

NATIONAL BOWELCANCER

SCREENING PROGRAM



Australian Government

Bowel Cancer Screening
Telstra Health
Level 3
222 Lonsdale Street
Melbourne VIC 3000

Participant ID: 13886020
Carlo Francesco Barletta
24 Logan St
ATHERTON QLD 4883
DOB: 27/10/1966 Age: 57 Yrs
Sex: M

PATHOLOGY REPORT

Immunochemical Faecal Occult Blood Test (iFOBT) Overall Result: NEGATIVE

Sample 1	Date: 14/11/2023	Negative	
Sample 2	Date: 14/11/2023	Negative	
Receipt Date	17/11/2023	Printed	18/11/2023
NATA/RCPA Accreditation Number	1964	Authorised Pathologist	Dr Sarah Cherian

Dear Doctor,

As pathology provider for the National Bowel Cancer Screening Program (the Program), we are writing to provide you with an immunochemical faecal occult blood test (iFOBT) sample analysis for the Program.

Recently, your patient or a patient who has nominated your practice, participated in the Program and has tested **NEGATIVE** for faecal occult blood. The patient has been advised of this result.

You may wish to encourage your patient to continue with regular bowel cancer screening every two years until they turn 74 years. Your patient has been advised to contact you immediately if they have, or develop, any symptoms.

If you have any questions about the Program, please visit www.health.gov.au/nbcsp or call the National Cancer Screening Register on 1800 627 701 during business hours on Monday to Friday, between 8.30am and 6pm (except public holidays).



SONIC
HEALTHCARE

Proudly supporting the National Bowel Cancer Screening Program



Referrer Dr Samuel J Heckathorn
Address ATHERTON CLINIC 2 WYLIE ST
ATHERTON QLD 4883
Phone 0740912300

Lab ID 534734254
Your ref. 16882
DOB 27/10/1966 (58 Yrs MALE)
Address 1/13 HERBERTON ROAD
ATHERTON QLD 4883
Phone 0418400348

Copy to	Requested 12/12/2024	
Clinical Notes 1, left posterior calf. 10x10mm, new growing lesion, ?solar lentigo, 2, right lower posterior calf. 2x1.5mm, exclude melanoma - asymmetry, ugly duckling	Collected 12/12/2024 00:00	Received 12/12/2024 18:15

Specimen No : 465371-24BR

DIAGNOSTIC SUMMARY:

1. Skin left posterior calf shave -seborrhoeic keratosis, margins clear.
2. Skin right lower posterior calf punch -lentigo, margins clear.

Reported by Dr Irene Krajewska (Enquiries (07) 5459 1400) 18/12/2024

Clinical Notes:

- 1 Left posterior calf 10 x 10mm new growing lesion ?solar lentigo.
- 2 Right lower posterior calf 2 x 1.5mm exclude melanoma.

Macroscopic:

1. Labelled 'L calf'. A 12 x 11 x 1mm shave with a tan slightly elevated area 4 x 4mm. 1A quadrisectioned in total.
2. Labelled 'R calf'. A 3 x 2mm skin punch. 3A in total.

Microscopic:

1. L calf: The shave biopsy shows a small central seborrhoeic keratosis. There is no evidence of malignancy. The margins appear clear.
2. R calf: The punch biopsy shows a small central focus of lentigo, with no atypical features seen. It is clear of the margins.

1- End of Report -

Sullivan Nicolaides Pty Ltd. ABN 38 078 202 196. NATA/RCPA Accreditation No 1964

BARLETTA, CARLO
 1/13 HERBERTON RD, ATHERTON. 4883
 Birthdate: 27/10/1966 Sex: M Medicare Number: 41394598371
 Your Reference: Lab Reference: 23-70092894-HDL-0
 Laboratory: QML Pathology
 Addressee: DR MARTIN J DEUBLE Referred by: DR MARTIN J DEUBLE

 Name of Test: HDL CHOLESTEROL, SERUM
 Requested: 26/07/2023 Collected: 26/07/2023 Reported: 28/07/2023
 11:44

