

EMANOUEL, JASMINE
3 BEAUMONT DR, BEAUMONT HILLS. 2155
Phone: 0296297202
Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-FBE-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: HAEMATOLOGY (FBE-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 18:13

HAEMATOLOGY

Request Number	22649121	24579685	26596218	28432315
Date Collected	17 Feb 23	18 Aug 23	22 Jan 24	15 Jul 24
Time Collected	00:00	10:45	09:50	12:12
Specimen Type: EDTA				
Hb (115-165) g/L	129	138	130	133
Hct (0.34-0.47)	0.41	0.42	0.39	0.40
RCC (3.9-5.8) x10 ¹² /L	4.5	4.7	4.3	4.4
MCV (79-99) fL	92	90	90	91
MCH (27-34) pg	29	30	30	30
MCHC (320-360) g/L	316	330	334	331
RDW (10.0-17.0) %	13.0	12.9	12.5	12.4
WBC (4.0-11.0) x10 ⁹ /L	5.2	5.3	5.2	9.3
Neut (2.0-7.5) x10 ⁹ /L	3.2	3.0	3.0	6.9
Lymph (1.0-4.0) x10 ⁹ /L	1.6	1.9	1.9	1.8
Mono (0.2-1.0) x10 ⁹ /L	0.3	0.3	0.2	0.6
Eos (< 0.7) x10 ⁹ /L	0.1	0.1	0.1	0.1
Baso (< 0.2) x10 ⁹ /L	0.1	0.1	0.1	0.0
Plat (150-400) x10 ⁹ /L	198	189	183	170

HAEMATOLOGY: FBC parameters are within reference range.

Requested Tests : VBF*, TFT*, GLU*, RVP*, RES*, NCP*, MBA*, LIP*, FE*, FBE, DVI*, BPP*, ATY*

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-FE-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: IRON STUDIES (FE-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 18:48

IRON STUDIES

Request Number	24579685	26596218	26395988	28432315
Date Collected	18 Aug 23	22 Jan 24	7 Mar 24	15 Jul 24
Time Collected	10:45	09:50	17:37	12:12
Specimen Type: Serum				
Iron (10-30) umol/L			5	
T'ferrin(32-48) umol/L			29	
T. Sat. (13-45)			9	
Ferritin(30-165) ug/L	71	49	45	38

Normal serum ferritin result noted. However, this result does not exclude iron deficiency if the patient has concurrent inflammation. If there is clinical suspicion of iron deficiency and/or a concurrent inflammatory condition, suggest measurement of full iron studies and CRP.

Requested Tests : VBF*, TFT, GLU*, RVP*, RES*, NCP*, MBA*, LIP*, FE, FBE, DVI*, BPP*, ATY*

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-TFT-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: THYROID FUNCTION TEST (TFT-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 18:48

THYROID PROFILE

Request Number	15653281	22649121	26596218	28432315
Date Collected	8 Nov 21	17 Feb 23	22 Jan 24	15 Jul 24
Time Collected	11:25	00:00	09:50	12:12
Specimen Type: Serum				
TSH (0.5-4.0) mIU/L	1.5	1.4	1.5	1.9

Result(s) consistent with euthyroidism.

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

Requested Tests : VBF*, TFT, GLU*, RVP*, RES*, NCP*, MBA*, LIP*, FE, FBE, DVI*, BPP*, ATY*

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Phone: 0296297202
Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-MBA-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: SERUM CHEMISTRY (MBA-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 21:11

