

# **Government of South Australia**

# Royal Adelaide Hospital Gastrointestinal Investigation Unit

Barbara Baldwin

Procedure Date:

14/06/2024 9:58 AM

Consultant:

Nam Q. Nguyen, Head, GIU

Instrument Name: **Note Status:** 

278,239

SA Health

Medicare #:

**Finalised** 5114061337-1

MBS Code 1:

**EUS FNA** 

MRN:

767815

**Patient Name:** 

Gender:

Female 25/09/1945

Date of Birth: Age:

78

Procedure:

Upper EUS

Indications:

to exclude pNET

**Referring Physician** 

Nam Q. Nguyen, Head, GIU Royal Adelaide Hospital Port Road Adelaide, SA 5000 Nam Q. Nguyen, Head, GIU, Brody Sampson, RN, Anna Kim, RN, May Cura, RN

**Providers:** 

I personally performed the entire procedure. **Consultant Participation:** 

Medications:

Monitored Anaesthesia Care

Procedure:

Informed consent was documented. The scope was introduced through the mouth, and advanced to the second part of duodenum. The scope was introduced through the mouth, and advanced to the second part of duodenum. The upper EUS was accomplished without difficulty. The patient tolerated the

procedure well.

Findings:

**ENDOSCOPIC FINDING:** 

A medium-sized hiatal hernia was present.

One 5 mm erosion with stigmata of recent bleeding was found in the prepyloric region of the stomach. Biopsies were taken with a cold forceps for histology.

The ampulla and examined duodenum were normal.

ENDOSONOGRAPHIC FINDING:

Two small (5mm) round lesion were identified in the pancreatic head and pancreatic tail. The lesions were hypoechoic. The lesions were hypoechoic on contrast, thus are not typical NET. The endosonographic borders were well-defined.

Endosonographic imaging in the main pancreatic duct showed no abnormalities.

No lymphadenopathy seen.

Endosonographic imaging in the visualised portion of the liver showed no lesion.

There was no sign of significant endosonographic abnormality in the common bile duct. The maximum diameter of the duct was 7 mm.

Complications:

No immediate complications.

Impression:

- Medium-sized hiatal hernia.
- Erosive gastropathy with stigmata of recent bleeding. Biopsied.
- Normal ampulla and examined duodenum.
- Two 5mm lesion were identified in the pancreatic head and pancreatic tail. Need surveillance.
- There was no sign of significant pathology in the common bile duct.

Recommendation:

- Discharge patient to home.
- Resume regular diet today.
- Repeat the upper endoscopic ultrasound in 6 months for surveillance.



January

GAS / ENDOS M/C:5114061337

BALDWIN

Gastrointestinal Investigation Unit Royal Adelaide Hospital

# **ENDOSCOPY**

	DISCHA	RGE INSTRUCTIONS	
Follow	up appointment(s):		
	An Outpatient appointment has been arr	ranged for you. Letter to be sent.	
	Return to the doctor who referred you for	or this procedure	
	Return to your local doctor 7 to 14 days	after this procedure.  ENS in 6 mont	K
The sec	dation drug administered during your prod	cedure may cause drowsiness or clui	nsiness.
You mi	ust not:		
:	Drive any vehicle, return to work or ope influence of medications which cause se Make any importance decisions until tor Drink alcohol until tomorrow	dation	is an offence to drive under the
Please You M	return home and rest.  UST have a responsible adult stay with yo You may have a sore throat.  Because of the anaesthetic spray you w minutes after the procedure.  Have a sip of water to make sure you car your first drink is not too hot.  Today you had banding / a dilatation / s	ere given to numb your throat, you	
DIET:	NESULIIC HOTHIAI AICE	oft diet until tomorrow   nd then normal diet	Fluids only until tomorrow and then normal diet
If you	experience any of the following symptor Increasing or persistent pain in the mide Cough or vomiting blood Black discolouration of your bowel action Weakness or dizziness	dle of the chest or abdomen	up to 3 days or more after the

## **Contact information:**

- Your local Doctor/Hospital
- The Gastrointestinal Investigation Unit at the Royal Adelaide Hospital Ph: 7074 1657 (8.00am – 4.30pm Monday – Friday)
- After Hours: The Royal Adelaide Hospital Emergency Department Ph: 7074 0000
- If additional information or assistance is required, then please telephone the Royal Adelaide Hospital on 7074 0000 and ask to speak to the Gastroenterologist who is on call 24 hours a day.

