LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-GHB-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: HBA1C (GLYCATED HB)
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 10:58

BLOOD HAEMOGLOBIN A 1c

Date	Lab.No.	HBA1C %	HbA1c mmol/mol
09/08/24	32153412	4.8	29

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 : THA*, GS*, TFT*, VID*, GHB, FES*, RT3*, IOU*, PPH*, MBI*, LIP*, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-PPH-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: PARATHYROID HORMONE
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 21:51

PARATHYROID HORMONE (INTACT)

		Ref.Range
Plasma Parathyroid Hormone (Intact) :	6.5 pmol/L	(2.0-8.5)

Note: PTH results should be interpreted with caution in patients taking high-dose biotin therapy due to possible interference with this test.

Requested Tests : THA, GS, TFT, VID, GHB, FES, RT3*, IOU*, PPH, MBI, LIP, INS, HOC, FBE, CRS, BFO

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767

Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-INS-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: INSULIN (SERUM)
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 16:23

SERUM INSULIN

Collection time: 1:15 pm

Insulin: **2** mIU/L

Note: Normal fasting serum insulin is between 3 and 25 mIU/L.

Requested Tests : THA*, GS, TFT*, VID, GHB, FES, RT3*, IOU*, PPH*, MBI, LIP, INS, HOC, FBE, CRS, BFO

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-THA-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: THYROID ANTIBODIES
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 16:43

SERUM THYROID ANTIBODIES

			Ref. Range
Anti-Thyroid Peroxidase :	32	IU/mL	(< 60)
Anti-Thyroglobulin :	< 1.3	IU/mL	(< 4.5)

Anti-thyroid peroxidase and thyroglobulin antibodies are markers of autoimmune thyroid disease (Hashimoto's disease and Graves' disease) although they may be detected in many healthy people as well. Treatment should be guided by symptoms and thyroid function tests rather than by antibody concentrations.

If you require further information please contact a Chemical Pathologist.

Method: Siemens Immunoassay

Note: The Siemens anti-thyroglobulin (aTg) results have changed from 13/09/2021 because of re-standardisation. The units and reference interval are different and results should not be compared with those from before 13/09/2021.

Requested Tests : THA, GS, TFT*, VID, GHB, FES, RT3*, IOU*, PPH*, MBI, LIP,

INS, HOC, FBE, CRS, BFO

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-TFT-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: THYROID FUNCTION TEST
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 16:46

THYROID FUNCTION TESTS (SERUM)

			Ref.Range
Free Thyroxine (Free T4)	:	18.0 pmol/L	(10.0-23.0)
Thyroid Stimulating Hormone (TSH)	:	0.93 mIU/L	(0.50-4.00)
Free Triiodothyronine (Free T3)	:	3.8 pmol/L	(3.5-6.5)

Thyroid function is now normal.
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

Note: Free T4 results should be interpreted with caution in patients taking high-dose biotin therapy due to possible interference with this test.

Requested Tests : THA, GS, TFT, VID, GHB, FES, RT3*, IOU*, PPH*, MBI, LIP, INS, HOC, FBE, CRS, BFO

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-VID-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: 25 HYDROXY VITAMIN D
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 14:52

SERUM 25 - HYDROXY VITAMIN D

Date	Lab. No.	25 - Hydroxy Vitamin D (nmol/L)	Ref.Range (> 50)

09/08/24 32153412 108

Method: DiaSorin Liaison XL immunoassay. Note that this test cannot be used to monitor patients taking exclusively 1,25 dihydroxy Vitamin D (Calcitriol).

Requested Tests : THA*, GS*, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI*, LIP*, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-GS-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: GLUCOSE SERUM SPECIMEN
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:19

SERUM GLUCOSE

Fasting Status	Specimen	Result	Ref.Range	
Fasting	1:15 PM	**3.6** mmol/L	(4.0-6.0)	*

Note (1): Glucose reference ranges: Fasting 4.0-6.0, Random 4.0-7.8. Consider further investigation including glucose tolerance test in people with fasting glucose 5.5-6.9 or random 7.8-11.0 mmol/L

Pregnancy(gestational diabetes screening): Normal fasting < 5.1 mmol/L

Requested Tests : THA*, GS, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-MBI-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: GENERAL BIOCHEMISTRY
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:19