SERUM CHEMISTRY

Request Number	22649121	26596218	26395988	28432315
Date Collected	17 Feb 23	22 Jan 24	7 Mar 24	15 Jul 24
Time Collected	00:00	09:50	17:37	12:12
Specimen Type: Serum				
Haemolysis	Nil	Nil	Nil	1+
Icterus	Nil	Nil	Nil	Nil
Lipaemia	Nil	Nil	Nil	Nil
Na (135-145) mmol/L	136	140	139	139
K (3.6-5.4) mmol/L	4.0	4.0	4.1	4.4
Cl (95-110) mmol/L	101	102	100	104
HCO3 (22-32) mmol/L	23	22	26	18
An Gap (10-20) mmol/L	16	20	17	21
Urea (2.5-6.7) mmol/L	3.1	4.1	4.1	3.5
Creat (45-90) umol/L	65	60	70	65
eGFR mL/min/1.73sqM	> 90	> 90	> 90	> 90
Urate (0.14-0.36) mmol/L	0.26	0.27	0.23	0.24
Bili (< 15) umol/L	11	10	5	7
AST (< 30) U/L	16	34	16	24
ALT (< 30) U/L	11	22	8	15
GGT (< 30) U/L	12	10	12	12
Alk Phos (20-105) U/L	62	59	60	57
Protein (60-82) g/L	68	69	73	72
Albumin (38-50) g/L	44	45	47	45
Glob (20-39) g/L	24	24	26	27
Ca (2.10-2.60) mmol/L	2.34	2.36	2.36	2.27
Corr Ca (2.10-2.60) mmol/L	2.32	2.32	2.28	2.23
PO4 (0.75-1.50) mmol/L	0.95	1.21	1.42	1.19

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).

As a result of haemolysis in this sample, the following analytes may be falsely elevated: Phosphate, AST

PLEASE NOTE: Bicarbonate may be artefactually low due to sample evaporation in a small volume specimen and/or when there is a delay in analysis. Suggest recollection as clinically appropriate.

Requested Tests : VBF*, TFT, GLU*, RVP*, RES*, NCP*, MBA, LIP*, FE, FBE, DVI*, BPP*, ATY*

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Your Reference: 00118041 **Lab Reference:** 24-28432315-DVI-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: VITAMIN D (DVI-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 21:21

VITAMIN D

Haemolysis 1+
Serum 25(OH) Vitamin D **40** 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*, TFT, GLU*, RVP*, RES*, NCP*, MBA, LIP*, FE, FBE, DVI, BPP*, ATY*

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-GLU-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: GLUCOSE (GLU-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 21:24

SERUM/PLASMA GLUCOSE

Request Number	22649121	26596218	26395988	28432315
Date Collected	17 Feb 23	22 Jan 24	7 Mar 24	15 Jul 24
Time Collected	00:00	09:50	17:37	12:12
Fasting status	Fasting	Fasting	Random	Random
Serum (3.4-7.7) mmol/L	4.8	4.4	4.6	4.2

Normal glucose concentration.

Additional comment: The sample for glucose analysis was not collected into a fluoride/oxalate tube. As it was not collected at a Lavery collection centre, delay in centrifugation can falsely decrease glucose results. Re-collection may therefore be considered.

Requested Tests : VBF*, TFT, GLU, RVP*, RES*, NCP*, MBA, LIP*, FE, FBE, DVI, BPP*, ATY*

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321

Your Reference: 00118041 **Lab Reference:** 24-28432315-LIP-0

Laboratory: Laverty Pathology

Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: LIPID STUDIES (LIP-0)

Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 15/07/2024 21:26

LIPID STUDIES

Request Number 22649121 26596218 26395988 28432315
Date Collected 17 Feb 23 22 Jan 24 7 Mar 24 15 Jul 24
Time Collected 00:00 09:50 17:37 12:12
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	Nil	1+
Icterus	Nil	Nil	Nil	Nil
Lipaemia	Nil	Nil	Nil	Nil

Fasting status		Fasting	Fasting	Random	Random
Chol (3.0-5.2)	mmol/L	4.7	5.1	5.0	4.4
Trig (0.5-1.7)	mmol/L	0.6	0.7	0.8	0.8
HDL (1.0-2.0)	mmol/L		1.6		1.5
LDL (1.5-3.4)	mmol/L		3.2		2.5
Non-HDL (< 3.4)	mmol/L		3.5		2.9
Chol/HDL(< 4.5)			3.2		2.9

