

BENTON, JENNY
14 NANNIGAI DR, HALLETT COVE. 5158
Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03236#END-YU3
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to:
DR CRISTINA BOLATON

Name of Test: Endocrinology: Thyroid Stimulating Hormone
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
10:58

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 21/08/2023 10:58

Clinical Notes
Please refer to clinical notes

Endocrinology

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
* TSH	5.50 H	[0.50-4.50]	mIU/L

		----- Latest
Collection Date	19-Feb-22	21-Aug-23
Collection Time	09:15	07:54
Accession	050-03646	233-03236
TSH	2.97	5.50 H

This request has other tests in progress at the time of reporting.

Copy To: DR CRISTINA BOLATON

Unless specified, testing has been performed on serum/plasma, general
Haematology on whole blood.
Legend: C=Critical, H=High, L=Low, A=Abnormal
For enquiries phone 8222 3000

NATA: 2348

BENTON, JENNY
 14 NANNIGAI DR, HALLETT COVE. 5158
 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#HAE-YC1
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
 Copy to:
 DR CRISTINA BOLATON

Name of Test: Haematology: Complete Blood Examination
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
 10:20

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 21/08/2023 10:20

Clinical Notes
 Please refer to clinical notes

General Haematology

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
Haemoglobin	144	[115-155]	g/L
White Cell Count	5.40	[4.00-11.00]	x10^9/L
Platelet Count	256	[150-450]	x10^9/L
Red Cell Count	4.70	[3.80-5.20]	x10^12/L
Haematocrit	0.42	[0.35-0.45]	L/L
MCV	89.8	[80.0-98.0]	fL
MCH	31	[27-33]	pg
MCHC	341	[310-360]	g/L
RDW	13.5	[12.0-15.0]	%
* Mean Platelet Volume	9.40 L	[9.50-13.00]	fL
Neutrophils	2.67	[1.80-7.50]	x10^9/L
Neutrophils %	49		%
Lymphocytes	2.39	[1.10-3.50]	x10^9/L
Lymphocytes %	44		%
Monocytes	0.23	[0.20-0.80]	x10^9/L
Monocytes %	4		%
Eosinophils	0.08	[0.02-0.50]	x10^9/L
Eosinophils %	2		%
Basophils	0.03	[<=0.10]	x10^9/L
Basophils %	1		%

			Latest
Collection Date	19-Feb-22		21-Aug-23
Collection Time	09:15		07:54
Accession	050-03646		233-03236
Haemoglobin	145		144
WCC	6.63		5.40
Platelet Count	270		256
RCC	4.75		4.70
Haematocrit	0.45		0.42

MCV	94.9		89.8
MCH	30		31
MCHC	322		341
RDW	13.4		13.5
MPV	9.70		9.40 L
Neutrophils	3.55		2.67
Neutrophils %	54		49
Lymphocytes	2.66		2.39
Lymphocytes %	40		44
Monocytes	0.28		0.23
Monocytes %	4		4
Eosinophils	0.10		0.08
Eosinophils %	2		2
Basophils	0.04		0.03
Basophils %	1		1

This request has other tests in progress at the time of reporting.

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 Haematology on whole blood.
 Legend: C=Critical, H=High, L=Low, A=Abnormal
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14 NANNIGAI DR, HALLETT COVE. 5158
Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03237#CHE-YQ9
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to: DR CRISTINA BOLATON

Name of Test: Chemistry: Glucose
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
10:43

SA Pathology Accession No : 23-233-03237
Referred By : DR KARYN BOUNDY
Report Generated: 21/08/2023 10:43

Clinical Notes
Please refer to clinical notes

General Chemistry

Collection Date	21-Aug-23	Reference	Units
Collection Time	07:56		
Fasting	Yes		
* Glucose	5.8 H	[3.2-5.5]	mmol/L

		----- Latest
Collection Date	19-Feb-22	21-Aug-23
Collection Time	09:15	07:56
Accession	050-03646	233-03237
Glucose	5.7 H	5.8 H

All tests on this request have been completed

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Your Reference: Lab Reference: 23-233-03236#END-YU3
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
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DR CRISTINA BOLATON

Name of Test: Endocrinology: Thyroid Stimulating Hormone
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
10:58