BARBARA BALDWIN,

43 BUTTERWORTH ROAD,

ALDINGA BEACH. 5173

Phone: 0411122874
Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 97A5569BCF Lab Reference: 467590644-C-C485

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Alb/Creat Ratio Name of Test:

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

15:28

Clinical notes: 78yo F, T2DM

Clinical Notes: 78yo F, T2DM

08/07/24 01/03/24 Date Unkn Unkn Time

Reference Units Lab ID 467590644 467084575

mmol/L

R-U-Creatinine 13.6 4.4 Albumin Urine 21.1 H <5.0 Alb/Cr Ratio 1.6 (<20.0)mg/L mg/mmol (0.0-3.5) Alb/Cr Ratio

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: MICROALBUMIN SPOT

Tests Pending : Sample Pending :

BARBARA BALDWIN,

ALDINGA BEACH. 43 BUTTERWORTH ROAD, 5173

Phone: 0411122874
Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-H-H902

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: Haematology(EDTA)

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

16:29

Clinical notes: 78yo F, T2DM diet

Clinical Notes: 78yo F, T2DM diet

## Haematology (EDTA)

Date Time F-Fast Lab ID	08/07/24 0858 F 462983139	29/02/24 1019 F 465012009	05/12/23 1431 463525084	04/04/23 0859 F 463200032	Units	Reference
Haemoglobin RCC Haematocrit	121 4.3 0.38	127 4.4 0.39	130 4.6 0.41	129 4.7 0.40	g/L x10*12/L 1/L	(119-160) (3.6-5.5)
(0.30-0.46) MCV MCH	90 28.3	90 28.9	88 28.3	86 27.6	fL pg	(80-100)
(27.0-32.0) MCHC RDW	316 13.3	323 13.1	321 13.2	319 13.7	g/L	(310-360)
(10.0-15.0)  WCC  Neutrophils Lymphocytes Monocytes Eosinophils Basophils Platelets	6.4 3.26 2.62 0.37 0.12 0.05 296	6.5 3.42 2.59 0.42 0.06 0.02 277	8.9 5.20 2.95 0.64 0.08 0.03 302	7.0 4.34 2.12 0.47 0.09 0.02 316	x10*9/L x10*9/L x10*9/L x10*9/L x10*9/L x10*9/L x10*9/L	(4.0-11.0) (1.7-7.5) (1.0-4.0) (0.0-1.0) (0.0-0.5) (0.0-0.3) (150-450)

Comments on Collection 08/07/24 0858 F: Results normal.

Clinical advice (Drs only) call Dr L Nath 83662057

Clinpath Laboratories NATA No:3307

Tests Completed: FULL BLOOD COUNT

Tests Pending : LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL,

CALCIUM(CORR), UREA CREATININE, VIT D, VITAMIN B12,

FOLATE SERUM, HBA1C

BARBARA BALDWIN,

ALDINGA BEACH. 43 BUTTERWORTH ROAD, 5173

Phone: 0411122874
Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-C-C141

Laboratory: CLINPATH

Referred by: DR CHRISTINE OSBORNE Addressee: DR CHRISTINE OSBORNE

Name of Test: Gen Chem(Se/Pl)

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

17:58

Clinical notes: 78yo F, T2DM diet

Clinical Notes : 78yo F, T2DM diet

### Biochemistry (Se/Pl)

Date	08/07/24	29/02/24		06/06/23		
Time F-Fast	0858 F	1019 F	1431	1304 F		
Lab ID	462983139	465012009	463525084	463201394	Units	Reference
Status	Fasting	Fasting	Random	Fasting		
Sodium	141	140	140	Luberng	mmol/L	(135-145)
Potassium	4.2	4.3	4.1		mmol/L	(3.5-5.5)
Chloride	107	106	105		mmol/L	(95-110)
Bicarbonate	27	26	25		mmol/L	(20-32)
Urea	6.0	4.5	5.3		mmol/L	(3.5-9.5)
Creatinine	60	60	54		umol/L	(45-90)
eGFR	84	84	87		ml/min	(>59)
Uric Acid	0.23	0.26	0.27		mmol/L	(-05)
(0.15-0.40)	0.23	0.20	0.27		nano 1 / 1	
Calcium	2.29	2.29	2.37		mmol/L	
(2.10-2.60)	2.23	2.23	2.07			
Corr Calcium	2.25	2.25	2.27		mmol/L	
(2.10-2.60)	2.20	2.20	2.2.			
Phosphate	0.97	1.02	1.07		mmol/L	(0.7-1.5)
Bili.Total	12	14	8		umol/L	(3-15)
ALP	105	102	132 H		U/L	(30-115)
GGT	19	18	23		U/L	(5-35)
	169	146	159		U/L	(120-250)
LD AST	20	18	25		U/L	(10-35)
ALT	21	19	26		U/L	(5-30)
Total Protein	63 L	65	71		g/L	(64-83)
Albumin	42	42	45		g/L	(36-47)
Globulin	21 L	23	26		g/L	(23-39)
Total Cholesterol		6.1 H	7.9 H	8.0 H	mmol/L	(3.5-5.5)
Glucose Fasting	6.4 H	6.3 H			mmol/L	(3.6-5.4)
Glucose Random	0.4.11	0.0 11	5.9		mmol/L	(3.6-7.8)