NVDP A 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*, TFT, GLU, RVP*, RES*, NCP*, MBA, LIP, FE, FBE, DVI, BPP*, ATY*

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Phone: 0296297202

Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321

Your Reference: 00118041 **Lab Reference:** 24-28432315-VBF-0

Laboratory: Laverty Pathology

Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: B12, FOLATE, R.C.FOLATE (VBF-0)

Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 16/07/2024 15:25

VITAMIN B12 AND FOLATE STUDIES

Request Number 22649121 24579685 26596218 28432315
Date Collected 17 Feb 23 18 Aug 23 22 Jan 24 15 Jul 24
Time Collected 00:00 10:45 09:50 12:12

B12 (156-740)pmol/L	211	201	217	156
Active B12 (> 40) pmol/L	34	45	57	35
Serum Folate (> 9.0)nmol/L	34.6	44.8	38.1	49.0

Serum Vitamin B12 Assay:

DEFICIENCY	BORDERLINE	SUFFICIENCY
<150 pmol/L	150 - 300 pmol/L	>300 - 740 pmol/L

For patients with total B12 levels in the low or borderline range, testing for active B12 (holotranscobalamin II) will automatically be performed to resolve B12 status. Active B12 is the biologically active fraction of total serum B12, and a superior indicator of B12 status. Up to 15% of individuals may have a deficiency of the carrier protein haptocorrin, which does not result in clinical B12 deficiency, despite low total B12 levels.

Serum Active B12 Assay:

Consistent with borderline vitamin B12 deficiency.
Borderline deficiency may occur in the early stages of Pernicious Anaemia (PA). Physiologic deficiency can be confirmed by performing Methylmalonic acid (MMA) levels and/or Homocysteine plus Folate assays.
Screening for Pernicious anaemia with intrinsic factor antibodies (IF-Ab) and gastric parietal cell antibodies (GPC-Ab) is recommended.

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, TFT, GLU, RVP*, RES*, NCP*, MBA, LIP, FE, FBE, DVI, BPP*, ATY*

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-ATY-0
Laboratory: Laverty Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: ATYPICAL PNEUMONIA (ATY-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 16/07/2024 21:39

ATYPICAL PNEUMONIA PCR

Specimen: Upper respiratory tract sample

Mycoplasma pneumoniae DNA: Not Detected
Chlamydia pneumoniae DNA: Not Detected
Legionella pneumophila DNA: Not Detected

This assay has been validated to the current NPAAC guidelines but has not yet been accredited by NATA.

Requested Tests : ADD*, ATO*, VBF, TFT, GLU, RVP*, RES*, NCP*, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Phone: 0296297202
Birthdate: 12/11/1999 Sex: F Medicare Number: 2883558321
Your Reference: 00118041 Lab Reference: 24-28432315-BPP-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN Referred by: DR MYRA TAN

Name of Test: BORDETELLA PERTUSSIS PCR (BPP-0)
Requested: 15/07/2024 Collected: 15/07/2024 Reported: 16/07/2024 21:39

BORDETELLA POLYMERASE CHAIN REACTION (PCR)

Specimen: Upper respiratory tract sample
Bordetella pertussis DNA: Not Detected
Bordetella parapertussis DNA: Not Detected

No evidence of Bordetella carriage. As bacterial load and the sensitivity of Bordetella PCR decreases with the duration of symptoms, Bordetella pertussis serology may be of value in patients with a cough lasting more than 4 weeks.

Requested Tests : ADD*, ATO*, VBF, TFT, GLU, RVP*, RES*, NCP*, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Phone: 0296297202
Birthdate: 12/11/1999 Sex: F Medicare Number: 2883558321
Your Reference: 00118041 Lab Reference: 24-28432315-NCP-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN Referred by: DR MYRA TAN

Name of Test: NOVEL CORONAVIRUS PCR (NCP-0)
Requested: 15/07/2024 Collected: 15/07/2024 Reported: 16/07/2024 21:42

NOVEL CORONAVIRUS 2019 (SARS-CoV-2) PCR

Specimen: Upper respiratory tract sample
SARS-CoV-2 (COVID 19) RNA: Not Detected

The information provided on this pathology report may be insufficient to fulfil international travel requirements. If for travel, please check with your airline and destination country for their specific Travel Pathology Report requirements.

