

HOLLIDAY, PANDORA
 2137 MITCHELL HWY, VITTORIA. 2799
 Phone: 0413558946
 Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899006
 Your Reference: 00060024 Lab Reference: 24-18898716-FBE-0
 Laboratory: Laverty Pathology
 Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
 Copy to: PATIENT

Name of Test: HAEMATOLOGY (FBE-0)
 Requested: 17/05/2024 Collected: 04/06/2024 Reported: 04/06/2024
 23:39

HAEMATOLOGY				
Request Number	20298562	23699655	23699067	18898716
Date Collected	6 Mar 23	18 Jul 23	17 Oct 23	4 Jun 24
Time Collected	10:59	11:34	12:15	08:50
Specimen Type: EDTA				
Hb (115-165) g/L	123	131	135	137
Hct (0.34-0.47)	0.35	0.40	0.40	0.42
RCC (3.9-5.8) $\times 10^{12}$ /L	4.2	4.6	4.9	4.9
MCV (79-99) fL	84	86	83	85
MCH (27-34) pg	30	28	28	28
MCHC (320-360) g/L	353	329	334	327
RDW (10.0-17.0) %	13.1	12.5	12.8	12.4
WBC (4.0-11.0) $\times 10^9$ /L	6.5	6.3	6.6	6.7
Neut (2.0-7.5) $\times 10^9$ /L	4.6	3.5	3.6	4.4
Lymph (1.0-4.0) $\times 10^9$ /L	1.3	1.9	2.3	1.5
Mono (0.2-1.0) $\times 10^9$ /L	0.4	0.6	0.5	0.5
Eos (< 0.7) $\times 10^9$ /L	0.1	0.2	0.1	0.2
Baso (< 0.2) $\times 10^9$ /L	0.0	0.1	0.1	0.1
Plat (150-400) $\times 10^9$ /L	202	176	187	207

HAEMATOLOGY: FBC parameters are within reference range.

Requested Tests : VBF*, UMM*, TFT*, TAA*, GLU*, CRP*, MBA*, LIP*, FE*, FBE, DVI*, A1C*

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 Laboratory: Laverty Pathology
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Name of Test: B12, FOLATE, R.C.FOLATE (VBF-0)
 Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
 00:03

VITAMIN B12 AND FOLATE STUDIES			
Request Number	20298562	18898716	
Date Collected	6 Mar 23	4 Jun 24	
Time Collected	10:59	08:50	
B12 (156-740)pmol/L	243	624	
Active B12 (> 40) pmol/L	96		
Serum Folate (> 9.0)nmol/L		53.0	

Folate Interpretation:

	DEFICIENCY	BORDERLINE	SUFFICIENCY
Serum Folate:	<4.5 nmol/L	4.5 - 9.0 nmol/L	>9.0 nmol/L

Serum Folate Assay:

In the absence of recent oral intake, a serum folate >9.0 nmol/L effectively rules out folate deficiency.

Red cell folates (RCF) are no longer processed routinely. If you have requested a RCF, and require a result for appropriate clinical reasons, this will need to be discussed and agreed with a Consultant Haematologist on +61290027085 or Dr. Lucinda Wallman, Consultant Pathologist in Immunology and Medical Director on telephone number +61 290057179

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA*, LIP, FE, FBE, DVI*, A1C*

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 Your Reference: 00060024 Lab Reference: 24-18898716-LIP-0
 Laboratory: Laverty Pathology
 Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
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Name of Test: LIPID STUDIES (LIP-0)
 Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
 00:03

LIPID STUDIES

Request Number	16860416	18898716
Date Collected	11 Aug 22	4 Jun 24
Time Collected	10:08	08:50
Specimen Type:	Serum	

Reference intervals are included for reference only, and interpretation / treatment goals should be guided by patient-specific cardiovascular risk assessment (see Australian Cardiovascular Risk Charts. Alternatively, the web-site www.cvdcheck.org.au can be accessed in order to complete a risk assessment for individual patients.)