CUMULATIVE LIPID RISK REPORT
 Date 26/07/23
 Time 14:15
 Lab No 70092894
 RANDOM

 Target if
 HIGH RISK
 Total Cholesterol 6.5 mmol/L (below 4.0)
 Triglycerides 1.5 mmol/L (below 2.0)

 CHOLESTEROL FRACTIONS
 HDL 1.22 mmol/L (above 1.0)
 LDL (calculated)* 4.60 mmol/L (below 2.5)
 Non-HDL cholesterol* 5.28 mmol/L (below 3.3)
 Total/HDL ratio** 5.3

* Secondary prevention LDL and non-HDL cholesterol targets are lower.
 ** The ratio is for use with the cardiovascular risk calculator.
 Web-search: "Australian cardiovascular risk calculator"

70092894 Treatment is recommended if clinically indicated or if calculated risk exceeds 15% absolute risk of CVD events over 5 years.

NVDPA 2012 Target ranges refer to HIGH RISK PATIENTS.

As of 7/3/22 LDL will no longer be measured routinely. LDL results will be calculated, in accordance with National harmonisation.

Tests Completed: SE E/LFT, SE HDL
 Tests Pending : TOTAL TESTOSTERONE, BL HBA1C, PSA

BARLETTA, CARLO
1/13 HERBERTON RD, ATHERTON. 4883
Birthdate: 27/10/1966 Sex: M Medicare Number: 41394598371
Your Reference: Lab Reference: 23-70092894-25T-0
Laboratory: QML Pathology
Addressee: DR MARTIN J DEUBLE Referred by: DR MARTIN J DEUBLE

Name of Test: E/LFT (MASTER)
Requested: 26/07/2023 Collected: 26/07/2023 Reported: 28/07/2023
11:44

SERUM CHEMISTRY - RANDOM

Sodium	138	mmol/L	(137-147)
Potassium	4.4	mmol/L	(3.5-5.0)
Chloride	103	mmol/L	(96-109)
Bicarbonate	30	mmol/L	(25-33)
Other Anions	9	mmol/L	(4-17)
Glucose	4.4	mmol/L	random (3.0-7.7)
Urea	5.6	mmol/L	(3.0-8.5)
Creatinine	90	umol/L	(60-140)
eGFR	82	mL/min	(over 59)
Uric Acid	0.32	mmol/L	(0.12-0.45)
Total Bilirubin	9	umol/L	(2-20)
Alk. Phos.	101	U/L	(30-115)
Gamma G.T.	11	U/L	(0-70)
ALT	24	U/L	(0-45)
AST	18	U/L	(0-41)
LD	180	U/L	(80-250)
Calcium	2.47	mmol/L	(2.15-2.60)
Adjusted for Albumin	2.37	mmol/L	(2.15-2.60)
Phosphate	1.1	mmol/L	(0.8-1.5)
Total Protein	73	g/L	(60-82)
Albumin	46	g/L	(35-50)
Globulins	27	g/L	(20-40)
Cholesterol	6.5	mmol/L	(3.9-7.4)
Triglycerides	1.5	mmol/L	random (0.3-4.0)

Tests Completed: SE E/LFT, SE HDL
Tests Pending : TOTAL TESTOSTERONE, BL HBA1C, PSA

BARLETTA, CARLO
1/13 HERBERTON RD, ATHERTON. 4883
Birthdate: 27/10/1966 Sex: M Medicare Number: 41394598371
Your Reference: Lab Reference: 23-70092894-PSA-0
Laboratory: QML Pathology
Addressee: DR MARTIN J DEUBLE Referred by: DR MARTIN J DEUBLE

Name of Test: PROSTATE SPECIFIC ANTIGEN
Requested: 26/07/2023 Collected: 26/07/2023 Reported: 28/07/2023
12:00

Total PSA (Alinity) 1.30 ug/L (< 3.80)

Age-related total PSA medians are quoted as they may be used in clinical guidelines and Medicare billing eligibility

Age(years)	Total PSA Medians	Range
< 50	0.6 ug/L	<2.3 ug/L
50 to 59	0.7 ug/L	<3.8 ug/L
60 to 69	1.1 ug/L	<5.0 ug/L
>= 70	1.4 ug/L	<5.4 ug/L

Men with PSA levels above the age-related median should be tested annually. Those with levels below the median can be followed up less frequently. Levels that suggest higher risk of prostate cancer e.g. Above 3.0 ug/L should be further investigated (NHMRC 2015, Summary of Clinical Practice Recommendations page ix)

[Note: PSA may be poorly expressed in a small proportion of advanced anaplastic cancers.]

