

Lab ID 881043459

DOB 03/03/1987 (35 Yrs FEMALE)

Referrer Dr Angela Mcphee

Your ref.

Address WESTMEAD SPEC MED CTR SUITE 206 LEVEL 2 151-155
HAWKESBURY ROAD
WESTMEAD NSW 2145

Address 29 MOUNT STREET
GLENBROOK NSW 2773

Phone 0296351234

Phone 0455585166

Copy to Dr Magdalena Mironowicz (0247391555)

Requested 20/06/2022

Clinical Notes FERTILITY WORKUP ON OROXINE

Collected 24/06/2022 08:40

Received 24/06/2022 08:44

Reproductive Hormones (Abbott Method)

Test Name	Result	Units	Reference Interval
FSH	7.2	IU/L	
LH	4.5	IU/L	
Oestradiol	197	pmol/L	
Progesterone	7.7	nmol/L	

Comments

FSH	Basal	1.5 - 10
	Mid cycle peak	7.0 - 22
	Post-menopausal	25 - 130
LH	Basal	2.0 - 12
	Mid cycle peak	8.0 - 90
	Post-menopausal	5.0 - 62
Oestradiol	Follicular phase	<320
	Preovulatory phase	450 - 2000
	Luteal phase	125 - 1300
	Post-menopausal	<170
Progesterone	Follicular phase	0.3 - 4.0
	Luteal phase	5.5 - 90.0
	Midluteal	8.5 - 110.0

NATA ACCREDITATION NO 2178

Reported on 24-06-2022 18:43

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Biochemistry

Test Name	Result	Units	Reference Interval
Status	Fasting		
Sodium	141	mmol/L	135 - 145
Potassium	4.0	mmol/L	3.5 - 5.5
Chloride	104	mmol/L	95 - 110
Bicarbonate	28	mmol/L	20 - 32
Urea	5.9	mmol/L	2.5 - 7.0
Creatinine	60	umol/L	45 - 85
eGFR	>90	mL/min/1.73m2	>59
Total Bilirubin	10	umol/L	3 - 15
Alk Phos	44	U/L	20 - 105
Gamma GT	12	U/L	5 - 35
LDH	162	U/L	120 - 250
AST	24	U/L	10 - 35
ALT	22	U/L	5 - 30
● Total Protein	66 L	g/L	68 - 85
Albumin	43	g/L	37 - 48
Globulin	23	g/L	23 - 39

Comments

eGFR (mL/min/1.73m2) calculated by CKD-EPI formula - see www.kidney.org.au

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Reported on 24-06-2022 12:10

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25-OH Vitamin D

Test Name	Result	Units	Reference Interval
Vitamin D	73	nmol/L	50 - 140

Comments

According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11):686-687, 2012, Vitamin D status is defined as:

Mild Deficiency	30	-	49 nmol/L
Moderate Deficiency	12.5	-	29 nmol/L
Severe Deficiency	<12.5		nmol/L

Vitamin D adequacy can be defined as a level >49 nmol/L at the end of winter - the level may need to be 10 - 20 nmol/L higher at the end of summer, to allow for seasonal decrease.

From 1st November 2014, Medicare rebates for vitamin D testing will apply to patients at risk of Vitamin D deficiency such as chronic lack of sun exposure.

NATA ACCREDITATION NO 2178

Reported on 24-06-2022 20:46

Glucose

Test Name	Result	Units	Reference Interval
Glucose Fasting	4.3	mmol/L	3.6 - 6.0

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Reported on 24-06-2022 12:02

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Thyroid Function

Test Name	Result	Units	Reference Interval
● TSH	0.31 L	mIU/L	0.40 - 3.50
Free T4	14.1	pmol/L	9.0 - 19.0
Free T3	4.7	pmol/L	2.6 - 6.0

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Reported on 24-06-2022 18:58

HIV Antigen and Antibody

HIV 1/2 Antigen and Antibody Negative

Comments

If serum was taken less than 3 months after exposure, this result may not exclude HIV-1/HIV-2 infection. Therefore another serum specimen should be tested after that time.

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Reported on 24-06-2022 20:43

Hepatitis B Serology

Hepatitis B Surface Ag Not Detected

Comments

Hepatitis B - Surface antigen not detected. No serological evidence of current hepatitis B infection (acute or chronic).

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Reported on 24-06-2022 19:00

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Hepatitis C Serology

Hepatitis C Ab (Abbott) Not Detected

Comments

Hepatitis C - No evidence of infection with Hepatitis C. Seroconversion is sometimes delayed and repeat testing up to 6 months post-exposure may be necessary to exclude infection.

NATA ACCREDITATION NO 2178

Reported on 24-06-2022 20:43

Prolactin (Roche Method)

Prolactin (Total) 213 mIU/L 85 - 500

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Reported on 24-06-2022 23:23

Active B12

Test Name	Result	Units	Reference Interval
Active B12	96	pmol/L	>35

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Reported on 24-06-2022 18:58

Biomarkers

Cancer Antigen 125 10 U/mL <36

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Cortisol

Cortisol am	225	nmol/L	138 - 650
Collection Time	0840	Hrs	

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Reported on 27-06-2022 10:02

Thyroglobulin and/or Thyroid Antibodies

Thyroglobulin Ab	1.6	IU/mL	<4.1
Thyroid Peroxidase Ab	52.7 H	IU/mL	<5.6

Comments

Elevated levels of thyroid peroxidase antibodies occur in Hashimoto's disease, other thyroid disorders and in clinically normal persons.

