POOK, Melannie

21/1 Oxford Street BULIMBA 4171

Phone:

Birthdate:

27/01/1973

Sex:

F

Medicare Number:

61779151772

Your

Reference:

Lab

Reference:

77.53142343

Laboratory:

I-MED Radiology Network

Addressee:

Dr JOHN ANTHONY

FRANCIS DELIA

Referred by:

Name of test:

**CT Cardiac Scoring** 

Requested

08/05/2025

Collected:

06/05/2025 Reported:

08/05/2025

10:45:00

Dr John Delia

**Hawthorne Family Practice** 

182 Riding Rd Balmoral 4171 Tel: 0735228899

6th May 2025

Patient ID: 77.11438747 Accession Number: 77.53142343

Reported: 8 May 2025

Dear Dr Delia

Re:

Ms Melannie Pook - DOB: 27/01/1973

21/1 Oxford Street BULIMBA 4171

#### CT CORONARY ARTERY CALCIUM SCORE

#### **CLINICAL HISTORY**

High cholesterol.

#### **TECHNIQUE**

Non-contrast gated study performed.

DLP 102.5 mGy\*cm

#### **FINDINGS**

Adequate quality study.

Left Main	0
LAD	1.85
LCX	0

RCA	0	
TOTAL	1.85	

## **Non-Coronary Findings:**

Right middle lobe 2 mm calcified granuloma.

Right lower lobe medial aspect osteophyte disease pulmonary fibrosis, not a clinically significant finding.

#### CONCLUSION

Coronary artery calcium score of 2, carries a low 10 year risk of coronary vascular event.

#### **CSANZ POSITION STATEMENT - CORONARY ARTERY CALCIUM SCORING**

## Suggested management based on CAC results for asymptomatic patients

CAC	10-yr risk of CV Event	Guidance
0	Very Low (< 1%)	a ZERO score confers a very low risk of death, <1% at 10 years Reassure; maintenance of healthy diet and lifestyle.
1-100	Low (<10%)	Maintenance of healthy diet and lifestyle
101 - 400	Moderate (10-20%)	Aspirin recommended Statins considered reasonable
101 – 400 & >75th centile	Moderately High (15- 20%)	Reclassify as high risk; Aspirin recommended Statins considered reasonable
>400	High (>20%)	Aspirin <b>recommended</b> Statin <b>recommended</b> , to achieve target LDL < 2.0 mmol/L Consider functional assessment.

Further Risk Stratification can be obtained at:

https://www.mesa-nhlbi.org/MESACHDRisk/MesaRiskScore/RiskScore.aspx

#### Recommendation: Asymptomatic patients suitable for CAC

- Aged 45-75 years with intermediate cardiovascular risk (10-20%)
- There is a possible role for CAC in those aged 45-75 years with lower cardiovascular risk (6-10%) as defined by FRS in:

- Those with a strong family history of premature CHD
- Diabetics aged 40 60 years old.
- Indigenous patients (Aboriginals, Maori and Pacific Island patients) >40 years old.

## Recommendation: Symptomatic patients

In the assessment of symptomatic patients, CAC <u>should not</u> be the sole test used.

Cardiologist review is recommended for functional assessment or a coronary angiogram.

Dr Jeremy Lin. Radiologist

Electronically signed at 10:34 am Thu, 8th May 2025

# **Patient Health Summary**

Name: Mrs Melannie Lee Pook Address: 21/1 Oxford Street

Bulimba 4171

D.O.B.: 27/01/1973

Record No.: Home Phone: Work Phone:

Mobile Phone: 0448 734 350

Printed on 13th May 2025

HAWTHORNE FAMILY PRACTICE

182 Riding Road

Balmoral 4171

35228899

## Investigations:

POOK, MELANNIE

21/1 OXFORD STREET,

BULIMBA.

4171

Phone:

0448734350

Birthdate: 27/01/1973

Sex: F Medicare Number: 6177915177

Your Reference:

Lab Reference: 509637975-C-C847

Laboratory: SNP

Addressee: DR JOHN A DELIA

Referred by: DR JOHN A DELIA

Name of Test:

S- LIPID PROFILE

Requested: 19/03/2025 Collected:

06/05/2025

Reported: 06/05/2025

20:29

Clinical notes:

