

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

Dr E Ahn Dr A Attende Dr O Crainic Dr S Danieleto Dr S Day Adj Prof W Delprado Dr B Armstrong Dr T Baillie Dr K Baumgart Dr M Barbic Dr J Blackwell Adj Prof F Bonnar Dr A Broadfoot Dr I Burchett Dr G Caldwell Dr A Cheah Dr C Chor Prof S Clark A/Prof H Coleman Dr S Corbett-Burns Dr P Guzman Dr G Hall Dr F Hanly Dr T Harvey Dr C Ho Dr L Ho A/Prof V Howard Dr S Hyne Dr J Jiang Dr M Jones Dr A Khana Dr L Killen Dr C Kurek Dr N Lalla Dr R Laing A/Prof K Lee Dr R Livingston Dr C Lim Dr L Lin Dr T Lynch A/Prof F Maclean Dr K McKenzie Dr P McCulllan Dr K Merrick Dr D Moir Dr O Mokgwathi Dr S Moran Dr E Morris Dr A Mujiono A/Prof E Myint Dr H Narayansappa Dr K Njead Dr J Newcombe Dr I Ngu Dr H Ogle Dr J Ortiz Dr S Patfreeman A/Prof N Pathmanathan Dr M Paul A/Prof J Quinn Dr D Reddy Dr R Reynolds Dr G Rhodes Dr J Roberts Dr M Rodriguez Dr M Roman Dr S Shchelckov Dr S Sinclair Dr S Sundercombe A/Prof K Tan Dr I Tang Dr P Tanoff Dr N Taylor A/Prof J Turchini A/Prof J Turner Dr A Varallo-Nunez A/Prof C Vargas Dr M Wehrhahn Dr C Wong Dr K Wu Dr K Young Dr L Zhuang

Dr Charanjit Anand

NTH ST IVES MED PRAC
WARRIMOO AVENUE
ST IVES NSW 2075

A3419
IVE/---/IVE/AVL/AVL

Patient

Jasdeep TAMANA

Lab ID : 839376878 Your Ref : 15594

4 Whitmont Cres Requested : 08/05/2024
St Ives Chase 2075 Collected : 06/07/2024 08:50
DOB : 22/07/1973 (50 Yrs) Received : 06/07/2024 08:52
Sex : Female Printed : 08/07/2024 08:06
Ph : 0405124374

Haematology

Date	02/09/11	21/12/16	29/04/17	24/06/21	Current Result	Units	Reference
Time	09:45	13:56	09:20	10:45	06/07/24		
Lab ID	209395426	248476216	286713631	862814911	08:50		
Lab ID					839376878		
Haemoglobin	145	137	117	*114	156	g/L	(119-160)
RCC	5.1	4.8	3.8	4.8	5.4	x10 ¹² /L	(3.8-5.8)
Haematocrit	0.44	0.42	0.34	0.36	0.47		(0.35-0.48)
MCV	85	86	89	*76	87	fL	(80-100)
MCH	28.2	28.5	30.5	*23.8	28.9		(27.0-32.0)
MCHC	330	330	341	313	333	pg	(310-360)
RDW	13.3	14.3	13.3	*16.6	13.2	g/L	(10.0-15.0)
WCC	5.9	8.7	8.9	5.4	6.5	x10 ⁹ /L	(4.0-11.0)
Neutrophils	3.73	6.07	6.43	2.95	3.90	x10 ⁹ /L	(2.0-7.5)
Lymphocytes	1.51	1.84	1.50	1.76	1.95	x10 ⁹ /L	(1.0-4.0)
Monocytes	0.42	0.53	0.62	0.44	0.47	x10 ⁹ /L	(0.0-1.0)
Eosinophils	0.20	0.22	0.26	0.16	0.15	x10 ⁹ /L	(0.0-0.5)
Basophils	0.03	0.06	0.05	0.07	0.06	x10 ⁹ /L	(0.0-0.3)
NRBC		<1.0	<1.0	<1.0	<1.0	/100 WBC	(<1)
Platelets	260	256	224	360	283	x10 ⁹ /L	(150-450)
ESR					1	mm/h	(1-30)

Comment on Lab ID 839376878

Full blood count is within reference limits

CRP (High Sens)

