



**DOUGLASS
HANLY MOIR
PATHOLOGY**

Quality is in our DNA

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The contents are confidential and contain legally privileged information.
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Douglass Hanly Moir Pathology immediately on 1800 222 365.
NATA Accreditation No. 2178

Dr Srinatha Siripurapu

INSTANT CONSULT
143 Sylvan Road
TCOWONG 4066

S27006
PST/---/---/---/---

Candice TRUDE

Lab ID : **852016453**

Your Ref :

54 Ilford Rd
Frenchs Forest 2086

Requested : 03/08/2024
Collected : 05/08/2024 09:59
Received : 05/08/2024 10:02
Printed : 05/08/2024 21:16

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Insulin

(Abbott Architect Method)

Insulin, Fasting 2 mU/L (0-20)

Comment

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.

Tests Completed: LFT(s),Lipids(s),C(s),UCreat(s),E(s),Mg(s),:TFT(s),Insulin(s),FBC(e). **Pending:**
LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),Iron(s),Vit D(s),Zn(s),Vit B6(e) + more
Clinical Notes: HEALTH CHECK, TIREDNESS



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DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Thyroid Function

Date	15/05/20	22/09/20	20/01/23	19/06/23	Current Result 05/08/24	Units	Reference
Time	13:37	08:43	08:19	09:56	09:59		
Lab ID	843690147	846616761	885441208	835077076	852016453		
TSH	1.23	1.82	2.09	1.21	1.31	mIU/L	(0.40-3.50)
Free T4					13.0	pmol/L	(9.0-19.0)
Free T3					3.9	pmol/L	(2.6-6.0)

Comment on Lab ID 852016453
Euthyroid values.

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Mg(s), :TFT(s), Insulin(s), FBC(e). **Pending:**
LH(s), FSH(s), Oest(s), Prog(s), Commenting, B12(s), Iron(s), Vit D(s), Zn(s), Vit B6(e) + more
Clinical Notes: HEALTH CHECK, TIREDNESS



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54 Ilford Rd
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Requested : 03/08/2024
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Received : 05/08/2024 10:02
Printed : 05/08/2024 22:36

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Androgens

Testosterone		0.6	nmol/L	(0.2-1.8)
SHBG	*	27	nmol/L	(30-110)
Free Androgen Index		2.2	%	(0.3-4.0)

Tests Completed: LFT(s), Lipids(s), C(s), UCreat(s), E(s), Mg(s), :TFT(s), Testosterone(s), Insulin(s)
.SHBG/FAI(s), FBC(e). **Pending:** LH(s), FSH(s), Oest(s), Prog(s), Commenting, B12(s) + more
Clinical Notes: HEALTH CHECK, TIREDNESS



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Received : 05/08/2024 10:02
Printed : 05/08/2024 23:28

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

B12/Folate/RCF

Date	23/02/18	16/09/20	20/01/23	19/06/23	Current Result 05/08/24	Units	Reference
Time	08:48	08:44	08:19	09:56	09:59		
Lab ID	268110565	845663115	885441208	835077076	852016453		
Vitamin B12	214	155	173		169	pmol/L	(135-650)
Active B12	54	*33	38	39	*29	pmol/L	(>35)
S.Fol (Abbott)	32.5		38.0	37.8		nmol/L	(>7.0)

Comment on Lab ID 852016453

Vitamin B12 performed by Abbott Architect method.

Borderline B12 level (135 - 170 pmol/L). Recommend review after correction of any dietary deficiency. Persistently borderline levels may require further assessment. This may include intrinsic factor antibody (IF Ab) +/- gastric parietal cell antibody (GPC Ab).
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.

