

<b>Report to:</b> DR SHINGAI GARUTSA Dot Doctors 8 Chloride St BROKEN HILL 2880	<b>Name:</b> BERNASCONI, LAUREN <b>Addr:</b> 85 MAXWELL ST SOUTH PENRITH 2750 <b>Phone:</b> 0436432001 <b>Your Ref:</b>	<b>D.O.B.:</b> 26/09/99 <b>Sex:</b> F <b>Lab Ref:</b> 25-96948295 <b>Collected:</b> 03/05/25 <b>Time Coll:</b> 00:00 <b>Reported:</b> 03/05/25
	<p>Confidentiality: If you are not the intended recipient, you are hereby notified that any use, review, dissemination, distribution or copying of these results is strictly prohibited.          If you have received this in error please notify us immediately and the original message.</p> <p>Tests listed below * equals waiting</p>	
<b>TESTS:</b> Final report. Thank you for your referral. <b>CLINICAL NOTES:</b> fatigue		

## VITAMIN B12 AND FOLATE STUDIES

Vitamin B12	238	pmol/L	(156-740)
Active B12	94	pmol/L	(> 40)
Serum Folate	27.6	nmol/L	(> 9.0)

### Serum Vitamin B12 Assay:

DEFICIENCY	BORDERLINE	SUFFICIENCY
<150 pmol/L	150 - 300 pmol/L	>300 - 740 pmol/L

For patients with total B12 levels in the low or borderline range, testing for active B12 (holotranscobalamin II) will automatically be performed to resolve B12 status. Active B12 is the biologically active fraction of total serum B12, and a superior indicator of B12 status. Up to 15% of individuals may have a deficiency of the carrier protein haptocorrin, which does not result in clinical B12 deficiency, despite low total B12 levels.

### Serum Active B12 Assay:

This active B12 result indicates that the patient is likely to be vitamin B12 sufficient. Patients with renal impairment may still be B12 depleted despite an active B12 level within this range. For these patients, correlation with total B12, homocysteine and/or methylmalonate is required.

### Folate Interpretation:

	DEFICIENCY	BORDERLINE	SUFFICIENCY
Serum Folate:	<4.5 nmol/L	4.5 - 9.0 nmol/L	>9.0 nmol/L

### Serum Folate Assay:

In the absence of recent oral intake, a serum folate >9.0 nmol/L effectively rules out folate deficiency.

Red cell folates (RCF) are no longer processed routinely. If you have requested a RCF, and require a result for appropriate clinical reasons, this will need to be discussed and agreed with a Consultant Haematologist on +61290027085 or Dr. Lucinda Wallman, Consultant Pathologist in Immunology and Medical Director on telephone number +61 290057179