Date	10/06/06	17/01/09	24/06/21	Current Result	Units	Reference
Time		09:05	10:45	06/07/24		
Lab ID	69706594	99588643	862814911	08:50		
Lab ID				839376878		
CRP	2.1	1.0	2.0	*14.1	mg/L	(0.0-5.0)

Surgery Use

☐ Normal

☐ No Action

☐ Contact Patient

☐ See Patient

☐ See File

☐ Continue Treatment

Signed

Date

24/29/05/24



DOUGLASS HANLY MOIR PATHOLOGY

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Biochemistry

Date	02/09/11	21/12/16	29/04/17	24/06/21	Current Result	Units	Reference
Time	09:45	13:56	09:19	10:45	06/07/24		
Lab ID	209395426	248476216	286713675	862814911	08:50		
Status	Fasting	Random	Fasting	Fasting	839376878		
Sodium	137			135	Fasting		
Potassium	4.0			4.1	141	mmol/L	(135-145)
Chloride	104			105	4.7	mmol/L	(3.5-5.5)
Bicarbonate	26			20	104	mmol/L	(95-110)
Urea	3.6			3.1	26	mmol/L	(20-32)
Creatinine	70			80	3.0	mmol/L	(3.0-8.0)
eGFR	80			78	70	umol/L	(45-85)
Urate	0.28				89	mL/min/1.73m2	(> 59)
Calcium	2.34				0.31	mmol/L	(0.15-0.40)
Corr Calcium	2.32				2.54	mmol/L	(2.15-2.55)
Phosphate	1.20				2.42	mmol/L	(2.15-2.55)
Bili. Total	9			8	1.26	mmol/L	(0.8-1.5)
ALP	*108			80	11	umol/L	(3-15)
GGT	12			11	*106	U/L	(20-105)
LD	155			144	20	U/L	(5-35)
AST	15			21	213	U/L	(120-250)
ALT	15			20	33	U/L	(10-35)
Total Protein	75			70	*58	U/L	(5-30)
Albumin	44			41	78	g/L	(64-83)
Globulin	31			29	*49	g/L	(36-47)
Cholesterol	5.0			*6.0	29	g/L	(23-39)
Triglycerides	1.7			*1.8	*6.4	mmol/L	(< 5.5)
					*2.3	mmol/L	(< 2.0)

Comment on Lab ID 839376878

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

Glucose

Date	02/09/11	21/12/16	29/04/17	24/06/21	Current Result	Units	Reference
Time	09:45	13:56	09:19	10:45	06/07/24		
Lab ID	209395426	248476216	286713675	862814911	08:50		
F Gluc Plasma				5.8	*6.1	mmol/L	(3.6-6.0)
R Gluc Plasma		4.7				mmol/L	(3.6-7.8)
F Gluc Serum	5.0		4.5			mmol/L	(3.6-6.0)

Iron Studies

Date	17/01/09	02/09/11	13/01/17	24/06/21	Current Result	Units	Reference
Time	09:05	09:45	11:10	10:45	06/07/24		
Lab ID	99588643	209395426	263743727	862814911	08:50		
Iron	14.1		21.6	*3.3	839376878		
Transferrin	3.1		3.1	*3.9		umol/L	(5.0-30.0)
TIBC (Calc)	68		68	*84		g/L	(2.0-3.6)
Saturation	21		32	*4		umol/L	(46-77)
Ferritin	*14	*13	22	*5	80	%	(10-45)
						ug/L	(15-200)

Thyroid Function

Date	14/01/09	17/01/09	02/09/11	24/06/21	Current Result	Units	Reference
Time	09:30	09:05	09:45	10:45	06/07/24		
Lab ID	99437176	99588643	209395426	862814911	08:50		
TSH	*0.28	*0.30	0.55	*0.34	0.87	mIU/L	(0.40-4.00)
Free T4		12.9				pmol/L	(9.0-19.0)
Free T3		3.6				pmol/L	(2.6-6.0)

Surgery
Use

☐ Normal

☐ No Action

☐ Contact
Patient

☐ See
Patient

☐ See File

☐ Continue
Treatment

Signed

Date

24/29/05/24

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Glu(p), Phos(s), UA(s), Lipids HDL(s), Ca(s), Ferr(s), CRP(s)
Vit D(s), TSH(s), FBC(e), ESR(e), Mycoplasma Ab(s). Pending: ATYP RESP PANEL PCR, RV COVID PCR + more
Clinical Notes: follow up