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 21/08/2023 10:58

Clinical Notes
Please refer to clinical notes

Endocrinology

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
* TSH	5.50 H	[0.50-4.50]	mIU/L

		----- Latest
Collection Date	19-Feb-22	21-Aug-23
Collection Time	09:15	07:54
Accession	050-03646	233-03236
TSH	2.97	5.50 H

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 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#CHE-YQ9
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
 Copy to:
 DR CRISTINA BOLATON

Name of Test: Chemistry: Ca Ion Calc, ECU LFT CAL PHO URA GL, eGFR
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
 10:59

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 21/08/2023 10:59

Clinical Notes
 Please refer to clinical notes

General Chemistry

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
Sodium	138	[135-145]	mmol/L
Potassium	3.6	[3.5-5.2]	mmol/L
Chloride	98	[95-110]	mmol/L
Bicarbonate	29	[22-32]	mmol/L
Anion Gap	15	[7-17]	mmol/L
* Glucose	6.2 H	[3.2-5.5]	mmol/L
Urea	6.3	[2.7-8.0]	mmol/L
Creatinine	59	[45-90]	umol/L
Estimated Glomerular Filtration Rate	>90	[>=60]	mL/min/1.73m2
* Urate	0.35 H	[0.14-0.34]	mmol/L
Calcium	2.40	[2.10-2.60]	mmol/L
Ionised Calcium	1.19	[1.10-1.30]	mmol/L
Calculated Phosphate	1.18	[0.75-1.50]	mmol/L
Albumin	41	[34-48]	g/L
Globulin	34	[21-41]	g/L
Total Protein	75	[60-80]	g/L
Total Bilirubin	12	[2-24]	umol/L
Gamma Glutamyl Transferase	16	[0-60]	U/L
Alkaline Phosphatase	78	[30-110]	U/L
Alanine Aminotransferase	20	[0-55]	U/L
Aspartate Aminotransferase	19	[0-45]	U/L
Lactate Dehydrogenase	179	[120-250]	U/L

			----- Latest
Collection Date	19-Feb-22	18-Feb-23	21-Aug-23
Collection Time	09:15	08:25	07:54
Accession	050-03646	049-03409	233-03236
Sodium	140	141	138

Potassium	3.9	4.4		3.6
Chloride	101	103		98
Bicarbonate	28	28		29
Anion Gap	15	14		15
Glucose	5.7 H	-		6.2 H
Urea	4.0	5.2		6.3
Creatinine	60	56		59
eGFR	>90	>90		>90
Urate	-	-		0.35 H
Calcium	2.36	-		2.40
Ionised Ca Calc	1.20	-		1.19
Phosphate	1.10	-		1.18
Albumin	39	-		41
Globulin	32	-		34
Total Protein	71	-		75
Total Bilirubin	10	-		12
GGT	21	-		16
ALP	87	-		78
ALT	28	-		20
AST	18	-		19
LDH	200	-		179

This request has other tests in progress at the time of reporting.

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Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03236#BAF-EV4
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to:
DR CRISTINA BOLATON

Name of Test: B12 and Folate: Vitamin B12, Folate
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
11:56

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 21/08/2023 11:56

Clinical Notes
Please refer to clinical notes

B12 and Folate

Collection Date	21-Aug-23			
Collection Time	07:54	Reference	Units	
Fasting	Yes			
Serum Folate	27.0 [1]	[6.0-45.0]	nmol/L	
Vitamin B12	362	[>=260]	pmol/L	

[1] Please note that the serum folate reference interval is only valid for overnight fasting specimens.

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 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#HAA-CS5
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
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 DR CRISTINA BOLATON

Name of Test: Haemoglobin Alc
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
 12:09

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 21/08/2023 12:09

Clinical Notes
 Please refer to clinical notes

Haemoglobin Alc

Collection Date	21-Aug-23	Reference	Units
Collection Time	07:54		
HbA1c	37 [1]		mmol/mol
HbA1c %	5.5 [2]	[<=7.0]	%
HbA1c Comment	Comment.		