SERUM/PLASMA BIOCHEMISTRY

		Ref.Range	
Sodium :	140 mmol/L	(135-145)	
Potassium :	3.5 mmol/L	(3.5-5.2)	
Chloride :	107 mmol/L	(95-110)	
Bicarbonate :	22 mmol/L	(22-32)	
Urea :	4.9 mmol/L	(2.3-7.6)	
Est.GFR(mL/min) :	> 90 per 1.73sqm	(> 60)	
Creatinine :	58 umol/L	(40-90)	

Total Bilirubin :	18	umol/L	(< 20)
Ala. Aminotransferase (ALT) :	14	U/L	(< 30)
Asp. Aminotransferase (AST) :	16	U/L	(< 30)
Alkaline Phosphatase (ALP) :	48	U/L	(30-110)
Gamma Glutamyl Trans. (GGT) :	9	U/L	(< 35)
Total Protein :	66	g/L	(60-80)
Albumin :	39	g/L	(36-49)
Globulin :	27	g/L	(22-40)
Calcium :	2.18	mmol/L	(2.15-2.65)
Cor. Calcium :	2.20	mmol/L	(2.15-2.65)

Requested Tests : THA*, GS, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-LIP-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: LIPID STUDIES
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:19

SERUM/PLASMA LIPID STUDIES - Fasting

Total Chol:	3.1	mmol/L
Triglyceride:	0.7	mmol/L
HDL - C:	1.2	mmol/L
LDL - C:	1.6	mmol/L
NON HDL - C:	1.9	mmol/L
Chol/HDL Ratio:	2.6	

Therapeutic targets vary depending on the patient's cardiovascular risk profile.

	T.Chol	Trig	HDL-C	LDL-C	Non HDL-C
Primary Prevention:	<4.0	<2.0	>=1.0	<2.0	<2.5
Secondary Prevention:		<2.0	>=1.0	<1.8	<2.5

National Vascular Disease Prevention Alliance Guidelines 2012.
http://strokefoundation.com.au

National Heart Foundation Guidelines 2012.
http://www.heartfoundation.org.au

Note: The Chol/HDL ratio reflects changes in VLDL, LDL and HDL, with high values indicating an increased risk of atherosclerosis.
Target values < 3.5 are sometimes recommended for people with known vascular disease or others at high risk.
Target LDL is less than 2.0 mmol/L in people with
- A personal or strong family history of vascular disease
- Diabetes
- Aboriginal or Torres Strait Islander ancestry

Requested Tests : THA*, GS, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-CRS-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: ULTRASENSITIVE CRP
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:49

Ultrasensitive C-Reactive Protein : **22.13** mg/L (< 2.00) ***

Method: Siemens Immunoassay
Small increases in CRS may be seen with atherosclerosis. Values over 10mg/L usually indicate acute inflammation.

Requested Tests : THA*, GS, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC, FBE, CRS, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-HOC-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: HOMOCYSTEINE PLASMA
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:50

PLASMA HOMOCYSTEINE

			Ref.Range
Plasma Homocysteine :	9.3	umol/L	(3.7-13.9)

Method: Siemens Immunoassay

Requested Tests : THA*, GS, TFT*, VID, GHB, FES*, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC, FBE, CRS, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-FES-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: IRON STUDIES
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:51

SERUM IRON-STUDIES

	Date:	**06/08/18**	**15/02/22**	**11/01/23**	**09/08/24**		
	Time:	**13:35**	**10:17**	**09:02**	**13:15**		
	Lab.No:	**38572672**	**37666823**	**41518250**	**32153412**		
						Units	**Ref. Range**
Ferritin:		48	141	72	166	ug/L	(30-300)
Iron:		8		12	**4**	umol/L	(7-27)
Transferrin:		2.3		2.2	2.2	g/L	(2.0-3.6)
Transferrin Sat:		14		22	**7**	%	(13-47)

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

Method: Siemens Immunoassay

Requested Tests : THA*, GS, TFT*, VID, GHB, FES, RT3*, IOU*, PPH*, MBI, LIP, INS*, HOC, FBE, CRS, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-BFO-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: B12,FOLATE
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 15:55

SERUM VITAMIN B12 AND FOLATE

	Date:	**28/04/17**	**11/01/23**	**09/08/24**		
	Time:	**10:55**	**09:02**	**13:15**		
	Lab.No:	**31144051**	**41518250**	**32153412**		
					Units	**Ref. Range**
Vitamin B12 :		215	478	488	pmol/L	(150-700)
Holotranscobalamin :		85			pmol/L	(> 27)

Vitamin B12 stores appear adequate.