Haemolysis	Nil	Nil
Icterus	Nil	Nil
Lipaemia	Nil	Nil

Fasting status	Random	Fasting
Chol (3.6-5.2) mmol/L	5.6	5.2
Trig (0.5-1.7) mmol/L	1.2	0.5
HDL (1.0-2.0) mmol/L		2.0
LDL (1.5-3.4) mmol/L		3.0
Non-HDL (< 3.4) mmol/L		3.2
Chol/HDL(< 4.5)		2.6

NVDPa TARGET LIPID RANGES (MMOL/L) FOR PATIENTS AT HIGH / MODERATE RISK OF CARDIOVASCULAR DISEASE:

TOTAL CHOLESTEROL	<4.0
TRIGS (FASTING)	<2.0
HDL-C	>= 1.0
LDL-C	<2.0
NON HDL-C	<2.5

LDL-C exceeds target for higher risk patients and may be excessive in some individuals.

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA*, LIP, FE, FBE, DVI*, A1C*

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 Your Reference: 00060024 Lab Reference: 24-18898716-FE-0
 Laboratory: Laverty Pathology
 Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
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Name of Test: IRON STUDIES (FE-0)
 Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
 00:03

IRON STUDIES

Request Number	20298562	23699655	23699067	18898716
Date Collected	6 Mar 23	18 Jul 23	17 Oct 23	4 Jun 24
Time Collected	10:59	11:34	12:15	08:50
Specimen Type: Serum				
Iron (10-30) umol/L	18	15	18	17
T'ferrin(32-48) umol/L	42	37	37	37
T. Sat. (13-45) %	22	21	25	23
Ferritin(30-165) ug/L	13	20	38	61

In the context of inflammation (as indicated by the patient's raised CRP) this ferritin result cannot exclude iron deficiency. Suggest measurement of iron studies when the inflammation has subsided.

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA*, LIP, FE, FBE, DVI*, A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-GLU-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
Copy to:
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Name of Test: GLUCOSE (GLU-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
00:03

SERUM/PLASMA GLUCOSE

Request Number	16860416	20298738	18898716
Date Collected	11 Aug 22	23 Mar 23	4 Jun 24
Time Collected	10:08	10:12	08:50
Fasting status	Random	Fasting	Fasting
Serum (3.4-5.4) mmol/L	5.1	4.1	4.5

Normal glucose concentration.

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA*, LIP, FE, FBE, DVI*,
A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-CRP-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
Copy to:
PATIENT

Name of Test: C-REACTIVE PROTEIN (CRP-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
00:05

	C-REACTIVE PROTEIN	
Request Number	16860416	18898716
Date Collected	11 Aug 22	4 Jun 24
Time Collected	10:08	08:50
Specimen Type: Serum		
CRP (< 6.0) mg/L	< 4.0	6.3

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA*, LIP, FE, FBE, DVI*,
A1C*

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 Birthdate: 28/12/1985 Sex: F Medicare Number: 2598899006
 Your Reference: 00060024 Lab Reference: 24-18898716-MBA-0
 Laboratory: Laverty Pathology
 Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
 Copy to: PATIENT

Name of Test: SERUM CHEMISTRY (MBA-0)
 Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
 00:08

		SERUM CHEMISTRY			
Request Number		20307448	20307296	23699655	18898716
Date Collected		6 Oct 22	24 Jan 23	18 Jul 23	4 Jun 24
Time Collected		10:26	10:43	11:34	08:50
Specimen Type:	Serum				
Haemolysis		Nil	Nil	Nil	Nil
Icterus		Nil	Nil	Nil	Nil
Lipaemia		Nil	Nil	Nil	Nil
Na	(135-145) mmol/L	139	137	140	138
K	(3.6-5.4) mmol/L	3.7	3.8	4.2	3.9
Cl	(95-110) mmol/L	102	104	103	99
HCO3	(22-32) mmol/L	23	23	21	24
An Gap	(10-20) mmol/L	18	14	20	19
Urea	(2.5-8.0) mmol/L	3.5	3.2	4.9	5.1
Creat	(45-90) umol/L	60	45	65	60
eGFR	mL/min/1.73sqM	> 90	> 90	> 90	> 90
Bili	(< 15) umol/L	14			12
AST	(< 30) U/L	27			23
ALT	(< 30) U/L	27			25
GGT	(< 30) U/L	20			25
Alk Phos	(20-105) U/L	67			106
Protein	(60-82) g/L	75			78
Albumin	(38-50) g/L	44			48
Glob	(20-39) g/L	31			30

eGFR ≥ 90 mL/min/1.73m² usually indicates normal kidney function but does not exclude patients with early kidney damage (those with albuminuria, haematuria or abnormal kidney imaging).