- [1] Misleading low HbA1c levels may occur in: anaemia, B12 & folate deficiency, recent transfusion, haemoglobinopathies, haemolysis or any chronic disease with reduced red cell survival including chronic liver disease and chronic kidney disease.
- [2] If screening for DM: Diabetes unlikely. Recommend re-test in 12 months. If monitoring DM: Increased risk of hypoglycaemia if on insulin/sulfonylureas.
 HbA1c analysis is performed on whole blood.

	19-Feb-22	18-Feb-23	Latest
Collection Date	19-Feb-22	18-Feb-23	21-Aug-23
Collection Time	09:15	08:25	07:54
Accession	050-03646	049-03409	233-03236
HbA1c	39	39	37
HbA1c %	5.7	5.7	5.5

This request has other tests in progress at the time of reporting.

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 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#END-YU3
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
 Copy to: DR CRISTINA BOLATON

Name of Test: Endocrinology: Thyroxine Free
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
 12:57

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 21/08/2023 12:57

Clinical Notes
 Please refer to clinical notes

Endocrinology

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
* TSH	5.50 H	[0.50-4.50]	mIU/L
Free T4	16	[10-20]	pmol/L

		----- Latest
Collection Date	19-Feb-22	21-Aug-23
Collection Time	09:15	07:54
Accession	050-03646	233-03236
TSH	2.97	5.50 H
Free T4	18	16

This request has other tests in progress at the time of reporting.

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 For enquiries phone 8222 3000

NATA: 2348

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 14 NANNIGAI DR, HALLETT COVE. 5158
 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#CHE-YQ9
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
 Copy to:
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Name of Test: Chemistry: Homocysteine
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 21/08/2023
 13:32

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 21/08/2023 13:32

Clinical Notes
 Please refer to clinical notes

General Chemistry

Collection Date	21-Aug-23	Reference	Units
Collection Time	07:54		
Fasting	Yes		
Sodium	138	[135-145]	mmol/L
Potassium	3.6	[3.5-5.2]	mmol/L
Chloride	98	[95-110]	mmol/L
Bicarbonate	29	[22-32]	mmol/L
Anion Gap	15	[7-17]	mmol/L
* Glucose	6.2 H	[3.2-5.5]	mmol/L
Urea	6.3	[2.7-8.0]	mmol/L
Creatinine	59	[45-90]	umol/L
Estimated Glomerular Filtration Rate	>90	[>=60]	mL/min/1.73m2
* Urate	0.35 H	[0.14-0.34]	mmol/L
Calcium	2.40	[2.10-2.60]	mmol/L
Ionised Calcium	1.19	[1.10-1.30]	mmol/L
Calculated			
Phosphate	1.18	[0.75-1.50]	mmol/L
Albumin	41	[34-48]	g/L
Globulin	34	[21-41]	g/L
Total Protein	75	[60-80]	g/L
Total Bilirubin	12	[2-24]	umol/L
Gamma Glutamyl Transferase	16	[0-60]	U/L
Alkaline Phosphatase	78	[30-110]	U/L
Alanine Aminotransferase	20	[0-55]	U/L
Aspartate Aminotransferase	19	[0-45]	U/L
Lactate Dehydrogenase	179	[120-250]	U/L
Homocysteine	12	[4-14]	umol/L

	19-Feb-22	18-Feb-23	21-Aug-23
Collection Date	19-Feb-22	18-Feb-23	21-Aug-23
Collection Time	09:15	08:25	07:54
Accession	050-03646	049-03409	233-03236

Sodium	140	141	138
Potassium	3.9	4.4	3.6
Chloride	101	103	98
Bicarbonate	28	28	29
Anion Gap	15	14	15
Glucose	5.7 H	-	6.2 H
Urea	4.0	5.2	6.3
Creatinine	60	56	59
eGFR	>90	>90	>90
Urate	-	-	0.35 H
Calcium	2.36	-	2.40
Ionised Ca Calc	1.20	-	1.19
Phosphate	1.10	-	1.18
Albumin	39	-	41
Globulin	32	-	34
Total Protein	71	-	75
Total Bilirubin	10	-	12
GGT	21	-	16
ALP	87	-	78
ALT	28	-	20
AST	18	-	19
LDH	200	-	179

This request has other tests in progress at the time of reporting.