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Ph : 0405124374

Lipids and HDL		Current Result	Units	Reference
Date	24/06/21	06/07/24		
Time	10:45	08:50		
Lab ID	862814911	839376878		
Status	Fasting	Fasting		
Cholesterol	*6.0	*6.4	mmol/L	(< 5.5)
Triglycerides	*1.8	*2.3	mmol/L	(< 2.0)
HDL Chol.	1.4	*1.2	mmol/L	(> 1.2)
LDL Chol.	*3.8	*4.1	mmol/L	(< 3.0)
Non-HDL Chol.		*5.2	mmol/L	(< 4.0)

Comment on Lab ID 839376878

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



Contact
Patient



See
Patient



See File



Continue
Treatment

Signed

Date

24267 05/24



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25-OH Vitamin D

Date	02/09/11	24/06/21	Current Result	06/07/24	Units	Reference
Time	09:45	10:45	08:50			
Lab ID	209395426	862814911	839376878			
Vitamin D	*40	*17	*33		nmol/L	(50-140)

Comment on Lab ID 839376878

Consistent with mild Vitamin D deficiency.
Due to the prolonged half-life of 25-OH Vitamin D, reassessment of Vitamin D status should not be undertaken until at least 3 to 4 months after implementing supplementation or changing the dose of replacement therapy. 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.

Mycoplasma pneumoniae Serology

M.pneumoniae IgG Not Detected
M.pneumoniae IgM Not Detected

Comment

No evidence of past or current infection with Mycoplasma pneumoniae. If this sample was taken during the acute phase of infection, repeat testing in 10-14 days is recommended to exclude infection.

Mycoplasma pneumoniae PCR on throat swab or sputum is the primary test of choice for the diagnosis of early infection (first 2-4 weeks of illness).

Surgery Use



Normal



No Action



Contact Patient



See Patient



See File



Continue Treatment

Signed

Date

24/29/05/24



Accredited for compliance with NPAAC Standards and ISO 15189.

NATA Accreditation No. 2178

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Glu(p), Phos(s), UA(s), Lipids HDL(s), Ca(s), Ferr(s), CRP(s)
Vit D(s), TSH(s), FBC(e), ESR(e), Mycoplasma Ab(s). Pending: ATYP RESP PANEL PCR, RV COVID PCR + more
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Dr G Hall
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Dr T Harvey
Dr C Ho
Dr L Ho
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Patient

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Blood Bank Serology

Blood Group

B Rh(D) Positive

Surgery
Use

☐

Normal

☐

No Action

☐

Contact
Patient

☐

See
Patient

☐

See File

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Continue
Treatment

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Date

24297 05/24

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Glu(p), Phos(s), UA(s), Lipids HDL(s), Ca(s), Ferr(s), CRP(s)
Vit D(s), TSH(s), FBC(e), ESR(e), BIgrp(e), Mycoplasma Ab(s). Pending: Chlamydia IgG(s) + more
Clinical Notes: follow up



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Chlamydia Serology

Chlamydia species IgG **Not Detected**

Comment

Antibody to Chlamydia genus not detected.

A second sample is required to demonstrate a rise in antibody level to confirm the diagnosis of a recent infection. Repeat testing in 10-14 days post onset of illness is recommended if clinically indicated.

Chlamydia pneumoniae PCR on throat swab or sputum may also provide further clarification of the diagnosis if collected in the first 4 weeks of illness.

Notification of Cancelled Test/s:

Please be advised patient has decided not to proceed with the following test(s):

RESPIRATORY VIRAL AND ATYPICAL PNEUMONIA PCR

If you have any enquiries or require any further information please contact the Troubleshooting Department at the Macquarie Park Laboratory Ph:(02) 98 555 586.

RECEIVED
- 9 JUL 2024
FY:

Surgery Use

☐

Normal

☐

No Action

☐

Contact
Patient

☐

See
Patient

☐

See File

☐

Continue
Treatment

Signed

Date

24297 05/24



Accredited for compliance
with NPAAC Standards
and ISO 15189.

NATA Accreditation No. 2178

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Glu(p), Phos(s), UA(s), Lipids HDL(s), Ca(s), Ferr(s), CRP(s)
Vit D(s), TSH(s), FBC(e), ESR(e), BlGrp(e), Chlamydia IgG(s), Mycoplasma Ab(s), MESSAGE REP. Pending: + more
Clinical Notes: follow up