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA, LIP, FE, FBE, DVI*, A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-DVI-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
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Name of Test: VITAMIN D (DVI-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
00:27

VITAMIN D

Haemolysis	Nil
Serum 25(OH) Vitamin D	83 nmol/L

Suggested decision limits for Vitamin D status:

Sufficiency	51 -200	nmol/L
Mild deficiency	25 - 50	nmol/L
Marked deficiency	< 25	nmol/L
Toxicity	>250	nmol/L

References: Vitamin D and health in adults in Australia and New Zealand:
Position Statement. MJA 2012 June 18; 196(11),686-687.

Requested Tests : VBF, UMM*, TFT*, TAA*, GLU, CRP, MBA, LIP, FE, FBE, DVI, A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-UMM-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
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Name of Test: URINE MICRO/CULTURE (UMM-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
00:35

	<u>URINE EXAMINATION</u>			
Specimen	Midstream			
CHEMISTRY		MICROSCOPY		
pH	7.0	Leucocytes	9	x10 ⁶ /L (< 10)
Protein	nil	Erythrocytes	< 4	x10 ⁶ /L (< 10)
Glucose	nil	Epithelial cells	18	x10 ⁶ /L (< 10)
Blood	nil			

A urine with these results is not usually infected. Although culture has been performed, a further report will only be issued if the culture is positive.

Microscopy consistent with genital contamination.

Requested Tests : VBF, UMM, TFT*, TAA*, GLU, CRP, MBA, LIP, FE, FBE, DVI, A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-TFT-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
Copy to:
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Name of Test: THYROID FUNCTION TEST (TFT-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
01:00

	THYROID PROFILE			
Request Number	20298562	23699655	23699067	18898716
Date Collected	6 Mar 23	18 Jul 23	17 Oct 23	4 Jun 24
Time Collected	10:59	11:34	12:15	08:50
Specimen Type: Serum				
TSH (0.5-4.0) mIU/L	1.4	0.09	2.9	4.1
FT4 (10-20) pmol/L	15	17	15	12

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

Requested Tests : VBF, UMM, TFT, TAA*, GLU, CRP, MBA, LIP, FE, FBE, DVI, A1C*

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Your Reference: 00060024 Lab Reference: 24-18898716-TAA-0
Laboratory: Laverty Pathology
Addressee: DR TAPASI KARMAKAR Referred by: DR TAPASI KARMAKAR
Copy to: PATIENT

Name of Test: THYROID AUTOANTIBODIES (TAA-0)
Requested: 17/05/2024 Collected: 04/06/2024 Reported: 05/06/2024
01:04

THYROID AUTOANTIBODIES

Specimen Type: Serum

Anti-Thyroglobulin Abs (aTGII)	2.0	IU/mL	(< 4.5)
Anti-Thyroidal Peroxidase Abs	70	IU/mL	(< 60)

Over 90% of patients with autoimmune thyroiditis show moderate to high levels of Anti-Thyroidal Peroxidase Abs (anti-TPO) with Anti-Thyroglobulin Abs (anti-Tg) also present in about 90% of such patients. Up to 75% of patients with Graves' hyperthyroidism show increased anti-TPO with anti-Tg present in 50-60%. Low levels of both anti-TPO and anti-Tg may be found in up to 10% of "normal" asymptomatic adults. In most cases of autoimmune thyroid disease increased anti-TPO is the predominant finding although a small proportion of patients show a predominant increase in anti-Tg.

Requested Tests : VBF, UMM, TFT, TAA, GLU, CRP, MBA, LIP, FE, FBE, DVI, A1C*

