

Lab ID 532563853

DOB 13/11/1996 (28 Yrs FEMALE)

Referrer To Racheal (Patient To Pay) Lee

Your ref.

Address COMPLEMENTARY MEDICINE 6/115 SHINGLEY BEACH DR
SHINGLEY BEACH RESORT
AIRLIE BEACH QLD 4802

Address 240 FRONT STREET
HAMILTON ISLAND QLD 4803

Phone

Phone 0466599210

Copy to

Requested 30/11/2024

Clinical Notes Not Provided

Collected 30/11/2024 08:58

Received 30/11/2024 08:59

Thyroid Function Tests

Test Name	Result	Units	Reference Interval	Comment
Free T4	12.3	pmol/L	9.0 - 19.0	
Free T3	4.5	pmol/L	3.1 - 6.0	
TSH	2.0	mIU/L	0.3 - 3.5	

Comments

Euthyroid.
Please note that the reference intervals for fT3 and fT4 have recently
changed. Please contact the laboratory if you require further information.

EA

SULLIVAN NICOLAIDES PTY LTD. ABN 38 078 202 196. NATA/RCPA ACCREDITATION NO 1964

01-12-2024 15:27