12.5      |
|                                   |           |          |          |           |
| WBC (4.0-11.0) $\times 10^9$ /L   | 6.8       | 6.5      | 6.5      | 6.3       |
| Neut (2.0-7.5) $\times 10^9$ /L   | 5.0       | 4.6      | 4.6      | 3.5       |
| Lymph (1.0-4.0) $\times 10^9$ /L  | 1.2       | 1.3      | 1.3      | 1.9       |
| Mono (0.2-1.0) $\times 10^9$ /L   | 0.5       | 0.5      | 0.4      | 0.6       |
| Eos (< 0.7) $\times 10^9$ /L      | 0.1       | 0.1      | 0.1      | 0.2       |
| Baso (< 0.2) $\times 10^9$ /L     | 0.0       | 0.0      | 0.0      | 0.1       |
|                                   |           |          |          |           |
| Plat (150-400) $\times 10^9$ /L   | 165       | 203      | 202      | 176       |

HAEMATOLOGY: FBC parameters are within reference range.

Requested Tests : TFT\*, MBA\*, FE\*, FBE

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 Phone: 0413558946  
 Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899005  
 Your Reference: 00054208 Lab Reference: 23-23699655-MBA-0  
 Laboratory: Laverty Pathology  
 Addressee: DR JESSICA FARDON Referred by: DR JESSICA FARDON

Name of Test: SERUM CHEMISTRY (MBA-0)  
 Requested: 17/07/2023 Collected: 18/07/2023 Reported: 19/07/2023  
 00:19

Clinical notes: Post partum.

Clinical Notes : Post partum.

|                      |                           | SERUM CHEMISTRY |          |           |           |  |
|----------------------|---------------------------|-----------------|----------|-----------|-----------|--|
| Request Number       |                           | 16860416        | 20307448 | 20307296  | 23699655  |  |
| Date Collected       |                           | 11 Aug 22       | 6 Oct 22 | 24 Jan 23 | 18 Jul 23 |  |
| Time Collected       |                           | 10:08           | 10:26    | 10:43     | 11:34     |  |
| Specimen Type: Serum |                           |                 |          |           |           |  |
| Haemolysis           |                           | Nil             | Nil      | Nil       | Nil       |  |
| Icterus              |                           | Nil             | Nil      | Nil       | Nil       |  |
| Lipaemia             |                           | Nil             | Nil      | Nil       | Nil       |  |
| Na                   | (135-145) mmol/L          | 139             | 139      | 137       | 140       |  |
| K                    | (3.6-5.4) mmol/L          | 4.0             | 3.7      | 3.8       | 4.2       |  |
| Cl                   | (95-110) mmol/L           | 105             | 102      | 104       | 103       |  |
| HCO3                 | (22-32) mmol/L            | 25              | 23       | 23        | 21        |  |
| An Gap               | (10-20) mmol/L            | 13              | 18       | 14        | 20        |  |
| Urea                 | (2.5-8.0) mmol/L          | 4.5             | 3.5      | 3.2       | 4.9       |  |
| Creat                | (45-90) umol/L            | 55              | 60       | 45        | 65        |  |
| eGFR                 | mL/min/1.73m <sup>2</sup> | > 90            | > 90     | > 90      | > 90      |  |
| Urate                | (0.14-0.36) mmol/L        | 0.22            |          |           |           |  |
| Bili                 | (< 15) umol/L             | 12              | 14       |           |           |  |
| AST                  | (< 30) U/L                | 28              | 27       |           |           |  |
| ALT                  | (< 30) U/L                | 21              | 27       |           |           |  |
| GGT                  | (< 30) U/L                | 16              | 20       |           |           |  |
| Alk Phos             | (20-105) U/L              | 90              | 67       |           |           |  |
| Protein              | (60-82) g/L               | 74              | 75       |           |           |  |
| Albumin              | (38-50) g/L               | 44              | 44       |           |           |  |
| Glob                 | (20-39)                   | 30              | 31       |           |           |  |
| Ca                   | (2.10-2.60) mmol/L        | 2.33            |          |           |           |  |
| Corr Ca              | (2.10-2.60)               | 2.31            |          |           |           |  |
| PO4                  | (0.75-1.50) mmol/L        | 1.00            |          |           |           |  |

eGFR >=90 mL/min/1.73m<sup>2</sup> usually indicates normal kidney function but does not exclude patients with early kidney damage (those with albuminuria, haematuria or abnormal kidney imaging).

Requested Tests : TFT\*, MBA, FE\*, FBE

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 Your Reference: 00054208 Lab Reference: 23-23699655-FE-0  
 Laboratory: Laverty Pathology  
 Addressee: DR JESSICA FARDON Referred by: DR JESSICA FARDON

Name of Test: IRON STUDIES (FE-0)  
 Requested: 17/07/2023 Collected: 18/07/2023 Reported: 19/07/2023  
 00:24

Clinical notes: Post partum.

