GALLO, AMANDA
148 KOCHI RD, ATHERTON. 4883
Phone: 0429914653
Birthdate: 18/08/1967 **Sex:** F **Medicare Number:** 4147234529
Your Reference: FB52975C9E **Lab Reference:** 532474143-E-E199
Laboratory: SNP
Addressee: DR CHLOE A AQUILINA **Referred by:** DR CHLOE A AQUILINA

Name of Test: S- FERTILITY HORMONES
Requested: 29/04/2025 **Collected:** 09/06/2025 **Reported:** 10/06/2025 05:25

Clinical notes: On androfem - to monitor levels

Clinical Notes : On androfem - to monitor levels

Reproductive Hormones

				Latest Results		
Date	24-Mar-21	25-Jul-24	26-Nov-24	**09-Jun-25**		
Time F-Fast	0825 F	0720 F	0722 F	**0716 F**		
Lab Id.	658273573	686381453	684117173	**532474143**	Reference	Units
FSH	54	61	30	50		IU/L
LH	23	21	7	21		IU/L
Oestradiol	<50	<50	2530	<50		pmol/L

Reference Limits	FSH IU/L	LH IU/L	Oestradiol pmol/L
Follicular	2 - 10	2 - 7	110 - 180
Mid-Cycle	7 - 24	9 - 74	550 - 1650
Luteal	1 - 10	1 - 9	180 - 840
Menopausal	20 - 140	10 - 65	<200
OCP	<5	<9	<80

Comments on Collection 09-Jun-25 0716 F:
Falsely elevated Abbott oestradiol levels may be seen in patients on fulvestrant, mifepristone or abemaciclib.

EA

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

Tests Completed: HDL-Cholesterol,E/LFT,LH,FSH,Oestradiol,Testosterone,FBE
Tests Pending :
Sample Pending :

GALLO, AMANDA
148 KOCHI RD, ATHERTON. 4883
Phone: 0429914653
Birthdate: 18/08/1967 **Sex:** F **Medicare Number:** 4147234529
Your Reference: FB52975C9E **Lab Reference:** 532474143-H-H900
Laboratory: SNP
Addressee: DR CHLOE A AQUILINA **Referred by:** DR CHLOE A AQUILINA

Name of Test: .BLOOD COUNT
Requested: 29/04/2025 **Collected:** 09/06/2025 **Reported:** 10/06/2025 05:25

Clinical notes: On androfem - to monitor levels

Clinical Notes : On androfem - to monitor levels

Haematology

				Latest Results		
Date	30-Sep-23	25-Jul-24	26-Nov-24	**09-Jun-25**		
Time F-Fast	0839 F	0720 F	0722 F	**0716 F**		
Lab Id.	686664198	686381453	684117173	**532474143**	Reference	Units
Haemoglobin	132	138	135	145	(115-165)	g/L
Haematocrit	0.38	0.42	0.40	0.43	(0.35-0.47)	
RCC	4.3	4.7	4.4	4.8	(3.9-5.6)	10*12/L
MCV	88	89	90	90	(80-100)	fL
WCC	5.5	6.4	6.2	5.8	(3.5-10.0)	10*9/L
Neutrophils	3.27	2.78	3.47	3.07	(1.5-6.5)	10*9/L
Lymphocytes	1.58	2.95	2.18	2.19	(0.8-4.0)	10*9/L
Monocytes	0.50	0.51	0.41	0.42	(0-0.9)	10*9/L
Eosinophils	0.08	0.14	0.09	0.13	(0-0.6)	10*9/L
Basophils	0.03	0.04	0.02	0.03	(0-0.15)	10*9/L
Platelets	224	268	243	261	(150-400)	10*9/L

HA

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

Tests Completed: HDL-Cholesterol,E/LFT,LH,FSH,Oestradiol,Testosterone,FBE
Tests Pending :
Sample Pending :

GALLO, AMANDA
148 KOCHI RD, ATHERTON. 4883
Phone: 0429914653
Birthdate: 18/08/1967 **Sex:** F **Medicare Number:** 4147234529
Your Reference: FB52975C9E **Lab Reference:** 532474143-E-E515
Laboratory: SNP
Addressee: DR CHLOE A AQUILINA **Referred by:** DR CHLOE A AQUILINA

Name of Test: S- ANDROGENS
Requested: 29/04/2025 **Collected:** 09/06/2025 **Reported:** 10/06/2025 05:25

Clinical notes: On androfem - to monitor levels

Clinical Notes : On androfem - to monitor levels

Androgens

			Latest Results		
Date	25-Jul-24	26-Nov-24	**09-Jun-25**		
Time F-Fast	0720 F	0722 F	**0716 F**		
Lab Id.	686381453	684117173	**532474143**	Reference	Units
Testosterone	0.8	0.8	1.0	(<2.2)	nmol/L

