

Referrer **Dr Anastasia L Jensen**

Address AMAROO MEDICAL 10 KAROBEAN DR
MAREEBA QLD 4880

Phone 0740925900

Lab ID **530359853**

DOB **16/10/1978 (46 Yrs FEMALE)**

Your ref. 2392

Address 6 BROWN ST
MAREEBA QLD 4880

Phone 0427620112

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Requested 30/05/2025

Clinical Notes 46yo F, annual bloods - history of iron deficiency

Collected 02/06/2025 07:28

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Haematinics

Test Name	Result	Reference Interval	Units
Iron	21	5 - 30	umol/L
Transferrin	2.9	1.9 - 3.1	g/L
TIBC	74	47 - 77	umol/L
Saturation	28	20 - 45	%
Ferritin	47	30 - 300	ug/L
CRP	1.9	<5	mg/L
Vitamin B12	277	> 150	pmol/L
Active B12	82	>35	pmol/L

Comments

Normal Iron Status.

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.

EA

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