Vitamin B12 method: Siemens Immunoassay

Requested Tests : THA*, GS, TFT*, VID, GHB, FES, RT3*, IOU*, PPH*, MBI, LIP,

INS*, HOC, FBE, CRS, BFO

LEE, KERRYN
24 HILL TOP RD, UPPER FERNTREE GULLY. 3156
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-FBE-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: FULL BLOOD EXAMINATION
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 10/08/2024 00:15

FULL BLOOD EXAMINATION

					(x10^9 /L)
HB :	142 g/L	(115-165)	WHITE CELL COUNT:	4.0	(4.0-11.0)
PCV:	0.42 L/L	(0.37-0.47)	Neutrophils: 67%	2.7	(2.0-8.0)
RCC:	4.50 x10^12 /L	(3.80-5.80)	Lymphocytes: 22%	**0.9**	(1.0-4.0)
MCV:	92 fL	(80-96)	Monocytes : 7%	0.3	(0.0-1.0)
MCH:	32 pg	(27-32)	Eosinophils: 3%	0.1	(0.0-0.5)
MCHC	342 g/L	(320-360)	Basophils : 1%	0.0	(0.0-0.2)
RDW:	12.3 %	(11.0-16.0)			
			PLATELETS :	154	(150-450)

COMMENT: No significant abnormality.

Requested Tests : THA*, GS*, TFT*, VID*, GHB*, FES*, RT3*, IOU*, PPH*, MBI*, LIP*, INS*, HOC*, FBE, CRS*, BFO*

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-IOU-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: IODINE (URINE)
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 13/08/2024 15:11

URINE IODINE TEST

			(RI)	BOEL
Total Volume	Random			
Urine Creatinine (SI)	2.8	mmol/L		N/A
Urine Iodine (ug/L)	35	ug/L		N/A
Urine Iodine (Crt corrected)	107	ug/L	(> 100)	

WHO Criteria for assessing median Urinary Iodine Excretion results in populations:
- No deficiency : > 100 ug/L

- Mild Iodine deficiency : 50-99 ug/L
- Moderate Iodine deficiency : 20-49 ug/L
- Severe Iodine deficiency : < 20 ug/L

For Pregnant women
- Insufficient Iodine intake : < 150 ug/L
- Adequate Iodine intake : 150-249 ug/L
- Iodine intake above requirement : 250-499 ug/L
- Excessive Iodine intake : >= 500 ug/L

For Lactating women
- Adequate Iodine intake : >= 100 ug/L

Urine iodine (creatinine corrected) adjusts the measured result to account for changes in urine concentration. Please note: due to a high variability of an individual's urinary iodine concentration, spot urine iodine concentration is not useful for the diagnosis and treatment of individuals. For more detail refer to:
"https://apps.who.int/iris/bitstream/handle/10665/85972/WHO_NMH_NHD_EG_13.1_eng.pdf"

BOEL = Biological Occupational Exposure Limit

RI = Reference Interval

Requested Tests : THA, GS, TFT, VID, GHB, FES, RT3*, IOU, PPH, MBI, LIP, INS, HOC, FBE, CRS, BFO

LEE, KERRYN
6 FAIRHAVEN RD, MOUNT DANDENONG. 3767
Phone: 0402902983
Birthdate: 02/09/1983 **Sex:** F **Medicare Number:** 33697726181
Your Reference: **Lab Reference:** 24-32153412-RT3-0
Laboratory: DOREVITCH PATHOLOGY
Addressee: DR VARGHESE ZACHARIAH **Referred by:** DR VARGHESE ZACHARIAH

Name of Test: REVERSE T3
Requested: 09/08/2024 **Collected:** 09/08/2024 **Reported:** 16/08/2024 13:48

+	Serum Reverse T3 (RT3)	**697**	pmol/L	(170-539)

Requested Tests : THA, GS, TFT, VID, GHB, FES, RT3, IOU, PPH, MBI, LIP, INS, HOC, FBE, CRS, BFO