Clinical Notes : Post partum.

| <u>IRON STUDIES</u>    |           |          |          |           |  |
|------------------------|-----------|----------|----------|-----------|--|
| Request Number         | 16860416  | 20307448 | 20298562 | 23699655  |  |
| Date Collected         | 11 Aug 22 | 6 Oct 22 | 6 Mar 23 | 18 Jul 23 |  |
| Time Collected         | 10:08     | 10:26    | 10:59    | 11:34     |  |
| Specimen Type: Serum   |           |          |          |           |  |
| Iron (10-30) umol/L    | 19        | 30       | 18       | 15        |  |
| T'ferrin(32-48) umol/L | 35        | 33       | 42       | 37        |  |
| T. Sat. (13-45) %      | 28        | 46       | 22       | 21        |  |
| Ferritin(30-165) ug/L  | 30        | 50       | 13       | 20        |  |

Although the transferrin saturation is normal, the mildly reduced ferritin suggests iron deficiency.

During the reproductive years, iron deficiency in women is usually due to multiparity or heavy menstrual losses. Investigation of the gastrointestinal tract for a source of blood loss may be indicated.

Requested Tests : TFT\*, MBA, FE, FBE

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Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899005  
Your Reference: 00054208 Lab Reference: 23-23699655-TFT-0  
Laboratory: Laverty Pathology  
Addressee: DR JESSICA FARDON Referred by: DR JESSICA FARDON

Name of Test: THYROID FUNCTION TEST (TFT-0)  
Requested: 17/07/2023 Collected: 18/07/2023 Reported: 19/07/2023  
00:44

Clinical notes: Post partum.

Clinical Notes : Post partum.

|                      | THYROID PROFILE |           |          |           |
|----------------------|-----------------|-----------|----------|-----------|
| Request Number       | 20307084        | 20307296  | 20298562 | 23699655  |
| Date Collected       | 3 Nov 22        | 24 Jan 23 | 6 Mar 23 | 18 Jul 23 |
| Time Collected       | 00:00           | 10:43     | 10:59    | 11:34     |
| Specimen Type: Serum |                 |           |          |           |
| TSH (0.5-4.0) mIU/L  | 3.7             | 1.4       | 1.4      | 0.09      |
| FT4 (11-18) pmol/L   | 14              | 16        | 15       |           |

Please note the above reference intervals have been developed from a non-pregnant healthy general population study.

Low TSH. Would suggest follow up TFT's as clinically indicated.

Requested Tests : TFT, MBA, FE, FBE

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Phone: 0413558946

Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899005

Your Reference: 00054208 Lab Reference: 23-23699655-TSI-0

Laboratory: Laverty Pathology

Addressee: DR JESSICA FARDON Referred by: DR JESSICA FARDON

Name of Test: THYROID STIMULATING IMM. (TSI-0)

Requested: 17/07/2023 Collected: 18/07/2023 Reported: 21/07/2023  
13:47

Clinical notes: Post partum.

Clinical Notes : Post partum.

THYROID STIMULATING IMMUNOGLOBULIN (TSI)

Thyroid Stimulating Immunoglobulin < 0.1 IU/L (< 0.55)

The cutoff >0.55 IU/L signify there is a high risk of active Graves disease  
For healthy individuals, level should be <0.1 IU/L.

Thyroid Stimulating Immunoglobulin is useful in the following settings:

- Aiding clinical evaluation in the confirmation or exclusion of Graves' disease
- Differentiating Graves' disease from disseminated autonomy of the thyroid gland
- Prognosis / decision-making when monitoring the course of Graves' disease
- In pregnancy to assess the risk of onset of hyperthyroidism in the foetus

Requested Tests : ADD\*, TSI, TFT\*, MBA, FE, FBE

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Name of Test: THYROID FUNCTION TEST (TFT-0)  
 Requested: 17/07/2023 Collected: 18/07/2023 Reported: 21/07/2023  
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Clinical notes: Post partum.

Clinical Notes : Post partum.

|                      | THYROID PROFILE |           |          |           |
|----------------------|-----------------|-----------|----------|-----------|
| Request Number       | 20307084        | 20307296  | 20298562 | 23699655  |
| Date Collected       | 3 Nov 22        | 24 Jan 23 | 6 Mar 23 | 18 Jul 23 |
| Time Collected       | 00:00           | 10:43     | 10:59    | 11:34     |
| Specimen Type: Serum |                 |           |          |           |
| TSH (0.5-4.0) mIU/L  | 3.7             | 1.4       | 1.4      | 0.09      |
| FT4 (10-20) pmol/L   | 14              | 16        | 15       | 17        |

Please note the above reference intervals have been developed from a non-pregnant healthy general population study.

Note low TSH. Possible causes include goitre or functioning nodule, drug effect (e.g. thyroxine, amiodarone, glucocorticoids), pituitary dysfunction and acute or chronic disease. Suggest follow-up TFTs as clinically appropriate.

Requested Tests : TSI, TFT, MBA, FE, FBE