Failure to detect organism-specific nucleic acid does not exclude the possibility of infection. Repeat testing may be indicated if the patient remains symptomatic or if the sample was collected early post-exposure. Please also request testing for other respiratory viruses in addition to SARS-CoV-2 if patient is or becomes symptomatic.

Requested Tests : ADD*, ATO*, VBF, TFT, GLU, RVP*, RES*, NCP, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Phone: 0296297202
Birthdate: 12/11/1999 Sex: F Medicare Number: 2883558321
Your Reference: 00118041 Lab Reference: 24-28432315-RVP-0
Laboratory: Lavery Pathology
Addressee: DR MYRA TAN Referred by: DR MYRA TAN

Name of Test: RESPIRATORY VIRUS PCR (RVP-0)
Requested: 15/07/2024 Collected: 15/07/2024 Reported: 16/07/2024 21:48

Clinical notes: NCP SMS SENT --NCP result 0430571010

Clinical Notes : NCP SMS SENT --NCP result 0430571010

RESPIRATORY VIRUS PCR

Sample: Upper respiratory tract sample

Influenza A: Not Detected
Influenza B: Not Detected
Respiratory Syncytial Virus: Not Detected
Parainfluenza: Not Detected
Rhinovirus: **DETECTED**
Adenovirus: Not Detected
Human Metapneumovirus: Not Detected

This test will detect influenza A virus (including seasonal, avian and swine influenza strains) but does not differentiate between strains.

Requested Tests : ADD*, ATO*, VBF, TFT, GLU, RVP, RES*, NCP, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-RES-0
Laboratory: Laverty Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: RESPIRATORY MICRO (RES-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 17/07/2024 10:13

Clinical notes: NCP SMS SENT --NCP result 0430571010

Clinical Notes : NCP SMS SENT --NCP result 0430571010

MICROBIOLOGY

SITE Throat
SPECIMEN Swab
CULTURE Normal upper respiratory tract flora.

Requested Tests : ADD*, ATO*, VBF, TFT, GLU, RVP, RES, NCP, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Phone: 0296297202
Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321
Your Reference: 00118041 **Lab Reference:** 24-28432315-QFX-0
Laboratory: Laverty Pathology
Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: SR NOT RECEIVED/EXTRA SAM (QFX-0)
Requested: 15/07/2024 **Collected:** 15/07/2024 **Reported:** 18/07/2024 13:16

Clinical notes: NCP SMS SENT --NCP result 0430571010

Clinical Notes : NCP SMS SENT --NCP result 0430571010

SPECIMEN STATUS

Please note that Laverty Pathology is unable to perform the add-on test requested. The serum available is insufficient. Please recollect a further gel tube if this add-on test is still required.

Intrinsic Factor Antibody .

Requested Tests : QFX, VBF, TFT, GLU, RVP, RES, NCP, MBA, LIP, FE, FBE, DVI, BPP, ATY

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Birthdate: 12/11/1999 **Sex:** F **Medicare Number:** 2883558321

Your Reference: 00118236 **Lab Reference:** 24-28432443-ATO-0

Laboratory: Lavery Pathology

Addressee: DR MYRA TAN **Referred by:** DR MYRA TAN

Name of Test: MASTER AUTO ANTIBODY (ATO-0)

Requested: 22/07/2024 **Collected:** 24/07/2024 **Reported:** 26/07/2024 15:11

IMMUNOLOGY

Parietal Cell Ab	Not Detected	(< 1:20)
Intrinsic Factor Ab	Negative	

No serological evidence of autoimmune gastritis and/or pernicious anaemia.

All testing performed on serum or plasma unless otherwise specified.

Requested Tests : ATO