

Lab ID 850864487

DOB 15/06/1983 (41 Yrs FEMALE)

Referrer Ms Suzanne Ellis

Your ref.

Address SUZANNE ELLIS HERBALIST 14A HARE STREET
GLENBROOK NSW 2773

Address 26 KINGSWAY
HAZELBROOK NSW 2779

Phone 0413923791

Phone 0414979788

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Requested 24/07/2024

Clinical Notes NO HISTORY

Collected 24/07/2024 09:50

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Biochemistry

Test Name	Result	Units	Reference Interval	Comment
Status	Fasting			
Sodium	139	mmol/L	135 - 145	
Potassium	4.5	mmol/L	3.5 - 5.5	
Chloride	107	mmol/L	95 - 110	
Bicarbonate	23	mmol/L	20 - 32	
Urea	2.7	mmol/L	2.5 - 7.0	
Creatinine	65	umol/L	45 - 85	
eGFR	>90	mL/min/1.73m2	>59	
Urate	0.38	mmol/L	0.15 - 0.40	
Calcium	2.32	mmol/L	2.15 - 2.55	
Corrected Calcium	2.26	mmol/L	2.15 - 2.55	
● Phosphate	0.70 L	mmol/L	0.8 - 1.5	LOW
Total Bilirubin	7	umol/L	3 - 15	
● Alk Phos	130 H	U/L	20 - 105	HIGH
● Gamma GT	41 H	U/L	5 - 35	HIGH
LDH	213	U/L	120 - 250	
AST	25	U/L	10 - 35	
ALT	30	U/L	5 - 30	
Total Protein	71	g/L	68 - 85	
Albumin	46	g/L	37 - 48	
Globulin	25	g/L	23 - 39	
● Cholesterol	5.9 H	mmol/L	<5.5	HIGH
Triglycerides	1.7	mmol/L	<2.0	

Comments

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

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25-07-2024 00:57

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Iron Studies

Test Name	Result	Units	Reference Interval	Comment
Iron	19.8	umol/L	5.0 - 30.0	
Transferrin	3.0	g/L	2.0 - 3.6	
TIBC (Calculated)	66	umol/L	46 - 77	
Saturation	30	%	10 - 45	
Ferritin	32	ug/L	15 - 200	

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25-OH Vitamin D

Test Name	Result	Units	Reference Interval	Comment
● Vitamin D	43 L	nmol/L	50 - 140	LOW

Comments

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.

NATA ACCREDITATION NO 2178

25-07-2024 02:48

Heavy Metals

Serum Copper	17	umol/L	12 - 22
Serum Zinc	14	umol/L	10 - 18

NATA ACCREDITATION NO 2178

25-07-2024 18:12

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Glucose

Test Name	Result	Units	Reference Interval	Comment
Glucose Fasting	5.4	mmol/L	3.6 - 6.0	

Comments

Diabetes is unlikely if fasting glucose levels are less than 5.5 mmol/L but an OGTT could be indicated in the presence of risk factors such as metabolic syndrome, past gestational diabetes, polycystic ovary or family history of type 2 diabetes.

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Thyroid Function

Test Name	Result	Units	Reference Interval	Comment
TSH	0.95	mIU/L	0.40 - 3.50	
Free T4	10.8	pmol/L	9.0 - 19.0	
Free T3	4.4	pmol/L	2.6 - 6.0	

Comments

Euthyroid values.

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Homocysteine

Homocysteine 10.0 umol/L 5.0 - 12.0

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24-07-2024 22:59

Haemoglobin A1c

Test Name	Result	Units	Reference Interval	Comment
HbA1c (IFCC)	36	mmol/mol	20 - 38	
HbA1c (NGSP)	5.4	%	4.0 - 5.6	

Comments

HbA1c less than 48 mmol/mol (6.5%) does not exclude a diagnosis of diabetes mellitus based upon elevated glucose results. The existing diagnostic criteria for fasting and random glucose levels and for oral glucose tolerance testing remain valid, and are the diagnostic tests of choice for gestational diabetes, type 1 diabetes and in the presence of conditions that interfere with HbA1c measurement. Conditions which may affect the measured HbA1c value include any of the haemolytic anaemias, anaemia of chronic disease, severe liver disease, vitamin B12 and/or folate deficiency, the haemoglobinopathies and regular phlebotomy performed for medical indications or for blood donation. It also should be noted that further investigation is required for any inexplicably low HbA1c level or significant discrepancy between HbA1c and glucose results.

NATA ACCREDITATION NO 2178

24-07-2024 21:29

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Vitamin B12 and Folate

Test Name	Result	Units	Reference Interval	Comment
Vitamin B12	200	pmol/L	135 - 650	
Active B12	86	pmol/L	>35	
Serum Folate	23.3	nmol/L	>7.0	

Comments

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.

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Haematology

Test Name	Result	Units	Reference Interval	Comment
Haemoglobin	143	g/L	119 - 160	
Red cell count	4.9	$\times 10^{12}/L$	3.8 - 5.8	
Haematocrit	0.42		0.35 - 0.48	
MCV	86	fL	80 - 100	
MCH	29.1	pg	27.0 - 32.0	
MCHC	338	g/L	310 - 360	
RDW	12.7		10.0 - 15.0	
White cell count	4.2	$\times 10^9/L$	4.0 - 11.0	
Neutrophils	2.65	$\times 10^9/L$	2.0 - 7.5	
Lymphocytes	1.16	$\times 10^9/L$	1.0 - 4.0	
Monocytes	0.30	$\times 10^9/L$	0.0 - 1.0	
Eosinophils	0.09	$\times 10^9/L$	0.0 - 0.5	
Basophils	0.04	$\times 10^9/L$	0.0 - 0.3	
NRBC	<1.0	/100 WBC	<1	
Platelets	405	$\times 10^9/L$	150 - 450	
ESR	7	mm/h	1 - 26	

Comments

Full blood count is within reference limits

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