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Haematology on whole blood.

Legend: C=Critical, H=High, L=Low, A=Abnormal
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NATA: 2348

BENTON, JENNY
14 NANNIGAI DR, HALLETT COVE. 5158
Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03236#VIT-SL8
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to:
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Name of Test: Vitamins: Vitamin D
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 22/08/2023
08:51

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 22/08/2023 08:51

Clinical Notes
Please refer to clinical notes

Vitamins

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
25-hydroxy Vitamin D3 nmol/L	85	[60-160]	

This request has other tests in progress at the time of reporting.

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NATA: 2348

BENTON, JENNY
14 NANNIGAI DR, HALLETT COVE. 5158
Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03236#AUT-YB2
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to:
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Name of Test: Autoimmunity: Neutrophil Cytoplasmic Antibody
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 23/08/2023
12:39

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 23/08/2023 12:39

Clinical Notes
Please refer to clinical notes

Autoimmunity

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
Neutrophil Cytoplasmic Ab Screen	Negative		
Neutrophil Cytoplasmic Ab Comment	Comment	[1]	

[1] A negative ANCA makes a new diagnosis of granulomatous polyangiitis or microscopic polyangiitis less likely. This result may occur in patients with treated, inactive granulomatous polyangiitis, microscopic polyangiitis (and its renal limited variant) and eosinophilic polyangiitis. Some cases of limited granulomatous polyangiitis may also be ANCA negative.

This request has other tests in progress at the time of reporting.

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 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#AUT-YB2
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
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Name of Test: Autoimmunity: Extractable Nuclear Antigen Antibody,
 Extractable Nuclear Antigen ...
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 24/08/2023
 17:16

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 24/08/2023 17:16

Clinical Notes
 Please refer to clinical notes

Autoimmunity

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
Anti Nuclear Ab Screen	Negative		
Anti Nuclear Ab Comment	Comment	[1]	
Extractable Nuclear	Negative		
Antigen Ab			
Extractable Nuclear	Comment	[2]	
Antigen Comment			
RNP Ab	Negative		
SM Ab	Negative		
SSA/Ro60 Ab	Negative		
SSA/Ro52 Ab	Negative		
SSB/La Ab	Negative		
SCL 70 Ab	Negative		
PM-Scl Ab	Negative		
Jo-1	Negative		
Centro B Ab	Negative		
PCNA Ab	Negative		
Nucleosomes Ab	Negative		
Ribo P Ab	Negative		
AMA-M2 Ab	Negative		
DFS-70 Ab	Negative		
ENA Immunoblot Comment	Comment	[3]	
Neutrophil Cytoplasmic	Negative		
Ab Screen			
Neutrophil Cytoplasmic	Comment	[4]	
Ab Comment			

- [1] A negative ANA makes the diagnosis of systemic rheumatic disease, including systemic lupus erythematosus, unlikely.
- [2] A negative ENA in isolation cannot exclude the diagnosis of SLE or other rheumatic conditions. Results need to be interpreted in context with clinical presentation and associated laboratory tests.
 The ENA screen uses crude antigen extracts which contain the antigens: SSA,

- SSB, Sm, RNP, Topoisomerase and Jo-1.
- [3] A negative ENA in isolation cannot exclude the diagnosis of SLE or other rheumatic conditions. Results need to be interpreted in context with clinical presentation and associated laboratory tests.
Assay platform: Euroimmun Lineblot platform: ANA profile 3 plus DFS.
Please contact the Immunopathologist/Scientist at FMC (08 8204 4295) for further information.
- [4] A negative ANCA makes a new diagnosis of granulomatous polyangiitis or microscopic polyangiitis less likely. This result may occur in patients with treated, inactive granulomatous polyangiitis, microscopic polyangiitis (and its renal limited variant) and eosinophilic polyangiitis. Some cases of limited granulomatous polyangiitis may also be ANCA negative.

