

Specialist Pathologist (02) 9855 5150 Toll free 1800 222 365
General enquiries (all hours) (02) 9855 5222 Results (02) 9855 5100

Douglass Hanly Moir Pathology Pty Limited ABN 80 003 332 858,
a subsidiary of Sonic Healthcare Limited ABN 24 004 196 909 APA 906

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Dr A Allenda Dr S Day Dr T Harvey Dr A/Prof F Maclean Dr A/Prof N Pathmanathan Dr N Taylor
Dr B Armstrong Dr W Delpic Dr C Ho Dr K McKenzie Dr P Paul Dr V Thiruvengadam
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Dr M Galea Dr M Galido-Milagros Dr C Kurek Dr N Lala Dr R Levingston Dr C Lim
Dr G Gifford Dr C Goldschmidt Dr R Luang Dr H Ngai Dr J Ortiz

Ms Joanna Giakoumatos

7 OBERON ST
BLAKEHURST NSW 2221



Ref by: Dr A Gajjar

Ph: 0299948089

Patient

Joanna GIAKOUMATOS

Lab ID : 839659306 Your Ref : 839659306

7 Oberon St
Blakehurst 2221

Requested : 26/03/2024
Collected : 16/04/2024 08:58
Received : 16/04/2024 09:01
Printed : 22/04/2024 09:49

DOB : 05/09/1995 (28 Yrs)
Sex : Female
Ph : 0419688089

Homocysteine

Homocysteine 5.3 umol/L (5.0-12.0)

Streptococcal Serology

Anti-Streptolysin O (ASO) <20 IU/mL (<178)
Anti-DNase B <90 U/mL (<250)

Comment

Reference ranges for Anti-DNaseB are age dependent:

0 - 4 yrs <366 U/mL
5 - 14 yrs <500 U/mL
15 - 24 yrs <473 U/mL
25 - 34 yrs <390 U/mL
35 yrs or older <265 U/mL

Please note: Anti-DNaseB testing is performed at Sullivan Nicolaides Pathology.

Streptococcal serology is not recommended for investigation of acute sore throat. It may assist in the diagnosis of non-suppurative post-streptococcal sequelae eg acute rheumatic fever and post-streptococcal glomerulonephritis.

ASO titre tends to rise a week following infection, peaking at 3-5 weeks and declines after 8 weeks and responds to pharyngeal infection more vigorously than skin infection. Anti-DNaseB titre rises more slowly and peaks at 6-8 weeks and declines after 12 weeks but responds equally strongly to both pharyngeal and skin infections.

Haematology

Date	30/04/21	21/10/21	19/07/22	17/02/23	Current Result	Units	Reference
Time	10:17	08:34	09:30	08:20	16/04/24		
Lab ID	849631917	863778786	881893698	886004387	839659306		
Haemoglobin	129	133	139	123	138	g/L	(119-160)
RCC	4.4	4.6	4.7	4.3	4.6	x10 ¹² /L	(3.8-5.8)
Haematocrit	0.39	0.40	0.43	0.39	0.40		(0.35-0.48)
MCV	88	88	90	89	86	fL	(80-100)
MCH	29.1	28.9	29.4	28.4	29.7	pg	(27.0-32.0)
MCHC	330	329	326	319	344	g/L	(310-360)
RDW	14.6	13.7	13.8	14.6	13.6		(10.0-15.0)
WCC	6.8	7.6	5.5	5.8	6.1	x10 ⁹ /L	(4.0-11.0)
Neutrophils	4.04	4.41	3.01	3.12	3.49	x10 ⁹ /L	(2.0-7.5)
Lymphocytes	2.13	2.53	2.07	2.23	1.96	x10 ⁹ /L	(1.0-4.0)
Monocytes	0.43	0.45	0.30	0.29	0.44	x10 ⁹ /L	(0.0-1.0)
Eosinophils	0.15	0.20	0.11	0.18	0.19	x10 ⁹ /L	(0.0-0.5)
Basophils	0.02	0.02	0.02	0.02	0.02	x10 ⁹ /L	(0.0-0.3)
NRBC	<1.0	<1.0	<1.0	<1.0	<1.0	/100 WBC	(<1)
Platelets	234	242	277	238	264	x10 ⁹ /L	(150-450)

