



LABORATORY 20102-2906

 23 Walters Drive
 OSBORNE PARK
 Tel: 08 9442 7444

Referred: 22/09/24

Collected: 02/10/24 06:10

Tested: 02/10/24

Printed: 03/10/24 11:02

Page: 1 of 5

MRS HICKLING, CLAIRE LOUISE

59 Drummond Gardens

HELENA VALLEY 6056

DOB: 16/05/1974 (50)

Ph: 0415915149

UR :

Ref : 00082936

Lab No: 24-22957359

Sex : Female

PATIENT COPY:

HICKLING, CLAIRE LOUISE

59 Drummond Gardens

HELENA VALLEY 6056

BIOCHEMISTRY - THYROID AUTOANTIBODIES - CUMULATIVE**SPECIMEN: SERUM**

Date	Lab Number	aTGII (IU/ml) (< 4.5)	aTPO (U/ml) (< 60)
02/10/24	22957359	< 1.4	38

Key:

aTGII - anti-thyroglobulin antibodies

aTPO - anti-thyroid peroxidase antibodies

Anti-ThyroGlobulin assay (aTGII) is standardised to the WHO International Reference Preparation, Human (NIBSC 65/093) and is performed on the Siemens Centaur/Atellica Immunoassay systems.

Normal thyroid antibodies.

GENERAL CHEMISTRY**SPECIMEN: SERUM**
 Date: 02/10/24
 Coll. Time: 06:10
 Lab Number: 22957359

Calcium	2.57	(2.10 - 2.60) mmol/L
Adj. Ca.	2.58	(2.10 - 2.60) mmol/L
Magnesium	0.79	(0.70 - 1.10) mmol/L
T.Protein	71	(60 - 80) g/L
Albumin	39	(35 - 50) g/L
Globulin	32	(23 - 39) g/L
ALP	47	(30 - 110) U/L
Bilirubin	11	(3 - 20) umol/L
GGT	10	(5 - 35) U/L
AST	20	(5 - 30) U/L
ALT	20	(5 - 35) U/L

22957359 Within reference intervals.

Ref. by DR.RUPINDER SINGH, 4029579T

MRS HICKLING, CLAIRE LOUISE

All Tests Complete



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BIOCHEMISTRY**C REACTIVE PROTEIN (CRP)****SPECIMEN: SERUM**

Date	Time	Lab No.	CRP	Units	Ref. Range
02/10/24	06:10	22957359 *	16.2	mg/L	(< 3.0)

In the setting of infection, CRP levels >100 mg/L are supportive of bacterial rather than viral aetiology.

Note results from this CRP assay should not be used for cardiac risk assessment. Please request the high sensitivity assay (hsCRP) instead.

BIOCHEMISTRY**GLUCOSE**

Date	Time	Lab#	Collection Type	Specimen	Glucose (mmol/L)
02/10/24	06:10	22957359	Fasting	serum	5.4

22957359 Normal fasting glucose.

In view of patient's age suggest review of diabetes risk factors, with annual follow-up testing if required.

Glucose Reference Ranges

Random 3.0 - 6.9 mmol/L

Fasting 3.0 - 5.4 mmol/L

1 Hour post prandial 3.0 - 11.0 mmol/L

2 Hour post prandial 3.0 - 7.7 mmol/L

Specimen Legend:

Fl-ox = Fluoride oxalate, serum = Serum, np = Non-Preserved

ENDOCRINOLOGY**INSULIN STUDIES****SPECIMEN: SERUM**

Date	Time	Lab No.	Insulin	Ref Range	Units
02/10/24	06:10	22957359	6	(See below)	mU/L

Insulin Reference Ranges:

Fasting 2 - 12 mU/L

2hr post prandial 5 - 30 mU/L

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BIOCHEMISTRY**LIPID STUDIES****SPECIMEN: SERUM**
 Date: **02/10/24**
 Coll. Time: 06:10
 Lab Number: 22957359

 Desirable Range
 (Fasting)

