

Patient Name: SUBRAHMANYAM, NARAYANASWAMY NARAYANASWAMY
Patient Address: 20 BIRKENHEAD AVE, WANTIRNA 3152
D.O.B: 11/02/1948 **Sex at Birth:** M
Medicare No.: 32549846571 **IHI No.:**
Lab. Reference: 24-32241586-BFO-0 **Provider:** DOREVITCH PATHOLOGY
Addressee: DR REIHANEH NIKROU **Referred by:** DR. REIHANEH NIKROU
Date Requested: 9/09/2024 **Date Performed:** 14/09/2024
Date Collected: 14/09/2024 **Complete:** Final
Specimen:
Subject(Test Name): B12,FOLATE
Clinical Information:

SERUM VITAMIN B12 AND FOLATE

Date: 09/02/16 14/09/24
Time: 12:30 08:25
Lab.No: 45359744 32241586

			Ref.
			Units Range
Vitamin B12	:	152	pmol/L (150-700)
Holotranscobalamin	:	30 > 146	pmol/L (> 27)
Serum Folate	:	30.7	nmol/L (> 9.0)

Comment:
No vitamin B12 deficiency.

Please note that as of 18/10/2021, Dorevitch changed to the Atellica analyser for Active B12 testing. Comparison studies have shown good agreement between the methods and the reference intervals have not changed. If further information is required, please contact a Chemical Pathologist on 9244 0444.

Method: Siemens Immunoassay

Note: Serum folate concentration may be falsely increased in people taking biotin supplements. Unless medical contraindicated, supplements should be withheld at least one week before testing.

Requested Tests : GS, UMA*, TFT, PSE, GHB, FES*, MBI, LIP, FBE, BFO

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Lab. Reference: 24-32241586-FBE-0 **Provider:** DOREVITCH PATHOLOGY
Addressee: DR REIHANEH NIKROU **Referred by:** DR. REIHANEH NIKROU

Date Requested: 9/09/2024 **Date Performed:** 14/09/2024
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Specimen:
Subject(Test Name): FULL BLOOD EXAMINATION
Clinical Information:

FULL BLOOD EXAMINATION

* HB : 129 g/L	(130-180)	WHITE CELL COUNT:	4.6 (x10 ⁹ /L)	(4.0-11.0)
PCV: 0.39 L/L	(0.40-0.54)	Neutrophils:	61%	2.8 (2.0-8.0)
RCC: 4.28 x10 ¹²	/L (4.50-6.50)	Lymphocytes:	25%	1.1 (1.0-4.0)
MCV: 90 fL	(80-96)	Monocytes :	9%	0.4 (0.0-1.0)
MCH: 30 pg	(27-32)	Eosinophils:	4%	0.2 (0.0-0.5)
MCHC 334 g/L	(320-360)	Basophils :	1%	0.0 (0.0-0.2)
RDW: 12.9 %	(11.0-16.0)			
		PLATELETS	:	288 (150-450)

COMMENT: Borderline low haemoglobin.

Requested Tests : GS*, UMA*, TFT*, PSE*, GHb*, FES*, MBI*, LIP*, FBE, BFO*

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D.O.B: 11/02/1948 **Sex at Birth:** M
Medicare No.: 32549846571 **IHI No.:**
Lab. Reference: 24-32241586-MBI-0 **Provider:** DOREVITCH PATHOLOGY
Addressee: DR REIHANEH NIKROU **Referred by:** DR. REIHANEH NIKROU
Date Requested: 9/09/2024 **Date Performed:** 14/09/2024
Date Collected: 14/09/2024 **Complete:** Final
Specimen:
Subject(Test Name): GENERAL BIOCHEMISTRY
Clinical Information:

SERUM/PLASMA BIOCHEMISTRY

Ref.Range

Sodium :	137 mmol/L	(135-145)
Potassium :	5.2 mmol/L	(3.5-5.2)
Chloride :	102 mmol/L	(95-110)
Bicarbonate :	30 mmol/L	(22-32)
Urea :	6.0 mmol/L	(3.0-10.0)
Est.GFR(mL/min) :	63 per 1.73sqm	(> 60)
Creatinine :	99 umol/L	(60-110)
Total Bilirubin :	9 umol/L	(< 20)
Ala. Aminotransferase (ALT) :	12 U/L	(< 35)
Asp. Aminotransferase (AST) :	19 U/L	(< 35)
Alkaline Phosphatase (ALP) :	63 U/L	(30-110)
Gamma Glutamyl Trans. (GGT) :	36 U/L	(< 50)
Total Protein :	71 g/L	(60-80)
Albumin :	40 g/L	(34-47)
Globulin :	31 g/L	(22-40)

Requested Tests : GS, UMA*, TFT*, PSE*, GHB, FES*, MBI, LIP, FBE, BFO*

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Medicare No.: 32549846571
Lab. Reference: 24-32241586-GS-0
Addressee: DR REIHANEH NIKROU
Sex at Birth: M
IHI No.:
Provider: DOREVITCH PATHOLOGY
Referred by: DR. REIHANEH NIKROU
Date Requested: 9/09/2024
Date Collected: 14/09/2024
Specimen:
Subject(Test Name): GLUCOSE SERUM SPECIMEN
Clinical Information:

	SERUM	GLUCOSE	
Fasting Status	Specimen	Result	Ref.Range
Fasting	8:25 AM	5.4 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