Tests Completed:SE E/LFT, SE HDL, PSA
Tests Pending :TOTAL TESTOSTERONE, BL HBA1C

BARLETTA, CARLO
1/13 HERBERTON RD, ATHERTON. 4883
Birthdate: 27/10/1966 **Sex:** M **Medicare Number:** 41394598371
Your Reference: **Lab Reference:** 23-70092894-FHM-0
Laboratory: QML Pathology
Addressee: DR MARTIN J DEUBLE **Referred by:** DR MARTIN J DEUBLE
Name of Test: FERTILITY HORMONE MASTER
Requested: 26/07/2023 **Collected:** 26/07/2023 **Reported:** 28/07/2023
12:09

Testosterone 21 nmol/L (5.0-25.0)

Tests Completed: TOTAL TESTOSTERONE, SE E/LFT, SE HDL, PSA
Tests Pending : BL HBA1C

BARLETTA, CARLO
1/13 HERBERTON RD, ATHERTON. 4883
Birthdate: 27/10/1966 Sex: M Medicare Number: 41394598371
Your Reference: Lab Reference: 23-70092894-A1C-0
Laboratory: QML Pathology
Addressee: DR MARTIN J DEUBLE Referred by: DR MARTIN J DEUBLE

Name of Test: HAEMOGLOBIN A1C, BLOOD
Requested: 26/07/2023 Collected: 26/07/2023 Reported: 28/07/2023
14:00

CUMULATIVE GLYCATED HAEMOGLOBIN

Date 26/07/23
Time 14:15
Lab No 70092894

HbA1c Fraction 5.4 %
in SI units 36 mmol/mol

Note: Caution is needed in interpreting HbA1c results in the presence of conditions affecting red blood cell survival times, which may lead to either falsely high or falsely low HbA1c results.

HbA1c diagnostic levels - RCPA 2014

< 6.1% (<43 mmol/mol) - current diabetes is excluded
6.1-6.4% (43-47 mmol/mol) - high risk for future diabetes
> 6.4% (>48 mmol/mol) - diabetes is likely

Unless patient has supportive symptoms or elevated plasma glucose values, repeat test is recommended.

Currently, Medicare will fund only one diagnostic test per year.

Sample may be collected at any time - fasting is not required.

Note - diabetes tolerance may be impaired by chronic illness, use of certain drugs including steroids, Cushing syndrome, etc. We would advise considering secondary forms in newly-diagnosed patients.

For clinical enquiries, please contact Dr Appleton, Chang or Marshall

Tests Completed: TOTAL TESTOSTERONE, SE E/LFT, SE HDL, BL HBA1C, PSA
Tests Pending :

BARLETTA, CARLO FRANCESCO
24 LOGAN ST, ATHERTON. 4883
Phone: 0418400348
Birthdate: 27/10/1966 Sex: M Medicare Number: 413945983
Your Reference: 249670985 Lab Reference: 8007917681-M-M975
Laboratory: National Bowel Cancer Screening Program
Addressee: DR MARTIN J DEUBLE Referred by: BOWEL C SCREENING
Copy to:
DR MARTIN DEUBLE

Name of Test: IFOBT GP E-REPORT
Requested: 03/07/2023 Collected: 14/11/2023 Reported: 18/11/2023
12:25

Clinical notes: Comments:

Clinical Notes : Comments:

Immunochemical Faecal Occult Blood Test (iFOBT)

Participant ID 13886020

Overall iFOBT Result NEGATIVE

Sample 1

Collection Date 14/11/2023
Result Negative

Sample 2

Collection Date 14/11/2023
Result Negative
Comment on Lab ID 8007917681

As pathology provider for the National Bowel Cancer Screening Program (the Program), we are writing to provide you with an immunochemical faecal occult blood test (iFOBT) sample analysis for the Program.

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Dr Sarah Cherian

NATA Accreditation No 2178