Tests Completed: B12(s), LFT(s), Lipids(s), C(s), UCreat(s), E(s), Mg(s), TFT(s), Testosterone(s), Insulin(s)
Active B12(s), SHBG/FAI(s), FBC(e). Pending: LH(s), FSH(s), Oest(s), Prog(s) + more
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Printed : 05/08/2024 23:39

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Gender : Female
Ph : 0402901036

Reproductive Hormones
(Abbott Method)

FSH	6.7	IU/L
LH	1.7	IU/L
Oestradiol	139	pmol/L
Progesterone	0.8	nmol/L

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

Tests Completed: LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),LFT(s),Lipids(s),C(s),UCreat(s),E(s)
Mg(s),Vit D(s),TFT(s),Testosterone(s),Insulin(s), Active B12(s),SHBG/FAI(s),FBC(e). **Pending:** + more
Clinical Notes: HEALTH CHECK, TIREDNESS



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54 Ilford Rd Requested : 03/08/2024
Frenchs Forest 2086 Collected : 05/08/2024 09:59
DOB : 11/05/1985 (39 Yrs) Received : 05/08/2024 10:02
Gender : Female Printed : 06/08/2024 17:39
Ph : 0402901036

Heavy Metals

Serum Zinc 12 umol/L (10-18)



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Your Ref :

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Frenchs Forest 2086

Requested : 03/08/2024
Collected : 05/08/2024 09:59
Received : 05/08/2024 10:02
Printed : 09/08/2024 15:04

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

25-OH Vitamin D

Date	13/12/16	23/02/18	27/08/19	20/01/23	Current Result	Units	Reference
Time	08:05	08:48	07:37	08:19	05/08/24		
Lab ID	262958055	268110565	298641103	885441208	09:59		
Vitamin D	72	112	78	*144	852016453		
					78	nmol/L	(50-140)

Comment on Lab ID 852016453

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.

Tests Completed: LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),LFT(s),Lipids(s),C(s),UCreat(s),E(s)
Iron(s),Mg(s),Vit D(s),Zn(s),TFT(s),Testosterone(s),Insulin(s), Active B12(s) + more.
Clinical Notes: HEALTH CHECK, TIREDNESS



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Printed : 06/08/2024 06:49

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Iron Studies

Date	16/09/20	22/10/20	20/01/23	19/06/23	Current Result 05/08/24	Units	Reference
Time	08:44	08:32	08:19	09:56	09:59		
Lab ID	845663115	845663462	885441208	835077076	852016453		
Iron			18.9	*49.9	23.2	umol/L	(5.0-30.0)
Transferrin			2.3	2.1	2.2	g/L	(2.0-3.6)
TIBC (Calc)			52	48	50	umol/L	(46-77)
Saturation			36	* > 99	*46	%	(10-45)
Ferritin	20	*11	18	22	32	ug/L	(15-200)

Comment on Lab ID 852016453

? History of iron therapy. Recommend follow up iron studies.
Persistent elevation of transferrin saturation and/or ferritin may be
associated with haemochromatosis. If indicated, suggest genetic testing for
haemochromatosis (5 mL EDTA specimen).

FINAL REPORT

Tests Completed: LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),LFT(s),Lipids(s),C(s),UCreat(s),E(s)
Iron(s),Mg(s),Vit D(s),TFT(s),Testosterone(s),Insulin(s), Active B12(s),SHBG/FAI(s) + more.
Clinical Notes: HEALTH CHECK, TIREDNESS



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Candice TRUDE

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54 Ilford Rd
Frenchs Forest 2086

Requested : 03/08/2024
Collected : 05/08/2024 09:59
Received : 05/08/2024 10:02
Printed : 14/08/2024 00:58

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Vitamin B6 (P5P) *200 nmol/L (20-190)

Comment

Elevated vitamin B6 is most likely due to excess consumption. B6 is present in many over the counter preparations (including magnesium supplements) and in energy drinks. B6 > 250 nmol/L is associated with peripheral neuropathy. For patients not consuming excess B6, elevated levels may indicate Hypophosphatasaemia. This condition is rare and patients will have low alkaline phosphatase and high urine phosphoethanolamine.

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

Please note Vit B6(e) collection date: 08/08/2024 09:21

Tests Completed: LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),LFT(s),Lipids(s),C(s),UCreat(s),E(s)
Iron(s),Mg(s),Vit D(s),Zn(s),TFT(s),Vit B6(e),Testosterone(s),Insulin(s) + more. **FINAL REPORT**
Clinical Notes: HEALTH CHECK, TIREDNESS



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Received : 05/08/2024 10:02
Printed : 05/08/2024 18:26

