

Lab ID 971913940

DOB 07/08/1977 (47 Yrs FEMALE)

Referrer Dr Srinivas Rao Kesarapu

Your ref.

Address FAMILY MEDICAL CLINIC MOUNTAIN GATE SHOP'NG CTRE
SHOP 26/FERNTREE GULLY RD
FERNTREE GULLY VIC 3156

Address 60 MOUNTAIN VIEW RD
BORONIA VIC 3155

Phone 97588880

Phone 0438842567

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Requested 20/12/2024

Clinical Notes hypothyroid

Collected 30/12/2024 08:55

Received 30/12/2024 08:57

Test Name	Result	Units	Reference Interval	Comment
S Iron:	10	umol/L	5 - 30	
S Transferrin:	3.4	g/L	2.0 - 3.6	
Transferrin Saturation:	12	%	10 - 45	
● S Ferritin:	25 L	ng/mL	30 - 300	LOW

Dept Supervising Pathologist: Dr Andrew Carter

MELBOURNE PATHOLOGY NATA NO.:2133

30-12-2024 18:00

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Test Name	Result	Units	Reference Interval	Comment
● S Cholesterol:	5.9 H	mmol/L	3.5 - 5.5	HIGH
S Triglycerides:	1.0	mmol/L	<1.7	
S HDL-Cholesterol:	1.64	mmol/L	>1.20	
● S LDL-Cholesterol:	3.8 H	mmol/L	<3.5	HIGH
Chol/HDLC	3.6		<4.5	
● Non HDL Cholesterol	4.3 H	mmol/L	<3.9	HIGH

Comments

LIPID TARGET LEVELS:

The treatment target levels for people at high risk of cardiovascular disease are:

Total Cholesterol	<4.0 mmol/L
Fasting Triglycerides	<2.0 mmol/L
HDL-Cholesterol	>1.00 mmol/L
LDL-Cholesterol	<2.5 mmol/L (<1.8 mmol/L if very high risk)
Non-HDL Cholesterol	<3.3 mmol/L (<2.5 mmol/L if very high risk)

Source: AACB Harmonised Lipid Reporting Guideline - 2018.

Risk Calculator available at www.cvdcheck.org.au

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THYROID FUNCTION TESTS

Test Name	Result	Units	Reference Interval	Comment
TSH (Roche)	3.80	mU/L	0.5 - 5.0	
FT4 (Roche)	14.5	pmol/L	11.0 - 22.0	
FT3 (Roche)	4.0	pmol/L	3.1 - 6.4	

Comments

Noted on thyroid hormone replacement.
A normal TSH is consistent with euthyroid status.
Please withhold morning dose before the blood test as it may falsely
elevate free T3/T4 level.

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Test Name	Result	Units	Reference Interval	Comment
25-Hydroxy Vitamin D	74	nmol/L	50 - 250	

Comments

Vitamin D levels should ideally be above 50 nmol/L in winter and 70 nmol/L
in summer. Levels above 75 nmol/L may be desirable in people with
osteoporosis or falls.

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Test Name	Result	Units	Reference Interval	Comment
Holo-transcobalamin:	90	pmol/L	>37	
Total Vitamin B12:	244	pmol/L	200 - 700	

Comments

High dose biotin (>5 mg/day) may artefactually increase total Vitamin B12 and Folate results obtained by this method. If the patient is taking 5-20 mg/day of biotin, suggest withhold for at least 8 hours before blood test (if taking 300 mg/day, withhold for at least 72 hours).
For clinicians requiring assistance with interpreting this report, a Chemical Pathologist or Clinical Scientist will be available during office hours on (03) 9287 7733.

HoloTC (Holo-transcobalamin) is a better marker for Vitamin B12 status than the total B12 and this result indicates a normal Vitamin B12 status. Serum total Vitamin B12 measures both inactive (Haptocorrin-bound) and active (Transcobalamin-bound) fractions. Low total Vitamin B12 can be a result of low Haptocorrin-bound fraction which is of no known clinical significance.

For clinicians requiring assistance with interpreting this report, a Chemical Pathologist or Clinical Scientist will be available during office hours on (03) 9287 7733.