JB

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

Tests Completed: HDL-Cholesterol,E/LFT,LH,FSH,Oestradiol,Testosterone,FBE
Tests Pending :
Sample Pending :

GALLO, AMANDA
148 KOCHI RD, ATHERTON. 4883
Phone: 0429914653
Birthdate: 18/08/1967 **Sex:** F **Medicare Number:** 4147234529
Your Reference: FB52975C9E **Lab Reference:** 532474143-C-C847
Laboratory: SNP
Addressee: DR CHLOE A AQUILINA **Referred by:** DR CHLOE A AQUILINA

Name of Test: S-_LIPID PROFILE
Requested: 29/04/2025 **Collected:** 09/06/2025 **Reported:** 10/06/2025 05:25

Clinical notes: On androfem - to monitor levels

Clinical Notes : On androfem - to monitor levels

Lipid Profile

Date	25-Jul-24	26-Nov-24	15-Mar-25	**Latest Results 09-Jun-25**		
Time F-Fast	0720 F	0722 F	0815 F	**0716 F**		
Lab Id.	686381453	684117173	530700182	**532474143**	Reference	Units
Cholesterol	5.2	5.5	4.5	5.5	(<5.6)	mmol/L
Triglyceride	0.9	0.7	0.6	0.7	(<2.1)	mmol/L
HDL	1.58	1.63	1.56	1.53	(>1.09)	mmol/L
LDL	3.2	3.6	2.7	3.7	(<4.1)	mmol/L
Chol/HDL Ratio	3.3	3.4	2.9	3.6	(<4.6)	
Non HDLC	3.62	3.87 H	2.94	3.97 H	(<3.81)	mmol/L

Comments on Collection 09-Jun-25 0716 F:
HDL-Cholesterol
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
HDL-Cholesterol	>=1.00	mmol/L
Fasting Triglycerides	<2.0	mmol/L
Non-HDL Cholesterol	<2.5	mmol/L

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

CA

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

Tests Completed: HDL-Cholesterol,E/LFT,LH,FSH,Oestradiol,Testosterone,FBE
Tests Pending :
Sample Pending :

GALLO, AMANDA
148 KOCHI RD, ATHERTON. 4883
Phone: 0429914653
Birthdate: 18/08/1967 **Sex:** F **Medicare Number:** 4147234529
Your Reference: FB52975C9E **Lab Reference:** 532474143-C-C140
Laboratory: SNP
Addressee: DR CHLOE A AQUILINA **Referred by:** DR CHLOE A AQUILINA

Name of Test: S-_ROUTINE CHEMISTRY
Requested: 29/04/2025 **Collected:** 09/06/2025 **Reported:** 10/06/2025 05:25

Clinical notes: On androfem - to monitor levels

Clinical Notes : On androfem - to monitor levels

Chemistry (serum)

				Latest Results		
Date	25-Jul-24	26-Nov-24	15-Mar-25	**09-Jun-25**		
Time F-Fast	0720 F	0722 F	0815 F	**0716 F**		
Lab Id.	686381453	684117173	530700182	**532474143**	Reference	Units
Sodium	139	136		139	(135-145)	mmol/L
Potassium	3.9	3.8		3.8	(3.5-5.5)	mmol/L
Chloride	108	105		105	(95-110)	mmol/L
Bicarbonate	23	24		26	(20-32)	mmol/L
Anion Gap	8	7		11.4 8	(<16)	mmol/L
Calcium (Corr.)	2.37	2.29		2.25	(2.10-2.60)	mmol/L
Phosphate	1.25	1.09		1.10	(0.80-1.50)	mmol/L
Urea	4.1	4.1		4.0	(3.0-8.0)	mmol/L
Urate	0.227	0.269		0.250	(0.150-0.400)	mmol/L
Creatinine	55	61		64	(45-85)	umol/L
eGFR	>90	>90		>90	(>59)	
Fast. Glucose	5.1	5.3		4.8	(3.6-6.0)	mmol/L
Total Protein	68	62 L		65	(63-80)	g/L
Albumin	42	40		43	(32-44)	g/L
Globulin	26	22 L		22 L	(23-43)	g/L
T Bilirubin	6	10		13	(<16)	umol/L
ALP = Bone	50	41		34	(30-115)	U/L
AST	27	22		22	(10-35)	U/L
ALT	23	21		20	(5-30)	U/L
GGT	27	28		35	(5-35)	U/L
LD	188	167		184	(<250)	U/L
Cholesterol	5.2	5.5	4.5	5.5	(<5.6)	mmol/L
Triglyceride	0.9	0.7	0.6	0.7	(<2.1)	mmol/L
Haemolysis Index	4	3	33	5	(<40)	mg/dL