Comment on Lab ID 839659306

Full blood count is within reference limits

Surgery Use



Normal



No Action



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CRP (High Sens)

Date	19/07/22	17/02/23	Current Result	Units	Reference
Time	09:30	08:20	16/04/24		
Lab ID	881893698	886004387	839659306		
CRP	0.4	0.7	0.7	mg/L	(0.0-5.0)

Biochemistry

Date	23/06/17	30/04/21	19/07/22	17/02/23	Current Result	Units	Reference
Time	10:20	10:17	09:30	08:20	16/04/24		
Lab ID	287474161	849631917	881893698	886004387	839659306		
Status	Fasting	Fasting	Fasting	Fasting	Fasting		
Sodium		137	136	137	136	mmol/L	(135-145)
Potassium		4.1	4.4	4.4	4.0	mmol/L	(3.5-5.5)
Chloride		104	103	104	104	mmol/L	(95-110)
Bicarbonate		23	25	30	22	mmol/L	(20-32)
Urea		5.1	5.9	*7.5	4.7	mmol/L	(2.5-6.5)
Creatinine		55	60	55	55	umol/L	(45-85)
eGFR		>90	>90	>90	>90	mL/min/1.73m2	(>59)
Bili.Total		11	11	10	13	umol/L	(3-15)
ALP		37	41	45	34	U/L	(20-105)
GGT		15	16	18	17	U/L	(5-35)
LD		168	154	139	195	U/L	(120-250)
AST		15	17	21	19	U/L	(10-35)
ALT		17	20	*32	21	U/L	(5-30)
Total Protein		70	72	68	73	g/L	(68-85)
Albumin		42	45	41	44	g/L	(37-48)
Globulin		28	27	27	29	g/L	(23-39)
Cholesterol		3.9	4.6		4.1	mmol/L	(<5.5)
Triglycerides		0.7	0.8		0.7	mmol/L	(<2.0)

Comment on Lab ID 839659306

eGFR (mL/min/1.73m2) calculated by CKD-EPI formula - see www.kidney.org.au

Glucose

Date	23/06/17	30/04/21	19/07/22	17/02/23	Current Result	Units	Reference
Time	10:20	10:17	09:30	08:20	16/04/24		
Lab ID	287474161	849631917	881893698	886004387	839659306		
F Gluc Plasma			4.7	4.6	4.5	mmol/L	(3.6-6.0)
F Gluc Serum	5.3	5.2				mmol/L	(3.6-6.0)

Comment on Lab ID 839659306

Diabetes is unlikely if fasting glucose levels are less than 5.5 mmol/L but an OGTT could be indicated in the presence of risk factors such as metabolic syndrome, past gestational diabetes, polycystic ovary or family history of type 2 diabetes.

Iron Studies

Date	01/02/17	30/04/21	19/07/22	17/02/23	Current Result	Units	Reference
Time	07:45	10:17	09:30	08:20	16/04/24		
Lab ID	282593249	849631917	881893698	886004387	839659306		
Iron	16.2	8.1	17.2	11.7	17.8	umol/L	(5.0-30.0)
Transferrin	2.6	2.2	2.2	2.1	2.4	g/L	(2.0-3.6)
TIBC (Calc)	58	50	50	48	54	umol/L	(46-77)
Saturation	28	16	34	24	33	%	(10-45)
Ferritin	83	162	163	132	*203	ug/L	(15-200)

Comment on Lab ID 839659306

Mildly elevated ferritin levels may be due to metabolic syndrome, inflammation or alcohol.