Dept Supervising Pathologist: Dr Andrew Carter

MELBOURNE PATHOLOGY NATA NO.:2133

30-12-2024 18:53

TPOAb 11 IU/mL <35

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TgAb	15	IU/mL	<115
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Test Name	Result	Units	Reference Interval	Comment
S Sodium:	139	mmol/L	135 - 145	
S Potassium:	4.5	mmol/L	3.5 - 5.5	
S Chloride:	104	mmol/L	95 - 110	
S Bicarbonate:	22	mmol/L	20 - 32	
S Urea:	3.9	mmol/L	2.5 - 7.0	
S Creatinine:	63	umol/L	45 - 85	
eGFR	>90		>59	
S Bilirubin:	4	umol/L	3 - 15	
S Alkaline Phosphatase:	84	U/L	35 - 110	
S Gamma-GT:	33	U/L	5 - 35	
S ALT:	26	U/L	5 - 30	
S AST:	19	U/L	10 - 35	
S Total Protein:	66	g/L	64 - 81	
S Albumin:	38	g/L	33 - 46	
S Globulin:	28	g/L	23 - 41	
Fasting S Glucose	5.4	mmol/L	3.6 - 6.0	

Comments

eGFR is greater than 90 mL/min/1.73m2. No evidence of kidney disease.

NOTE: Change of reference interval for Alkaline Phosphatase (ALP), effective from 09/12/2024.

Dept Supervising Pathologist: Dr Andrew Carter

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S FSH:	10.5	IU/L
S Oestradiol	523	pmol/L

Comments

Reference Intervals	FSH (IU/L)	LH (IU/L)	Oestradiol (pmol/L)	Progesterone (nmol/L)
Female:				
Follicular phase	2.8 - 9.3	2.8 - 7.6	46 - 607	0.6 - 4.7
Mid cycle	3.0 - 19.2	10.5 - 85	315 - 1828	2.4 - 9.4
Luteal phase (D21)	1.7 - 7.7	1.0 - 11.4	161 - 774	5.3 - 86
Postmenopausal	31 - 153	12.0 - 75	<200	0.3 - 2.5

PLEASE NOTE: High dose biotin (>5 mg/day) may artefactually affect the hormone results. If the patient is taking 5-20 mg/day of biotin, suggest withhold for at least 8 hours before blood test (if taking 300 mg/day, withhold for at least 72 hours).

For clinicians requiring assistance with interpreting this report, a Chemical Pathologist or Clinical Scientist will be available during office hours on (03) 9287 7733.

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GLYCOHAEMOGLOBIN HbA1c

Test Name	Result	Units	Reference Interval	Comment
B Glycosylated Haemoglobin (Hb A1c):	5.2	%	4.4 - 5.6	
HbA1c (IFCC)	33	mmol/mol	25 - 38	
Estimated Average Glucose	5.7	mmol/L		

Comments

HbA1c is Medicare rebateable, once per year, for diagnosis of diabetes mellitus in high risk people. The diagnostic cut-off is HbA1c $\geq 6.5\%$ (48 mmol/mol) in patients with normal red cell turnover.
For clinical enquiries, please contact Chemical Pathologist
Dr Andrew Carter on 9287 7720.

Dept Supervising Pathologist: Dr Linda Saravanan

MELBOURNE PATHOLOGY NATA NO.:2133

31-12-2024 12:00

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HAEMOGLOBIN	129	g/L	115 - 160	
Haematocrit	0.40		0.35 - 0.47	
Red cell count	4.5	$\times 10^{12}/L$	3.7 - 5.2	
M.C.V.	89	fL	80 - 100	
M.C.H.	29	pg	27 - 34	
M.C.H.C.	326	g/L	310 - 360	
RDW	14.8		11 - 17	
PLATELETS	284	$\times 10^9/L$	150 - 450	
WHITE CELL COUNT	6.7	$\times 10^9/L$	4.0 - 11.0	
Neutrophils	3.7	$\times 10^9/L$	2.0 - 7.5	
Lymphocytes	2.3	$\times 10^9/L$	1.0 - 4.0	
Monocytes	0.5	$\times 10^9/L$	0 - 1.0	
Eosinophils	0.2	$\times 10^9/L$	0 - 0.5	
Basophils	0.0	$\times 10^9/L$	0 - 0.3	

Dept Supervising Pathologist: Dr Linda Saravanan

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