

DAHLSTROM, VERA

For Surgery Use ☐ Urgent ☐ Ring Patient ☐ Make Appointment ☐ Note in Chart ☐ File ☐

Patient	GALLO, MARK	UR No.	
Patient Address	42 JACANA CL MAREEBA QLD 4880		
Sex	M	Age	65 years
		DOB	12/10/1959
Report For	DAHLSTROM, VERA	Requested	16/01/2025
		Collected	16/01/2025 12:00 PM
Ref. by/copy to	DAHLSTROM, VERA	Reported	23/01/2025 07:12 AM

Whole Blood Vitamin B6 64 ug/L (> 14)
(as Pyridoxal-5-phosphate)

This result does not indicate vitamin B6 deficiency.

Levels exceeding 30 ug/L typically reflect recent absorption or supplementation.
Very high levels exceeding 500 ug/L if sustained have been associated with neuropathy.

Please note this is an incidental finding:
- Whole blood Vitamin B1 23 ug/L (28-85) *
(as Thiamine pyrophosphate)

Note: As vitamin B6 is found predominantly within the red blood cells, patients with anaemia may misleadingly have mildly low results.

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CUMULATIVE VITAMIN B12 AND FOLATE ASSAYS

Date 16/01/25
Time 12:00
Lab No 96103392

Active B12 127 pmol/L (> 35)

Comment:
96103392

Holo TC Assay:
No current vitamin B12 deficiency.

Methodology:
B12 and Active B12 (HoloTC) assays performed on Siemens Atellica analyser.

For Doctor clinical enquiries, please contact Dr Peter Davidson 07 3121 4444.
Patients should contact their referring doctor in regard to this result.

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CUMULATIVE SERUM VITAMIN D

Date 16/01/25
Time 12:00
Lab No 96103392
Vitamin D3 90 nmol/L (> 49)

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Serum Zinc 11 umol/L (10-25)

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CUMULATIVE IRON STUDIES

Date 16/01/25
Time 12:00
Lab No 96103392

Iron	20	umol/L	(10-33)
TIBC	61	umol/L	(45-70)
Saturation	33	%	(16-50)
Ferritin	79	ug/L	(30-320)

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CUMULATIVE SERUM BIOCHEMISTRY

Date	16/01/25	
Time	12:00	
Lab No	96103392	
	FASTING	FASTING
Sodium	141 mmol/L	(137-147)
Potass.	4.4 mmol/L	(3.5-5.0)
Chloride	104 mmol/L	(96-109)
Bicarb	30 mmol/L	(25-33)
An.Gap	11 mmol/L	(4-17)
Gluc	4.4 mmol/L	(3.0-6.0)
Urea	4.9 mmol/L	(3.0-8.5)
Creat	87 umol/L	(60-140)
eGFR	80 mL/min	(over 59)
Urate	0.33 mmol/L	(0.12-0.45)
T.Bili	18 umol/L	(2-20)
Alk.P	76 U/L	(30-115)
GGT	42 U/L	(0-70)
ALT	31 U/L	(0-45)
AST	29 U/L	(0-41)
LD	209 U/L	(80-250)
Calcium	2.35 mmol/L	(2.15-2.60)
Corr.Ca	2.34 mmol/L	(2.15-2.60)
Phos	1.2 mmol/L	(0.8-1.5)
T.Prot	72 g/L	(60-82)
Alb	43 g/L	(35-50)
Glob	29 g/L	(20-40)
Chol	3.9 mmol/L	(3.6-7.3)
Trig	1.7 mmol/L	(0.3-2.2)
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CUMULATIVE SERUM COMPLEMENT AND C-REACTIVE PROTEIN (CRP)

Date 16/01/25
Time 12:00
Lab No 96103392

CRP < 5 mg/L(0-6)

C-reactive protein (CRP) is a non-specific indicator of tissue damage.
The level rises rapidly (within 6-10 hours) after tissue injury, peaks at 48-72 hours and returns to normal within a few days. Common causes of markedly increased CRP include infection (particularly bacterial), trauma, surgery, myocardial infarction, many malignancies and inflammatory disorders.

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CUMULATIVE FULL BLOOD EXAMINATION

Date 16/01/25
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Lab No 96103392

Hb	156	g/L	(130-180)
RCC	5.2	x10 ¹² /L	(4.0-6.0)
Hct	0.48		(0.36-0.52)
MCV	93	fL	(80-98)
MCH	30	pg	(27-35)
Plats	248	x10 ⁹ /L	(150-450)
WCC	4.5	x10 ⁹ /L	(4.0-11.0)
Neuts	56 %	2.5 x10 ⁹ /L	(2.0-7.5)
Lymphs	28 %	1.3 x10 ⁹ /L	(1.1-4.0)
Monos	9 %	0.4 x10 ⁹ /L	(0.2-1.0)
Eos	6 %	0.27 x10 ⁹ /L	(0.04-0.40)
Basos	1 %	0.05 x10 ⁹ /L	(< 0.21)

96103392 **Automated Comment:**

As per ISLH guidelines - Film not reviewed. If a film review is truly indicated, contact the laboratory within 24 hours of collection. Otherwise investigate any highlighted abnormalities as clinically appropriate.

All haematology parameters are within normal limits for age and sex.

**** FINAL REPORT - Please destroy previous report ****

Pathology Report