Comments on Collection 08/07/24 0858 F: A raised fasting glucose level is noted. Previous results including an HbAlc level > 6.5% indicative of diabetes mellitus are seen on patient file review.

If required further information can be found at Kidney Health Australia (www.kidney.org.au)

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL,
CALCIUM(CORR), UREA CREATININE, VITAMIN B12,
FOLATE SERUM, FULL BLOOD COUNT
Tests Pending: VIT D, HBA1C
Sample Pending: PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL,

ALDINGA BEACH. 43 BUTTERWORTH ROAD, 5173

Phone: 0411122874 Birthdate: 25/09/1945 Sex: F 5114061337 Medicare Number: Your Reference: 6DA2A16444 Lab Reference: 462983139-C-C151

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: Iron Studies

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

17:58

Clinical notes: 78yo F, T2DM diet

Clinical Notes: 78yo F, T2DM diet

#### IRON

Date Time F-Fast Lab ID	0858 F	1019 F	05/12/23 1431 463525084	0859 F	Units	Reference
Iron Transferrin Saturation Ferritin	14.4	14.4	15.9	8.0 L	umol/L	(8.8-27.0)
	2.7	2.8	3.1	2.7	g/L	(2.0-3.2)
	24	23	23	13	%	(10-45)
	50	34	48	63	ug/L	(30-210)

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No: 3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM, PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL,

CALCIUM(CORR), UREA CREATININE , VITAMIN B12, FOLATE SERUM, FULL BLOOD COUNT

Tests Pending : VIT D, HBA1C

43 BUTTERWORTH ROAD, ALDINGA BEACH. 5173

Phone: 0411122874

Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-C-C205

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: LIPIDS HDL (Se/Pl)

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

17:58

Clinical notes: 78yo F, T2DM diet

Clinical Notes: 78yo F, T2DM diet

Date Time F-Fast Lab ID	08/07/24 0858 F 462983139	29/02/24 1019 F 465012009	05/12/23 1431 463525084	06/06/23 1304 F 463201394	Units	Reference
Status Total Cholesterol Triglycerides HDL Chol. LDL Chol. Chol/HDL Ratio Non HDL Chol.	Fasting 6.4 H 1.2 1.6 4.2 H 4.0 4.8 H	Fasting 6.1 H 1.9 H 1.3 3.9 H 4.7 H 4.8 H	7.9 H 3.1 H 1.6 4.9 H 4.9 H 6.3 H	8.0 H 1.3 2.0 5.4 H 4.0 6.0 H	mmol/L mmol/L mmol/L mmol/L	(3.5-5.5) (0.0-1.5) (1.0-2.2) (0.0-2.5) (0.0-4.5) (<3.9)

Comments on Collection 08/07/24 0858 F:

A history of Diabetes Mellitus is noted in the laboratory records. In diabetics, the NHF recommends 6 monthly progress lipid levels. TARGET LEVELS:

The National Vascular Disease Prevention Alliance (NVDPA) treatment target levels for high risk people (known coronary heart and other arterial disease, diabetes, chronic renal failure, Aboriginal and Torres Strait Islander peoples) are:

Total Cholesterol <4.0 mmol/L Fasting Triglycerides <2.0 mmol/L Non-HDL Cholesterol <2.5 mmol/L

Increased non-HDL Cholesterol is a significant marker for subclinical atherosclerosis (ref: Cardiology Today 2013; 3(2): pp25-27).

