

WEST, CAROL
10 FLORIBUNDA AVE, WARWICK. 4370
Phone: 07 55734842
Birthdate: 09/08/1956 Sex: F Medicare Number: 40691406422
Your Reference: Lab Reference: 25-90098835-CBC-0
Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: MASTER FULL BLOOD COUNT
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 16/05/2025
22:47

FULL BLOOD EXAMINATION

Haemoglobin	143	g/L	(115-160)
Red Cell Count	5.0	$\times 10^{12}$ /L	(3.6-5.2)
Haematocrit	0.45		(0.33-0.46)
Mean Cell Volume	91	fL	(80-98)
Mean Cell Haemoglobin	29	pg	(27-35)
Platelet Count	218	$\times 10^9$ /L	(150-450)
White Cell Count	6.8	$\times 10^9$ /L	(4.0-11.0)
Neutrophils	53 %	3.6 $\times 10^9$ /L	(2.0-7.5)
Lymphocytes	37 %	2.5 $\times 10^9$ /L	(1.1-4.0)
Monocytes	8 %	0.5 $\times 10^9$ /L	(0.2-1.0)
Eosinophils	2 %	0.14 $\times 10^9$ /L	(0.04-0.40)
Basophils	0 %	0.00 $\times 10^9$ /L	(< 0.21)

Automated Comment:

As per ISLH guidelines - Film not reviewed. If a film review is truly indicated, contact the laboratory within 24 hours of collection. Otherwise investigate any highlighted abnormalities as clinically appropriate.

All haematology parameters are within normal limits for age and sex.

** FINAL REPORT - Please destroy previous report **

Clinical Notes : Osteoporosis

Tests Completed:FBC

Tests Pending :SERUM FOLATE, SERUM VITAMIN B12, SE E/LFT, SE VIT D, SE HDL, BL HBA1C

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Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: HAEMOGLOBIN A1C, BLOOD
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 17/05/2025
09:21

CUMULATIVE GLYCATED HAEMOGLOBIN			
Date	26/09/23	16/05/25	
Time	07:50	07:41	
Lab No	73924336	90098835	
HbA1c Fraction	5.0	5.0	%
in SI units	31	31	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

Clinical Notes : Osteoporosis

Tests Completed:FBC, BL HBA1C
Tests Pending :SERUM FOLATE, SERUM VITAMIN B12, SE E/LFT, SE VIT D, SE HDL

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Phone: 07 55734842
Birthdate: 09/08/1956 Sex: F Medicare Number: 40691406422
Your Reference: Lab Reference: 25-90098835-HDL-0
Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: HDL CHOLESTEROL, SERUM
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 17/05/2025
13:14

CUMULATIVE LIPID RISK REPORT			
Date	26/09/23	16/05/25	
Time	07:50	07:41	
Lab No	73924336	90098835	
	FASTING	FASTING	
			Target if HIGH RISK
Total Cholesterol	5.7	6.4 mmol/L	(below 4.0)
Triglycerides	1.2	1.0 mmol/L	(below 2.0)
CHOLESTEROL FRACTIONS			
HDL	2.26	2.32 mmol/L	(above 1.0)
LDL (calculated)*	2.89	3.63 mmol/L	(below 2.5)
Non-HDL cholesterol*	3.44	4.08 mmol/L	(below 3.3)
Total/HDL ratio**	2.5	2.8	

* 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"

90098835 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.