Requested Tests : GS, UMA*, TFT*, PSE*, GHB, FES*, MBI*, LIP, FBE, BFO*

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Medicare No.: 32549846571
Lab. Reference: 24-32241586-GHB-0
Addressee: DR REIHANEH NIKROU
Sex at Birth: M
IHI No.:
Provider: DOREVITCH PATHOLOGY
Referred by: DR. REIHANEH NIKROU
Date Requested: 9/09/2024
Date Collected: 14/09/2024
Specimen:
Subject(Test Name): HBA1C (GLYCATED HB)
Clinical Information:

BLOOD HAEMOGLOBIN A 1c

Date	Lab.No.	HBA1C %	HbA1c mmol/mol
14/09/24	32241586	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 : GS*, UMA*, TFT*, PSE*, GHB, FES*, MBI*, LIP*, FBE, BFO*

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Medicare No.: 32549846571
Lab. Reference: 24-32241586-FES-0
Addressee: DR REIHANEH NIKROU
Sex at Birth: M
IHI No.:
Provider: DOREVITCH PATHOLOGY
Referred by: DR. REIHANEH NIKROU
Date Requested: 9/09/2024
Date Collected: 14/09/2024
Specimen:
Subject(Test Name): IRON STUDIES
Clinical Information:

SERUM IRON-STUDIES

Date:14/09/24
Time:08:25
Lab.No:32241586

		Units	Ref. Range
Ferritin:	78	ug/L	(30-320)
Iron:	16	umol/L	(10-30)
Transferrin:	2.9	g/L	(2.0-3.6)
Transferrin Sat:	22	%	(13-47)

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

Method: Siemens Immunoassay

Requested Tests : GS, UMA*, TFT, PSE, GHB, FES, MBI, LIP, FBE, BFO

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Medicare No.:	32549846571	IHI No.:	
Lab. Reference:	24-32241586-LIP-0	Provider:	DOREVITCH PATHOLOGY
Addressee:	DR REIHANEH NIKROU	Referred by:	DR. REIHANEH NIKROU
Date Requested:	9/09/2024	Date Performed:	14/09/2024
Date Collected:	14/09/2024	Complete:	Final
Specimen:			
Subject(Test Name):	LIPID STUDIES		
Clinical Information:			

SERUM/PLASMA LIPID STUDIES - Fasting

Total Chol:	5.1 mmol/L
Triglyceride:	0.8 mmol/L
HDL - C:	1.5 mmol/L
LDL - C:	3.2 mmol/L
NON HDL - C:	3.6 mmol/L
Chol/HDL Ratio:	3.4

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 : GS, UMA*, TFT*, PSE*, GHB, FES*, MBI*, LIP, FBE, BFO*

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Medicare No.: 32549846571
Lab. Reference: 24-32241586-UMA-0
Addressee: DR REIHANEH NIKROU

Sex at Birth: M
IHI No.:
Provider: DOREVITCH PATHOLOGY
Referred by: DR. REIHANEH NIKROU

Date Requested: 9/09/2024
Date Collected: 14/09/2024

Date Performed: 14/09/2024
Complete: Final

Specimen:
Subject(Test Name): MICROALBUMIN (URINE)
Clinical Information:

URINE MICROALBUMIN

Spot Urine

Albumin Concentration:	< 3	mg/L	Ref.Range (0-25)
Creatinine Concentration:	3.6	mmol/L	
Alb/Creat Ratio (ACR):	< 1.0	mg/mmol creat	(< 2.5)

Requested Tests : GS, UMA, TFT, PSE, GHB, FES, MBI, LIP, FBE, BFO

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Lab. Reference: 24-32241586-PSE-0 **Provider:** DOREVITCH PATHOLOGY
Addressee: DR REIHANEH NIKROU **Referred by:** DR. REIHANEH NIKROU
Date Requested: 9/09/2024 **Date Performed:** 14/09/2024
Date Collected: 14/09/2024 **Complete:** Final
Specimen:
Subject(Test Name): PSA (EQUIMOLAR)
Clinical Information:

Date	Lab. No.	PSA Alinity (ug/L) (0.3-7.5)	Free PSA (Measured) (ug/L)	Free/Total PSA Ratio (%)
14/09/24	32241586	1.9		

For men under 70, if PSA levels are > 3.0 ug/L but < 10 ug/L (or >2 ug/L but < 10 ug/L with a significant family history), confirmatory testing within 1 to 3 months is recommended. Men aged 70 and above, with PSA levels > 5.5 ug/L but < 10 ug/L, should also undergo confirmatory testing within 1 to 3 months. Please note that PSA testing is only recommended for asymptomatic men over 70 if life expectancy is greater than 7 years.

It is important that the same method is used for serial testing because PSA values may differ between methods for different patients.

If interpretive assistance is required please contact a pathologist on (03) 9244 0444 or (03) 9244 0484.

Guidelines regarding PSA testing available at: <https://bit.ly/3SbDay7>

Please note method change of PSA and Free PSA from Siemens Atellica to Abbott Alinity on 18/10/2021. PSA results have increased by approximately 25% with the PSA Alinity method because of calibration differences.

Requested Tests : GS, UMA*, TFT, PSE, GHB, FES*, MBI, LIP, FBE, BFO*

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Lab. Reference: 24-32241586-TFT-0
Addressee: DR REIHANEH NIKROU
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IHI No.:
Provider: DOREVITCH PATHOLOGY
Referred by: DR. REIHANEH NIKROU
Date Requested: 9/09/2024
Date Collected: 14/09/2024
Specimen:
Subject(Test Name): THYROID FUNCTION TEST
Clinical Information:

THYROID FUNCTION TESTS (SERUM)

		Ref.Range
Thyroid Stimulating Hormone (TSH) :	1.52 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, UMA*, TFT, PSE*, GHB, FES*, MBI, LIP, FBE, BFO*