Surgery Use



Normal



No Action



Contact Patient



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24297 10/23

Ms Joanna Giakoumatos

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Metals, Blood

Date	29/11/10	09/05/11	16/12/11	17/09/12	Current Result	Units	Reference
Time	08:20	08:25	09:10	08:35	16/04/24		
Lab ID	204812158	208421312	210659772	234239404	08:58		
Copper	15	18	16	15	839659306	umol/L	(12-22)

Thyroid Function

Date	23/06/17	02/11/18	19/07/22	17/02/23	Current Result	Units	Reference
Time	10:20	09:59	09:30	08:20	16/04/24		
Lab ID	287474161	280083455	881893698	886004387	08:58		
TSH	*0.21	2.94	2.44	2.54	839659306	mIU/L	(0.40-3.50)
Free T4	14.5	12.2	13.7	12.9	13.5	pmol/L	(9.0-19.0)
Free T3	5.2	3.4	3.6	3.2	3.8	pmol/L	(2.6-6.0)

FINAL REPORT

Cortisol

Date	01/02/17	19/07/22	Current Result	Units	Reference
Time	07:45	09:30	16/04/24		
Lab ID	282593249	881893698	839659306		
Cortisol am	436	364	306	nmol/L	(138-650)
Cor. AM Time	0845	0930	0858	Hrs	

B12/Folate/RCF

Date	14/11/09	19/07/22	17/02/23	Current Result	Units	Reference
Time	08:56	09:30	08:20	16/04/24		
Lab ID	49127993	881893698	886004387	08:58		
Vitamin B12		*1232	*1024	839659306	pmol/L	(135-650)
Vitamin B12	517				pmol/L	(145-637)
S.Fol (Abbott)			>45.3		nmol/L	(>7.0)

Comment on Lab ID 839659306

From 27 November 2023, active B12 (holotranscobalamin) testing will be performed on all patients with low or equivocal (at or below 400 pmol/L) total B12 results. Both tests are eligible for a Medicare rebate under these circumstances.

Surgery
Use



Normal



No Action



Contact
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24/07/2023

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Reproductive Hormones
(Abbott Method)

FSH	2.4	IU/L
LH	3.7	IU/L
Oestradiol	432	pmol/L
Progesterone	38.5	nmol/L
DHEAS	9.5	umol/L (2.4-13)

Comment

FSH	Basal	1.5 - 10
	Mid cycle peak	7.0 - 22
	Post-menopausal	25 - 130
LH	Basal	2.0 - 12
	Mid cycle peak	8.0 - 90
	Post-menopausal	5.0 - 62
Oestradiol	Follicular phase	< 320
	Preovulatory phase	450 - 2000
	Luteal phase	125 - 1300
	Post-menopausal	< 170
Progesterone	Follicular phase	0.3 - 4.0
	Luteal phase	5.5 - 90.0
	Midluteal	8.5 - 110.0

Surgery
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Lipids and HDL		Current Result	Units	Reference
Date	19/07/22	16/04/24		
Time	09:30	08:58		
Lab ID	881893698	839659306		
Status	Fasting	Fasting		
Cholesterol	4.6	4.1	mmol/L	(< 5.5)
Triglycerides	0.8	0.7	mmol/L	(< 2.0)
HDL Chol.	1.3	*1.2	mmol/L	(> 1.2)
LDL Chol.	2.9	2.6	mmol/L	(< 3.0)
Non-HDL Chol.		2.9	mmol/L	(< 4.0)

Comment on Lab ID 839659306

Please note that the above reference limits are decision limits.
A flag based on these limits is an indication to review the absolute cardiovascular risk for the patient. For assessment of absolute cardiovascular disease risk please see www.cvdcheck.org.au

The above decision limits are based on the European Atherosclerosis Society (EAS) and European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) Consensus Statement 2016 and the Australasian Association of Clinical Biochemistry and Laboratory Medicine (AACB) Lipid Reporting Guideline 2018.