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL, CALCIUM(CORR), UREA CREATININE , VITAMIN B12,

FOLATE SERUM, FULL BLOOD COUNT

Tests Pending : VIT D, HBA1C

43 BUTTERWORTH ROAD, ALDINGA BEACH. 5173

Phone: 0411122874

Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-C-H246

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: B12/Folate

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

17:58

Clinical notes: 78yo F, T2DM diet

Clinical Notes: 78yo F, T2DM diet

### Vitamin B12, Serum Folate, Red Cell Folate

Time F-Fast Lab ID	0858 F	29/02/24 1019 F 465012009	1431	0859 F	Units	Reference
Vitamin B12	415	402	532		pmol/L	(130-855)
Serum Folate	31.3	29.6	33.4		nmol/L	(>6.0)

Comments on Collection 08/07/24 0858 F: Total Vitamin B12 concentrations above 400 pmol/L indicate B12 sufficiency is likely.

Please note from 15/04/2019, the Serum Folate assay is performed on an Abbott Alinity.

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL, CALCIUM(CORR), UREA CREATININE , VITAMIN B12,

FOLATE SERUM, FULL BLOOD COUNT

Tests Pending : VIT D, HBA1C Sample Pending :

43 BUTTERWORTH ROAD, ALDINGA BEACH. 5173

Phone: 0411122874

Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-C-C521

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: VIT D

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

19:28

Clinical notes: 78yo F, T2DM diet

Clinical Notes : 78yo F, T2DM diet

Date 08/07/24 29/02/24 05/12/23 13/12/22 Time F-Fast

0858 F 1019 F 1431 0749 F 462983139 465012009 463525084 462826185 Units Lab ID Reference

250H VitD 59 67 45 L 53 nmol/L (50-160)

Comments on Collection 08/07/24 0858 F: According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11), 2012, Vitamin D status is defined as:

Mild Deficiency Mild Deficiency 30 - 50 nmol/L Moderate Deficiency 12.5 - 29 nmol/L 30 50 nmol/L

Severe Deficiency <12.5 nmol/L

Assay method is Diasorin Liaison XL from 7/2012.

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. Further information is available at www.msac.gov.au

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL, CALCIUM(CORR), UREA CREATININE, VIT D, VITAMIN B12,

FOLATE SERUM, FULL BLOOD COUNT

Tests Pending : HBA1C

43 BUTTERWORTH ROAD, ALDINGA BEACH.

Phone: 0411122874

Birthdate: 25/09/1945 Sex: F Medicare Number: 5114061337 Your Reference: 6DA2A16444 Lab Reference: 462983139-C-E444

Laboratory: CLINPATH

Addressee: DR CHRISTINE OSBORNE Referred by: DR CHRISTINE OSBORNE

Name of Test: HbA1c

Requested: 17/04/2024 Collected: 08/07/2024 Reported: 08/07/2024

20:28

Clinical notes: 78yo F, T2DM diet

Clinical Notes : 78yo F, T2DM diet

HBA1c

08/07/24 29/02/24 05/12/23 06/06/23 Time F-Fast 0858 F 1019 F 1431 1304 F

462983139 465012009 463525084 463201394 Units Reference

HbAlc (NGSP) 6.4 H 6.5 H 6.3 H % (4.0-6. 47 H 48 H 45 H mmol/mol (20-42) 6.1 H (4.0-6.0)HbA1c (IFCC) 43 H

Comments on Collection 08/07/24 0858 F: For Type 2 diabetics the ADS recommends -

Clinical Situation Current Therapy Target

Short duration DM

Lifestyle +/with no CVD Metformin <=6.0 % (42 mmol/mol)

Antidiabetics,

not metformin

or insulin <=6.5 % (48 mmol/mol)

<=7.0 % (53 mmol/mol) Insulin

Long duration DM, Any <=7.0 % (53 mmol/mol)

or CVD

Note: Conditions of shortened red cell survival may cause a misleading decrease in HbA1c. ie. B12/Folate deficiency, recent transfusion, haemoglobinopathy, haemolysis, cirrhosis, liver disease and renal failure. Iron deficiency anaemia may cause an misleading increase in HbAlc.

HbA1c performed on the Sebia Cap3 analyser by capillary electrophoresis.

Advice (Drs only) call Dr Devika Thomas 83662000

Clinpath Laboratories NATA No:3307

Tests Completed: LIVER FUNCTION TESTS , ELECTROLYTES, GLUCOSE SERUM,

PHOSPHATE, URATE, IRON STUDIES, LIPIDS AND HDL, CALCIUM(CORR), UREA CREATININE, VIT D, VITAMIN B12,

FOLATE SERUM, HBA1C, FULL BLOOD COUNT

Tests Pending : Sample Pending :