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 Phone: 83877642
 Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
 Your Reference: Lab Reference: 23-233-03236#AUT-YB2
 Laboratory: SA Pathology
 Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
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Name of Test: Autoimmunity: DNA Double Stranded Antibody
 Requested: 21/08/2023 Collected: 21/08/2023 Reported: 25/08/2023
 17:10

SA Pathology Accession No : 23-233-03236
 Referred By : DR KARYN BOUNDY
 Report Generated: 25/08/2023 17:10

Clinical Notes
 Please refer to clinical notes

Autoimmunity

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
Anti Nuclear Ab Screen	Negative		
Anti Nuclear Ab Comment	Comment [1]		
DNA Double Stranded Ab	<8.0	[<=8.0]	IU/mL
DNA Double Stranded Ab Comment	Comment [2]		
Extractable Nuclear Antigen Ab	Negative		
Extractable Nuclear Antigen Comment	Comment [3]		
RNP Ab	Negative		
SM Ab	Negative		
SSA/Ro60 Ab	Negative		
SSA/Ro52 Ab	Negative		
SSB/La Ab	Negative		
SCL 70 Ab	Negative		
PM-Scl Ab	Negative		
Jo-1	Negative		
Centro B Ab	Negative		
PCNA Ab	Negative		
Nucleosomes Ab	Negative		
Ribo P Ab	Negative		
AMA-M2 Ab	Negative		
DFS-70 Ab	Negative		
ENA Immunoblot Comment	Comment [4]		
Neutrophil Cytoplasmic Ab Screen	Negative		
Neutrophil Cytoplasmic Ab Comment	Comment [5]		

- [1] A negative ANA makes the diagnosis of systemic rheumatic disease, including systemic lupus erythematosus, unlikely.
 [2] A negative anti dsDNA result cannot exclude the diagnosis of SLE. Results should be interpreted in conjunction with other clinical and laboratory

finding.

- [3] A negative ENA in isolation cannot exclude the diagnosis of SLE or other rheumatic conditions. Results need to be interpreted in context with clinical presentation and associated laboratory tests. The ENA screen uses crude antigen extracts which contain the antigens: SSA, SSB, Sm, RNP, Topoisomerase and Jo-1.
- [4] A negative ENA in isolation cannot exclude the diagnosis of SLE or other rheumatic conditions. Results need to be interpreted in context with clinical presentation and associated laboratory tests. Assay platform: Euroimmun Lineblot platform: ANA profile 3 plus DFS. Please contact the Immunopathologist/Scientist at FMC (08 8204 4295) for further information.
- [5] A negative ANCA makes a new diagnosis of granulomatous polyangiitis or microscopic polyangiitis less likely. This result may occur in patients with treated, inactive granulomatous polyangiitis, microscopic polyangiitis (and its renal limited variant) and eosinophilic polyangiitis. Some cases of limited granulomatous polyangiitis may also be ANCA negative.

This request has other tests in progress at the time of reporting.

Copy To: DR CRISTINA BOLATON

Unless specified, testing has been performed on serum/plasma, general
Haematology on whole blood.
Legend: C=Critical, H=High, L=Low, A=Abnormal
For enquiries phone 8222 3000

NATA: 2348

BENTON, JENNY
14 NANNIGAI DR, HALLETT COVE. 5158
Phone: 83877642
Birthdate: 15/10/1968 Sex: F Medicare Number: 50971461531
Your Reference: Lab Reference: 23-233-03236#VIT-SL8
Laboratory: SA Pathology
Addressee: DR CRISTINA BOLATON Referred by: DR KARYN BOUNDY
Copy to:
DR CRISTINA BOLATON

Name of Test: Vitamins: Vitamin B6, Thiamine
Requested: 21/08/2023 Collected: 21/08/2023 Reported: 28/08/2023
11:12

SA Pathology Accession No : 23-233-03236
Referred By : DR KARYN BOUNDY
Report Generated: 28/08/2023 11:12

Clinical Notes
Please refer to clinical notes

Vitamins

Collection Date	21-Aug-23		
Collection Time	07:54	Reference	Units
* Erythrocyte Thiamine Pyrophosphate nmol/L	202 H [1]	[70-200]	
* Vitamin B6 nmol/L	182 H [1]	[35-110]	
25-hydroxy Vitamin D3 nmol/L	85	[60-160]	

[1] On 01 Aug 2022, the measurement technology changed from HPLC to LCMSMS. No change in reference intervals was required.

All tests on this request have been completed

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