Fasting Status	Fasting		
Total Chol.	* 5.7	(< 5.6)	mmol/L
HDL Chol.	* 1.0	(> 1.1)	mmol/L
LDL Chol.	* 4.2	(< 3.1)	mmol/L
Non-HDL Chol.	* 4.7	(< 4.1)	mmol/L
Triglyceride	1.2	(< 2.1)	mmol/L
LDL/HDL Ratio	4.2		
Chol/HDL Ratio	5.7		

22957359 The Heart Foundation of Australia recommend calculation of the absolute cardiovascular risk using the NVDPA's calculator at www.cvdcheck.org.au. LDL-c target depends on the absolute CVD risk. Interpret in conjunction with other cardiovascular risk factors or treatment targets.

Please note, from 27/09/2023, modified lipid reference ranges apply.

Recommended targets for high risk patients are

Total cholesterol < 4.0 mmol/L
 HDL Cholesterol > 1.0 mmol/L
 LDL Cholesterol < 2.5 mmol/L (< 1.8 mmol/L for very high risk)
 Non-HDL Cholesterol < 3.3 mmol/L (< 2.5 mmol/L for very high risk)
 Fasting triglycerides < 2.0 mmol/L

Lipid ranges and targets are from the AACB Guideline for Harmonised Lipid Reporting (2018)

Target values need to be individualised based on clinical assessment of overall risk.

See the AusCVD Risk calculator at www.cvdcheck.org.au

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BIOCHEMISTRY**IRON STUDIES****SPECIMEN: SERUM**
 Date: **02/10/24**
 Coll. Time: 06:10
 Lab Number: 22957359

Iron	17.0	(10.0 - 30.0) umol/L
Transferrin	2.41	(2.10 - 3.80) g/L
Saturation	28	(15 - 45) %
Ferritin *	404	(30 - 300) ug/L

22957359 Elevated CRP noted. Elevated serum ferritin may be seen in inflammation, chronic liver disease, and iron overload.

BIOCHEMISTRY**VITAMIN B12 AND FOLATE****SPECIMEN: SERUM/BLOOD**
 Date: **02/10/24**
 Time: 06:10
 Lab Number: 22957359

Vitamin B12	428	pmol/L
Folate	35.6	nmol/L

22957359 Normal B12 and folate results.

RANGES	B12	Serum Folate
Normal	> 180	> 10.0
Equivocal	150 - 180	5.0 - 10.0
Deficient	< 150	< 5.0

ENDOCRINOLOGY**THYROID FUNCTION TEST****SPECIMEN: SERUM**
 Date: 02/10/24
 Coll. Time: 06:10
 Lab Number: 22957359

TSH	1.11	(0.40 - 4.00) mIU/L
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22957359 Normal TSH level.
 Thyroid antibodies to follow.

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ENDOCRINOLOGY**PARATHYROID HORMONE****SPECIMEN: SERUM**

Date	Req. No.	PTH	Units	Ref. Range
02/10/24	22957359	3.2	pmol/L	(2.0 - 8.5)

22957359 Normal PTH result.
 Vitamin D has been requested.

BIOCHEMISTRY**VITAMIN D****SPECIMEN: SERUM**

Date	Time	Lab No.	25-hydroxy Vitamin D	
02/10/24	06:10	22957359	70	(50 - 200) nmol/L

22957359 Vitamin D is within normal limits.

Interpretation:

Vitamin D deficiency <50 nmol/L

Severe deficiency <20 nmol/L

COMMENT: Vitamin D sufficiency is defined as greater than or equal to 50 nmol/L at the end of winter (level may need to be 10-20 nmol/L higher at the end of summer).

Reference: Position Statement. Vitamin D and Health in Adults in Australia and New Zealand. MJA, 196(11): 686-687, 2012.

Ref. by DR.RUPINDER SINGH, 4029579T

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All Tests Complete

 SURGERY USE: ☐ NORMAL ☐ NO ACTION ☐ CONTACT PATIENT ☐ SEE PATIENT ☐ FURTHER TESTS ☐