



Lab ID 526102578

DOB 15/11/2007 (16 Yrs FEMALE)

Referrer Ms Kiera(Patient To Pay) Hinshaw

Your ref.

Address WELLNESS CENTRE 53 JONES RD  
CANNONVALE QLD 4802

Address 37 WATTLE ROAD  
CANNON VALLEY QLD 4800

Phone

Phone 0487070007

Copy to Dr David Kanowski (0733778666)

Requested 07/06/2024

Clinical Notes Not Provided

Collected 07/06/2024 07:48

Received 07/06/2024 07:48

## Zinc

Test Name	Result	Units	Reference Interval
Zinc-plasma	10.7	umol/L	9.0 - 19.0

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Reported on 08-06-2024 14:43

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Test Name	Result	Units	Reference Interval
Sodium	142	mmol/L	132 - 145
Potassium	4.2	mmol/L	3.5 - 5.5
Chloride	107	mmol/L	95 - 110
Bicarbonate	29	mmol/L	20 - 32
Anion Gap	6	mmol/L	<16
Calcium (Corrected)	2.32	mmol/L	2.20 - 2.65
Phosphate	1.39	mmol/L	0.80 - 1.50
Urea	6.0	mmol/L	2.5 - 6.0
Urate	0.174	mmol/L	0.150 - 0.400
Creatinine	68	umol/L	45 - 85
Glucose fasting	5.1	mmol/L	3.6 - 6.0
Total Protein	68	g/L	65 - 81
Albumin	43	g/L	34 - 47
Globulin	25	g/L	23 - 42
Bilirubin	<5	umol/L	<16
ALP	101	U/L	50 - 150
AST	21	U/L	10 - 35
ALT	24	U/L	5 - 30
GGT	13	U/L	5 - 35
LD	143	U/L	<250
Cholesterol	4.4	mmol/L	<5.6
Haemolysis Index	1		<40

#### Comments

Please note: eGFR cannot be calculated on patients less than 18 years old.

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## C Reactive Protein

Test Name	Result	Units	Reference Interval
CRP	<0.4	mg/L	<5

## Comments

Interpretation: Elevation in CRP indicates disease activity of an inflammatory, infective or neoplastic nature. CRP is a more sensitive early indicator of an acute phase response than is the ESR. It also returns towards normal more rapidly with improvement or resolution of the disease process.

Artefactually decreased CRP values occur when patients are treated with antibiotics containing carboxypenicillins including Ticarcillin.

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## Gonadal Hormones

Test Name	Result	Units	Reference Interval
FSH	5	IU/L	
LH	4	IU/L	
Oestradiol	123	pmol/L	

Reference Limits	FSH IU/L	LH IU/L	Oestradiol pmol/L
Follicular	2 - 10	2 - 7	110 - 180
Mid-Cycle	7 - 24	9 - 74	550 - 1650
Luteal	1 - 10	1 - 9	180 - 840
Menopausal	20 - 140	10 - 65	<200
OCP	<5	<9	<80

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## Haematinics

Test Name	Result	Units	Reference Interval
Iron	10	umol/L	5 - 30
Transferrin	2.7	g/L	1.9 - 3.1
TIBC	67	umol/L	47 - 77
● Saturation	<b>15 L</b>	%	20 - 45
Ferritin	38	ug/L	30 - 250
CRP	<0.4	mg/L	<5
Vitamin B12	200	pmol/L	> 150
Active B12	61	pmol/L	> 35

## Comments

The normal ferritin implies normal iron stores. However, a normal ferritin level may be seen in iron deficient patients who have recently taken oral iron, or who have an intercurrent illness causing ferritin elevation.

All patients with low or equivocal vitamin B12 results (400 pmol/L or less) will be routinely tested for holo-transcobalamin (active B12) to clarify the B12 status.

Both tests are now Medicare rebateable. Vitamin B12 concentrations over 400 pmol/L are generally considered replete.

Active B12 (holotranscobalamin) is the biologically active fraction of total serum B12, and should be a superior indicator of B12 status. **Holotranscobalamin** level indicates Vitamin B12 deficiency unlikely. Up to 15% of patients will have a deficiency of carrier protein (haptocorrin) that does not appear to result in a clinically recognisable Vitamin B12 deficiency despite low total Vitamin B12 levels.

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**Haematology**

Test Name	Result	Units	Reference Interval
<b>Haemoglobin</b>	122	g/L	115 - 165
Haematocrit	0.37		0.35 - 0.47
Red cell count	4.2	10 <sup>12</sup> /L	3.9 - 5.6
MCV	89	fL	80 - 100
<b>White cell count</b>	4.1	10 <sup>9</sup> /L	3.5 - 12.0
Neutrophils	1.79	10 <sup>9</sup> /L	1.5 - 8.0
Lymphocytes	1.78	10 <sup>9</sup> /L	1.0 - 4.0
Monocytes	0.38	10 <sup>9</sup> /L	0 - 0.9
Eosinophils	0.11	10 <sup>9</sup> /L	0 - 0.6
Basophils	0.03	10 <sup>9</sup> /L	0 - 0.15
<b>Platelets</b>	190	10 <sup>9</sup> /L	150 - 400

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