Not Provided

Clinical Notes: Not Provided

#### Lipid Profile

Date		12-Feb-25 0822 F	17-Feb-25 0950	Latest Resu 06-May-25 1426	lts	
Time F-Fast	0702 F			AT 100 AT 100 AT 1		
Lab Id.	526462772	683866066	526293018	509637975 R	eference	Units
Cholesterol	6.9 H	7.6 H	7.1 H	6.5 Н (	(<5.6)	mmol/L
Triglyceride	2.4 H	2.3 H	2.4 H	2.0 (	(<2.1)	mmol/L
HDL	1.22	1.24	1.24	1.26 (	(>1.09)	mmol/L
LDL	4.6 H	5.3 H	4.8 H	4.4 H (	(<4.1)	mmol/L
Chol/HDL Ratio	5.7 H	6.1 H	5.7 H	5.2 H (	(<4.6)	
Non HDLC	5.68 H	6.36 H	5.86 H	5.24 H (	(<3.81)	mmol/L

Comments on Collection 06-May-25 1426:

HDL-Cholesterol

Progress lipid levels.

LDL is now calculated by the Sampson equation which allows an accurate result at higher triglyceride levels.

The National Vascular Disease Prevention Alliance (NVDPA) guidelines recommend a target level of less than 2.5 mmol/L for non-HDLC.

TARGET LEVELS:

The National Vascular Disease Prevention Alliance (NVDPA) treatment target levels for high risk people (known coronary heart and other arterial disease, diabetes, chronic renal failure, Aboriginal and Torres Strait Islander peoples and familial hyperlipidaemic conditions) are:

Total Cholesterol <4.0 mmol/L >=1.00 mmol/L HDL-Cholesterol Fasting Triglycerides <2.0 mmol/L <2.5 mmol/L Non-HDL Cholesterol

Increased non-HDL Cholesterol is the most significant marker for subclinical atherosclerosis (ref: Cardiology Today 2013; 3(2) : pp25-27).

CA

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Melle

Time F-Fast 0822 F 1426

Lab Id. 683866066 509637975 Reference Units

250H Vit D 62 68 (50-150) nmol/L

Comments on Collection 06-May-25 1426:

Adequate Vitamin D.

Vitamin D measured by Diasorin Liaison.

EA

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

Tests Completed: HDL-Cholesterol, Homocysteine, Vitamin D

Tests Pending : HbAlc

Sample Pending :

POOK, MELANNIE

21/1 OXFORD STREET, BULIMBA. 4171

Phone: 0448734350

Birthdate: 27/01/1973 Sex: F Medicare Number: 6177915177

Your Reference: Lab Reference: 509637975-H-E416

Laboratory: SNP

Addressee: DR JOHN A DELIA Referred by: DR JOHN A DELIA

Name of Test: HBA1C

Requested: 19/03/2025 Collected: 06/05/2025 Reported: 07/05/2025 05:29

Clinical notes: Not Provided

Clinical Notes: Not Provided

HbA1c

Latest Results

Date 11-Jul-24 17-Feb-25 06-May-25

Time F-Fast 0702 F 0950 1426

Lab Id. 526462772 526293018 509637975 Reference Units

HbAlc (NGSP) 5.4 5.4 5.1 (<6.5) %

HbA1c (IFCC) 36 35 32 (<48) mmol/mol

Comments on Collection 06-May-25 1426:

Control zones for diabetes management

NGSP (%) IFCC (mmol/mol)
Very good control \* <6.1 <43

| Suboptimal control | Silver | Silver

Very poor control >9.0 >75 In patients with a significant risk of adverse outcome from hypoglycaemia

(children <16 and adults >70 years), higher target values may be

appropriate.

An alternative test to monitor diabetes such as serum fructosamine is

advisable in the presence of altered red cell lifespan.

HbAlc performed on the Sebia Cap3 analyser by capillary electrophoresis.

HA

#### PDF Image Enhanced Report

A PDF version of this report with images is available until 07-05-2026. Copy and paste the URL below into your web browser and use PIN 5763 to access the report.

 $\label{local-com} $$ $ https://sdrviewer.apps.sonichealthcare.com/?GUID=66A9222E-2AB0-11F0-9953-910523733610\&hostCode=SNP&shareType=1 $$ NP&shareType=1 $$ https://sdrviewer.apps.sonichealthcare.com/?GUID=66A9222E-2AB0-11F0-9953-910523733610&hostCode=SNP&shareType=1 $$ https://sdrviewer.apps.sonichealthcare.com/?GUID=66A9222E-2AB0-11F0-9953-9105290&hostCode=SNP&shareType=1 $$ https://sdrviewer.apps.sonichealthcare.com/?GUID=66$ 

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Tests Completed: HDL-Cholesterol, Homocysteine, Vitamin D, HbAlc

Tests Pending : Sample Pending :