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Haematology

Date	16/09/20	22/10/20	20/01/23	19/06/23	Current Result 05/08/24	Units	Reference
Time	08:44	08:32	08:19	09:56	09:59		
Lab ID	845663115	845663462	885441208	835077076	852016453		
Haemoglobin	111	109	133	137	125	g/L	(119-160)
RCC	3.6	3.5	4.3	4.3	4.0	x10 ¹² /L	(3.8-5.8)
Haematocrit	0.34	0.33	0.40	0.40	0.37		(0.35-0.48)
MCV	94	95	93	93	93	fL	(80-100)
MCH	31.1	31.1	31.1	31.8	31.2	pg	(27.0-32.0)
MCHC	331	328	336	343	336	g/L	(310-360)
RDW	13.2	13.2	14.0	13.1	12.9		(10.0-15.0)
WCC	9.4	10.0	5.8	6.2	4.4	x10 ⁹ /L	(4.0-11.0)
Neutrophils	7.21	7.61	3.39	4.15	2.16	x10 ⁹ /L	(2.0-7.5)
Lymphocytes	1.40	1.54	1.62	1.38	1.62	x10 ⁹ /L	(1.0-4.0)
Monocytes	0.65	0.68	0.52	0.56	0.43	x10 ⁹ /L	(0.0-1.0)
Eosinophils	0.11	0.13	0.26	0.05	0.11	x10 ⁹ /L	(0.0-0.5)
Basophils	0.05	0.03	0.04	0.07	0.05	x10 ⁹ /L	(0.0-0.3)
NRBC	<1.0	<1.0	<1.0	<1.0	<1.0	/100 WBC	(<1)
Platelets	238	216	248	287	262	x10 ⁹ /L	(150-450)

Comment on Lab ID 852016453

Full blood count is within reference limits

Tests Completed: FBC(e). **Pending:** LH(s),FSH(s),Oest(s),Prog(s),Commenting,B12(s),LFT(s),Lipids(s)
C(s),UCreat(s),E(s),Iron(s),Mg(s),Vit D(s),Zn(s),TFT(s),Vit B6(e),Testosterone(s) + more
Clinical Notes: HEALTH CHECK, TIREDNESS



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Printed : 05/08/2024 20:34

DOB : 11/05/1985 (39 Yrs)
Gender : Female
Ph : 0402901036

Biochemistry					Current Result		
Date	15/05/20	22/09/20	20/01/23	19/06/23	05/08/24	Units	Reference
Time	13:37	08:43	08:19	09:56	09:59		
Lab ID	843690147	846616761	885441208	835077076	852016453		
Status			Fasting	Random	Fasting		
Sodium	138	138	141	140	139	mmol/L	(135-145)
Potassium	3.9	3.9	4.5	4.1	4.3	mmol/L	(3.5-5.5)
Chloride	105	109	105	105	105	mmol/L	(95-110)
Bicarbonate	27	22	25	22	28	mmol/L	(20-32)
Urea	4.5	3.2	5.1	3.6	3.8	mmol/L	(2.5-7.0)
Creatinine	60	50	60	55	55	umol/L	(45-85)
eGFR	>90	>90	>90	>90	>90	mL/min/1.73m2	(>59)
Magnesium		0.76			0.85	mmol/L	(0.65-1.00)
Bili Total	*34		*27	*60	*30	umol/L	(3-15)
ALP	39		43	34	39	U/L	(20-105)
GGT	14		16	12	20	U/L	(5-35)
LD	140		167	147	206	U/L	(120-250)
AST	18		17	21	32	U/L	(10-35)
ALT	16		24	17	*31	U/L	(5-30)
Total Protein	68		*66	69	*66	g/L	(68-85)
Albumin	45	*35	46	47	47	g/L	(37-48)
Globulin	23		*20	*22	*19	g/L	(23-39)
Cholesterol			3.9		3.9	mmol/L	(<5.5)
Triglycerides			0.3		0.3	mmol/L	(<2.0)

Comment on Lab ID 852016453

Increased total bilirubin. In the absence of haemolysis, a mildly elevated indirect bilirubin may be due to Gilbert's syndrome.

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

Tests Completed: LFT(s),Lipids(s),C(s),UCreat(s),E(s),Mg(s),FBC(e). Pending: LH(s),FSH(s),Oest(s)
Prog(s),Commenting,B12(s),Iron(s),Vit D(s),Zn(s),TFT(s),Vit B6(e),Testosterone(s) + more
Clinical Notes: HEALTH CHECK, TIREDNESS