

Start Patient : CIRILLO,ANETA
23 POLLOCK ST, CHIFLEY, ACT 2606
Birthdate: 16/02/1986 Age: Y38 Sex: F
Telephone: 0414661271

Your Reference : 891957046928
Lab Reference : 24-26715354
Medicare Number: 2698642161
Phone Enquiries:

Referred By... : DR. ENAS AL SHAHABI
Addressee : DR. ENAS AL SHAHABI 5238695Y
Lab. Reference: 24-26715354-TAA-0
Requested: Sunday, 2 June 2024
Performed: Saturday, 15 June 2024
Test name: THYROID AUTOANTIBODIES (TAA-0)
Provider name: Lavery Pathology

THYROID AUTOANTIBODIES

Specimen Type: Serum

Anti-Thyroglobulin Abs (aTGII)	22	IU/mL	(< 4.5)
Anti-Thyroidal Peroxidase Abs	< 28	IU/mL	(< 60)

Over 90% of patients with autoimmune thyroiditis show moderate to high levels of Anti-Thyroidal Peroxidase Abs (anti-TPO) with Anti-Thyroglobulin Abs (anti-Tg) also present in about 90% of such patients. Up to 75% of patients with Graves' hyperthyroidism show increased anti-TPO with anti-Tg present in 50-60%. Low levels of both anti-TPO and anti-Tg may be found in up to 10% of "normal" asymptomatic adults. In most cases of autoimmune thyroid disease increased anti-TPO is the predominant finding although a small proportion of patients show a predominant increase in anti-Tg.

Please note that as of 08/09/2021, Lavery Pathology changed to a reformulated Atellica anti-thyroglobulin antibody (aTGII) assay. The reference interval has been updated. Differences in individual patient results may be observed compared to the previous method. If further information is required please contact a Chemical Pathologist on 9005 7000.

Requested Tests : TFT, TAA, FE, FBE, DVI

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Referred By... : DR. ENAS AL SHAHABI
Addressee : DR. ENAS AL SHAHABI 5238695Y
Lab. Reference: 24-26715354-FE-0
Requested: Sunday, 2 June 2024
Performed: Saturday, 15 June 2024
Test name: IRON STUDIES (FE-0)
Provider name: Lavery Pathology

IRON STUDIES

Request Number	22118232	26715354
Date Collected	19 Nov 23	15 Jun 24
Time Collected	09:19	08:09
Specimen Type: Serum		
Iron (10-30)	umol/L	11
T'ferrin(32-48)	umol/L	31
T. Sat. (13-45)	%	18
Ferritin(30-165)	ug/L	< 8 15

Although the transferrin saturation is normal, the mildly reduced ferritin suggests iron deficiency.

During the reproductive years, iron deficiency in women is usually due to multiparity or heavy menstrual losses. Investigation of the gastrointestinal tract for a source of blood loss may be indicated.

Requested Tests : TFT, TAA*, FE, FBE, DVI

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Referred By... : DR. ENAS AL SHAHABI  
 Addressee : DR. ENAS AL SHAHABI 5238695Y  
 Lab. Reference: 24-26715354-FBE-0  
 Requested: Sunday, 2 June 2024  
 Performed: Saturday, 15 June 2024  
 Test name: HAEMATOLOGY (FBE-0)  
 Provider name: Lavery Pathology

|                     |                      |                |
|---------------------|----------------------|----------------|
|                     | HAEMATOLOGY          |                |
| Request Number      | 22118232             | 26715354       |
| Date Collected      | 19 Nov 23            | 15 Jun 24      |
| Time Collected      | 09:19                | 08:09          |
| Specimen Type: EDTA |                      |                |
| Hb (115-165)        | g/L                  | 140      129   |
| Hct (0.34-0.47)     |                      | 0.43      0.40 |
| RCC (3.9-5.8)       | x10 <sup>12</sup> /L | 5.0      4.6   |
| MCV (79-99)         | fL                   | 85      85     |
| MCH (27-34)         | pg                   | 28      28     |
| MCHC (320-360)      | g/L                  | 329      326   |
| RDW (10.0-17.0)     | %                    | 13.6      14.0 |

|                |                     |                |
|----------------|---------------------|----------------|
| WBC (4.0-11.0) | x10 <sup>9</sup> /L | 7.5      7.7   |
| Neut (2.0-7.5) | x10 <sup>9</sup> /L | 3.8      3.9   |
| Lymph(1.0-4.0) | x10 <sup>9</sup> /L | 2.9      2.8   |
| Mono (0.2-1.0) | x10 <sup>9</sup> /L | 0.5      0.6   |
| Eos (< 0.7)    | x10 <sup>9</sup> /L | 0.4      0.3   |
| Baso (< 0.2)   | x10 <sup>9</sup> /L | 0.1 <b>0.2</b> |

|                |                     |                |
|----------------|---------------------|----------------|
| Plat (150-400) | x10 <sup>9</sup> /L | 371 <b>423</b> |
|----------------|---------------------|----------------|

CURRENT FILM COMMENT

Red cells : Normal.  
 White cells : Normal.  
 Platelets : Borderline thrombocytosis.

HAEMATOLOGY: Thrombocytosis noted.

Requested Tests : TFT, TAA\*, FE\*, FBE, DVI

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Medicare Number: 2698642161
Phone Enquiries:

Referred By... : DR. ENAS AL SHAHABI
Addressee : DR. ENAS AL SHAHABI 5238695Y
Lab. Reference: 24-26715354-DVI-0
Requested: Sunday, 2 June 2024
Performed: Saturday, 15 June 2024
Test name: VITAMIN D (DVI-0)
Provider name: Lavery Pathology

VITAMIN D

Haemolysis Nil
Serum 25(OH) Vitamin D 64 nmol/L

Suggested decision limits for Vitamin D status:

Sufficiency	51 -200	nmol/L
Mild deficiency	25 - 50	nmol/L
Marked deficiency	< 25	nmol/L
Toxicity	>250	nmol/L

References: Vitamin D and health in adults in Australia and New Zealand:
Position Statement. MJA 2012 June 18; 196(11),686-687.

Requested Tests : TFT, TAA*, FE*, FBE*, DVI

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Lab. Reference: 24-26715354-TFT-0  
Requested: Sunday, 2 June 2024  
Performed: Saturday, 15 June 2024  
Test name: THYROID FUNCTION TEST (TFT-0)  
Provider name: Lavery Pathology

THYROID PROFILE

|                      |           |           |
|----------------------|-----------|-----------|
| Request Number       | 22118232  | 26715354  |
| Date Collected       | 19 Nov 23 | 15 Jun 24 |
| Time Collected       | 09:19     | 08:09     |
| Specimen Type: Serum |           |           |
| TSH (0.5-4.0) mIU/L  | 1.6       | 2.7       |

Result(s) consistent with euthyroidism.

Please note the above reference intervals have been developed from a non-pregnant healthy general population study.

Requested Tests : TFT, TAA\*, FE\*, FBE\*, DVI\*

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