Liver

<13

CA

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

Tests Completed: HDL-Cholesterol,E/LFT,LH,FSH,Oestradiol,Testosterone,FBE
Tests Pending :
Sample Pending :

GALLO , AMANDA
148 KOCI ROAD, ATHERTON QLD 48 ATHERTON 4883
Phone:

Birthdate:	18/08/1967	**Sex:**	F	**Medicare Number:**	
Your Reference:		**Lab Reference:**	CPH23264600-US Upper		
Laboratory:	qxr				
Addressee:	DR CHLOE AQUILINA	**Referred by:**	CHLOE DR AQUILINA		
Name of test:	US Upper Abdomen, Time 1000hrs				
Requested	29/04/2025	**Collected:**	18/06/2025	**Reported:**	18/06/2025 10:33:00

Apollo RIS Patient Id : QXR1183914
Patient Name : GALLO AMANDA **DOB :** 18/08/1967 **Service Date :** 18/06/2025

A .PDF version of this report is available until 18-06-2026. PIN: 8991

QXRMJV
EXAMINATION:

ULTRASOUND ABDOMEN

HISTORY:
Monitor of GB polyps from scan 2 years ago. Also review renal probably angiomyolipoma on right kidney. Asymptomatic.

COMPARISON:
Comparison has been made to previous US abdomen on 28/09/2023.

FINDINGS :

Liver: The liver is normal in size, echogenicity and appearance with no focal lesion identified.

Portal Vein: The portal vein measures 6 mm in diameter. Antegrade flow is demonstrated. Velocity in the main portal vein is 22.9 cm/s.

Gallbladder: The gallbladder wall measures 2.3 mm in thickness. There are multiple sessile gallbladder polyps, the largest measuring 7 mm. The gallbladder is non-tender.

Bile Duct: The common bile duct measures 3.7 mm. There is no bile duct dilatation.

Spleen: The spleen is 103 mm in length. The spleen appears normal.

Pancreas: The visualised pancreas appears normal.

Right Kidney: The right kidney measures 111 mm in length. There is a 4 x 6 x 4 mm cortical hyperechoic, solid lesion in the lower pole. The lesion has no vascularity demonstrated. It previously measured 4 x 4 x 3 mm. This probably represents an angiomyolipoma. There is no hydronephrosis or calculus.

Left Kidney: The left kidney measures 112 mm in length. There is no hydronephrosis, calculus or renal mass.

Aorta: The abdominal aorta is not dilated with a maximum diameter of 15 mm.

Ascites: There is no ascites.

CONCLUSION:
Within limitations of interobserver variability, there is impression of minimal interval increase of some of the multiple gallbladder polyps, now measuring up to 7 mm (previously up to 5 mm).
Within limitations of interobserver variability, there is impression of mild interval increase of the probable right kidney angiomyolipoma, measuring now approximately 6 mm (previously 4 mm).

Suggested Gallbladder Polyp Management Guidelines

Pedunculated Polyps
<6 mm No follow up
6-9 mm No Risk Factors: Follow up at 6 months, 1 year, 2 years
Risk Factors (Age > 60 years or Asian/Indian ethnicity): Surgical opinion for consideration of cholecystectomy

=>10 mm Surgical opinion for consideration of cholecystectomy
Sessile polyps/Focal wall thickening >= 4 mm adjacent to polyp
=<6 mm Follow up 6 months, 1 year, 2 years vs surgical consultation
=>7 mm Surgical consultation for consideration of cholecystectomy

If polyp demonstrates rapid sustained growth (>= 4 mm within 1 year) at any time a surgical opinion for consideration of cholecystectomy suggested.
If a polyp reduces in size by >= 4 mm or disappears, follow up can be discontinued

Sources:
1. Management and follow-up of gallbladder polyps: updated joint guidelines between the ESGAR, EAES, EFISDS and ESGE; Foley K, Lahaye M, Thoeni R et al, 2021.
2. Management of Incidentally Detected Gallbladder Polyps: Society of Radiologists in Ultrasound Consensus Conference Recommendations; Kamaya A, Fung C, Szpakowski J et al, 2022.

Dr Marcelo Santos Teles
Queensland XRay

Patient images can be accessed using the following link:

Click **here**

If you have feedback regarding this report please call Referrer Help Desk on 1800 77 99 77 or email referrerhelpdesk@qldxray.com.au

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