Clinical Notes : Osteoporosis

Tests Completed:FBC, SE E/LFT, SE HDL, BL HBA1C
Tests Pending :SERUM FOLATE, SERUM VITAMIN B12, SE VIT D

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Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: E/LFT (MASTER)
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 17/05/2025
13:14

SERUM CHEMISTRY - FASTING

Sodium	141	mmol/L	(137-147)
Potassium	4.0	mmol/L	(3.5-5.0)
Chloride	109	mmol/L	(96-109)
- Bicarbonate	24	mmol/L	(25-33)
Other Anions	12	mmol/L	(4-17)
Glucose	5.0	mmol/L	fasting (3.0-6.0)
Urea	6.7	mmol/L	(2.5-7.5)
Creatinine	73	umol/L	(50-120)
eGFR	73	mL/min	(over 59)
Uric Acid	0.33	mmol/L	(0.14-0.35)
Total Bilirubin	8	umol/L	(2-20)
Alk. Phos.	84	U/L	(30-115)
Gamma G.T.	13	U/L	(0-45)
ALT	13	U/L	(0-45)
AST	16	U/L	(0-41)
LD	189	U/L	(80-250)
Calcium	2.32	mmol/L	(2.15-2.60)
Adjusted for Albumin	2.36	mmol/L	(2.15-2.60)
Phosphate	1.0	mmol/L	(0.8-1.5)
Total Protein	67	g/L	(60-82)
Albumin	41	g/L	(35-50)
Globulins	26	g/L	(20-40)
Cholesterol	6.4	mmol/L	(3.6-7.3)
Triglycerides	1.0	mmol/L	fasting (0.3-2.2)

Clinical Notes : Osteoporosis

Tests Completed:FBC, SE E/LFT, SE HDL, BL HBA1C
Tests Pending :SERUM FOLATE, SERUM VITAMIN B12, SE VIT D

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Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: VITAMIN D,SERUM
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 17/05/2025
13:26

CUMULATIVE SERUM VITAMIN D			
Date	26/09/23	12/07/24	16/05/25
Time	07:50	10:30	07:41
Lab No	73924336	75420388	90098835
Vitamin D3	82	149	65 nmol/L (> 49)

90098835
** Progress report.
We occasionally see evidence of functional vitamin deficiency and possibly accelerated bone loss with levels in the range of 50-70 nmol/L.

Clinical Notes : Osteoporosis

Tests Completed:FBC, SE E/LFT, SE VIT D, SE HDL, BL HBA1C
Tests Pending :ACTIVE VITAMIN B12, SERUM FOLATE, SERUM VITAMIN B12

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Phone: 07 55734842
Birthdate: 09/08/1956 Sex: F Medicare Number: 40691406422
Your Reference: Lab Reference: 25-90098835-BFM-0
Laboratory: QML Pathology
Addressee: DR HELEN CHORLEY Referred by: DR HELEN CHORLEY

Name of Test: MASTER VITAMIN B12 FOLATE
Requested: 09/05/2025 Collected: 16/05/2025 Reported: 17/05/2025
14:12

Serum Vitamin B12 Assay	311	pmol/L	(162-811)
Holo TC Assay	> 146	pmol/L	(> 35)
Serum Folate Assay	33.8	nmol/L	(8.4-55.0)

Comment:

Serum Folate Assay:
Adequate Serum Folate.
In the absence of recent oral intake, a serum folate >13 nmol/L effectively rules out folate deficiency. Consider repeat fasting Folate, if there has been inadequate fasting, and clinical concern remains.

Serum Vitamin B12 Assay:
The vitamin B12 level is in the indeterminate range.
B12 depletion may exist with levels up to 350 pmol/L
Correlation with Folate levels as well as Holo TC (Active B12) assay is recommended.

Holo TC Assay:
No suggestion of vitamin B12 deficiency.
High B12 levels are commonly seen with vitamin B12 replacement therapy.

Methodology:
B12 and Active B12 (HoloTC) assays performed on Siemens Atellica analyser.

For Doctor clinical enquiries, please contact Dr Peter Davidson 07 3121 4444.
Patients should contact their referring doctor in regard to this result.

Clinical Notes : Osteoporosis

Tests Completed: ACTIVE VITAMIN B12, FBC, SERUM FOLATE, SERUM VITAMIN B12, SE E/LFT
Tests Completed: SE VIT D, SE HDL, BL HBA1c
Tests Pending :