

# SOUTHERN CROSS MEDICAL CENTRE



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medical centre**

[www.southerncrossmedicalcentre.com.au](http://www.southerncrossmedicalcentre.com.au)

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**Dr Cheryl Skadiang MBBS, FRACGP Prov:2966216A**

23/08/2024

Please contact your specialist office and enquire about out of pocket expenses.

**Dr Chris Neil  
Heartwise, 58A  
Whitehorse Road  
Deepdene VIC 3103  
Tel: (13) 0087 0772**

Dear Chris,

**Re     Melanie Jefferies 24/11/1991  
Unit 2/103 Willesden Road  
Hughesdale VIC 3166  
Tel: , Mobile: 0466 417 617  
Medicare Number: 2693662445/1**

Thank you for seeing Melanie for management of ?POTS. This has been flagged by her exercise physiologist who will provide separate correspondence. Please find Melanie's medical history and recent pathology attached.

## **Medical History**

Migraine with Aura (stress induced)

Asthma

Hayfever

Pomphylox

Carpal Tunnel (bilateral)

Recurrent ear infections

Provisional diagnosis of Autism Spectrum Disorder

ADHD

Anxiety, Depression, Eating Disorder, Body dysmorphic disorder, PTSD

Bilateral mastectomy (2017)

\*under NDIS

no smoking/vaping

no ETOH (Hx of substance abuse previously)

no illicit drugs

## **Medications**

Clotrimazole 1% Vaginal Cream 35 g (with 6 applicators) [1] - 1 applicatorful (5 g) as deeply as poss intravaginally once daily, pref at bedtime, for 6 consecutive days

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Meloxicam 15mg Oral Tablet [30] - 1 tab daily PRN (dysmenorrhoea) - 3 Repeats  
Mometasone furoate 0.1% Topical Ointment 15 g (1 mg/g) [1] - Apply thin film to affected skin area once daily  
Pizotifen 500mcg Coated Tablet [100] - 2mg nocte - 2 Repeats  
Prochlorperazine maleate 5mg Oral Tablet [25] - 1 tablet TDS PRN

### Allergies

Topamax Tablets 25 mg

### Social History

Yours sincerely,



Dr Cheryl Skadiang

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Patient Name: Jefferies , Melanie DOB: 24/11/1991  
Recipient: Dr Chris Neil Date of Report: 23/08/2024

### ests Requested: IRON STUDIES

Ms Melanie A Jefferies DOB: 24/11/1991  
Performed By: Dorevitch Pathology  
Requested: 06/03/2024 By: Anthony Kemp  
Collected: 24/03/2024  
Reported: 24/03/2024

#### SERUM IRON-STUDIES

Date: 24/10/23 24/03/24  
Time: 08:10 08:10  
Lab.No: 48934968 51464133

			Units	Ref. Range
Ferritin:	31	36	ug/L	(30-300)
Iron:	14	9	umol/L	(7-27)
Transferrin:	2.4	2.5	g/L	(2.0-3.6)
Transferrin Sat:	23	14	%	(13-47)

Medical professionals: Please contact a pathologist on 03 9244 0444 if required.

Method: Siemens Immunoassay

Requested Tests : GHB\*, FES, MBI, FHP\*, AND\*

**Tests Requested: HBA1C (GLYCATED HB)**

Ms Melanie A Jefferies DOB: 24/11/1991

Performed By: Dorevitch Pathology

Requested: 06/03/2024 By: Anthony Kemp

Collected: 24/03/2024

Reported: 24/03/2024

**BLOOD HAEMOGLOBIN A 1c**

Date	Lab.No.	HBA1C %	HbA1c mmol/mol
24/03/24	51464133	5.6	38

For diagnosis of diabetes mellitus the cut off is 6.5%.

For monitoring diabetic patients use the guidelines below.

Guidelines	HbA1c%	HbA1c mmol/mol
General Target	< 7.1	< 54
Adequate	< 8.1	< 65
Suboptimal	> 8.0	> 64

Requested Tests : GHB, FES, MBI, FHP, AND\*

**Tests Requested: GENERAL BIOCHEMISTRY**

Ms Melanie A Jefferies DOB: 24/11/1991

Performed By: Dorevitch Pathology

Requested: 06/03/2024 By: Anthony Kemp

Collected: 24/03/2024

Reported: 24/03/2024

**SERUM/PLASMA BIOCHEMISTRY**

		Ref.Range
Total Bilirubin :	6 umol/L	(< 20)
Ala. Aminotransferase (ALT) :	17 U/L	(< 30)
Asp. Aminotransferase (AST) :	15 U/L	(< 30)
Alkaline Phosphatase (ALP) :	80 U/L	(30-110)
Gamma Glutamyl Trans. (GGT) :	14 U/L	(< 30)
Total Protein :	71 g/L	(60-80)
Albumin :	37 g/L	(36-49)
Globulin :	34 g/L	(22-40)

Requested Tests : GHB\*, FES\*, MBI, FHP\*, AND\*

**Tests Requested: THYROID FUNCTION TEST**

Ms Melanie A Jefferies DOB: 24/11/1991

Performed By: Dorevitch Pathology

Requested: 10/10/2023 By: Cheryl Skadiang

Collected: 24/10/2023

Reported: 25/10/2023

**THYROID FUNCTION TESTS (SERUM)**

		Ref.Range
Thyroid Stimulating Hormone (TSH) :	1.48 mIU/L	(0.50-4.00)

Normal TSH indicates normal thyroid function.

Note that TSH should NOT be used to adjust thyroxine treatment in people with pituitary disease.

Medical professionals: Please contact a pathologist if required on (03) 9244 0444.

Method: Siemens Immunoassay

Requested Tests : GS, TFT, VID, FES, MBI, LIP, FBE, BFO