Lipid treatment targets for patients at high risk of cardiovascular disease:

Total cholesterol	< 4.0 mmol/L
Triglyceride	< 2.0 mmol/L
HDL cholesterol	> 1.0 mmol/L
LDL cholesterol	< 2.5 mmol/L (< 1.8 mmol/L for very high risk)
Non-HDL cholesterol	< 3.3 mmol/L (< 2.5 mmol/L for very high risk)

High risk - Primary prevention Very high risk - Secondary prevention

Target values from the AACB Lipid Reporting Guideline 2018.

Please note that as there is a continuum of risk, benefits are obtained for any measured lipid components moving towards and beyond the various target levels.

Surgery Use



Normal



No Action



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25-OH Vitamin D

Date	23/11/13	10/06/15	21/10/21	19/07/22	Current Result	Units	Reference
Time	10:50	11:35	08:34	09:30	16/04/24		
Lab ID	285328330	283969965	863778786	881893698	08:58		
Vitamin D	82	66	121	*141	839659306	nmol/L	(50-140)

Comment on Lab ID 839659306

According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11):686-687, 2012, Vitamin D status is defined as:

Mild Deficiency	30 - 49 nmol/L
Moderate Deficiency	12.5 - 29 nmol/L
Severe Deficiency	< 12.5 nmol/L

Vitamin D adequacy can be defined as a level >49 nmol/L at the end of winter - the level may need to be 10 - 20 nmol/L higher at the end of summer, to allow for seasonal decrease.

From 1st November 2014, Medicare rebates for vitamin D testing will apply to patients at risk of Vitamin D deficiency such as chronic lack of sun exposure.

Insulin

Date	03/03/15	01/02/17	23/06/17	19/07/22	Current Result	Units	Reference
Time	08:35	07:45	10:20	09:30	16/04/24		
Lab ID	211638510	282593249	287474161	881893698	08:58		
F Insulin	9	6	10	7	839659306	mU/L	(0-20)

Comment on Lab ID 839659306

In a non-pregnant patient, serum insulin(s) >80 mU/L following a 75g oral glucose load and/or fasting insulin(s) >14 mU/L (in the absence of insulinoma) are consistent with insulin resistance. Post-load insulin(s) of 60 - 80 mU/L and/or fasting insulin(s) of 10 - 14 mU/L are suggestive of insulin resistance and follow-up may be indicated in the presence of risk factors such as obesity or a positive family history.

Androgens

Testosterone 1.2 nmol/L (0.2-1.8)

Tg &/or Thy Ab

Date	23/06/17	19/07/22	17/02/23	Current Result	Units	Reference
Time	10:20	09:30	08:20	16/04/24		
Lab ID	287474161	881893698	886004387	08:58		
Peroxidase Ab	<10			839659306	IU/mL	(0-35)
Tg Ab	<20				IU/mL	(0-40)
Anti-Tg (Abbott)	*12.5	*61.4	*12.0		IU/mL	(<4.1)
Anti-TPO (Abbott)	*124.4	*194.2	*293.0		IU/mL	(<5.6)

Comment on Lab ID 839659306

High levels of thyroglobulin and thyroid peroxidase antibodies occur in Hashimoto's disease. Lower levels can occur in clinically normal persons and with other thyroid disorders.

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Blood Metals

Date	16/12/11	17/09/12	19/07/22	17/02/23	Current Result	Units	Reference
Time	09:10	08:35	09:30	08:20	16/04/24		
Lab ID	210659772	234239404	881893698	886004387	08:58		
P-Zinc	11.5	13.5	*26.7	*23.7	839659306		
					*20.7	umol/L	(9.0-19.0)

Comment on Lab ID 839659306

Reported by Sullivan and Nicolaides Pathology, a member of the
Sonic Healthcare Group.

**Surgery
Use**



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