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Received 24/06/2022 08:44

Haemoglobin A1c

Test Name	Result	Units	Reference Interval
HbA1c (IFCC)	31	mmol/mol	20 - 38
HbA1c (NGSP)	5.0	%	4.0 - 5.6

Comments

HbA1c less than 48 mmol/mol (6.5%) does not exclude a diagnosis of diabetes mellitus based upon elevated glucose results. The existing diagnostic criteria for fasting and random glucose levels and for oral glucose tolerance testing remain valid, and are the diagnostic tests of choice for gestational diabetes, type 1 diabetes and in the presence of conditions that interfere with HbA1c measurement. Conditions which may affect the measured HbA1c value include any of the haemolytic anaemias, anaemia of chronic disease, severe liver disease, vitamin B12 and/or folate deficiency, the haemoglobinopathies and regular phlebotomy performed for medical indications or for blood donation. It also should be noted that further investigation is required for any inexplicably low HbA1c level or significant discrepancy between HbA1c and glucose results.

Please note that of 19/08/2021, HbA1c measurement changed from the Biorad D-100 to the Sebia Capillars 3 method.

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Reported on 24-06-2022 21:23

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Received 24/06/2022 08:44

Anti-Mullerian Hormone (AMH)

Anti-Mullerian Hormone (Roche Plus)	5.7	pmol/L	1.1 - 53.5
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Comments

The reference interval quoted above for the Roche AMH Plus assay is the age-related 2.5 - 97.5 percentile.

Generally accepted fertility criteria (not age-related):

- <11.0 pmol/L: Suggestive of reduced ovarian reserve
- >24.0 pmol/L: Indicates the possibility of
 1. Polycystic Ovarian Syndrome
 2. In post-menopausal females - granulosa cell tumour
 3. Increased risk of Ovarian Hyperstimulation

Syndrome in a stimulated cycle

AMH is produced by the granulosa cells of developing follicles, and provides an estimate of the number of primordial follicles. Particularly in younger women, a low AMH level does not exclude the possibility of fertility.

Levels may be decreased in the latter part of the menstrual cycle and by the OC pill.

High dose biotin (Vitamin B7) can interfere in the AMH Plus assay, causing a falsely low result. High dose biotin may be used in the treatment of Multiple Sclerosis, and is present in certain vitamin supplements, particularly those for hair and nails. If the patient is taking high dose biotin supplementation (>5 mg/day) this result may not be accurate, please repeat this test after at least 3 days off biotin

Please note change in test method from 10/9/2018 from Beckman Access to Roche AMH Plus, with results now approximately 20% lower. Analytical results and percentile cutoffs may not be directly comparable between these methods. For further information please contact Drs Price or Kanowski on 07 3377 8670.

Reported by Sullivan and Nicolaides Pathology, a member of the Sonic Healthcare Group.

NATA ACCREDITATION NO 2178

Reported on 28-06-2022 14:24

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Vitamin B12 and Folate

Test Name	Result	Units	Reference Interval
Serum Folate	34.4	nmol/L	>7.0

NATA ACCREDITATION NO 2178

Reported on 24-06-2022 19:12

Haematology

Test Name	Result	Units	Reference Interval
Haemoglobin	120	g/L	119 - 160
Red cell count	4.0	$\times 10^{12}/L$	3.8 - 5.8
Haematocrit	0.35		0.35 - 0.48
MCV	87	fL	80 - 100
MCH	29.9	pg	27.0 - 32.0
MCHC	342	g/L	310 - 360
RDW	12.2		10.0 - 15.0
White cell count	4.8	$\times 10^9/L$	4.0 - 11.0
Neutrophils	2.83	$\times 10^9/L$	2.0 - 7.5
Lymphocytes	1.61	$\times 10^9/L$	1.0 - 4.0
Monocytes	0.31	$\times 10^9/L$	0.0 - 1.0
Eosinophils	0.05	$\times 10^9/L$	0.0 - 0.5
Basophils	0.04	$\times 10^9/L$	0.0 - 0.3
NRBC	<1.0	/100 WBC	<1
Platelets	189	$\times 10^9/L$	150 - 450

Comments

Full blood count is within reference limits

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Reported on 24-06-2022 10:29

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Coeliac Serology

Deamidated Gliadin IgA	1	U/mL	<15
Deamidated Gliadin IgG	<1	U/mL	<15
Tissue Transglutaminase IgA	<1	U/mL	<15
Tissue Transglutaminase IgG	<1	U/mL	<15

Comments

Performed on Bioplex 2200. This detects selective IgA deficiency (<0.07 g/L), an additional comment will be attached if detected.

In persons eating wheat (most days, last six weeks), negative serology effectively excludes coeliac disease/dermatitis herpetiformis. One elevated marker may occur without disease whereas two or more elevated (at four times the cutoff level) markers strongly predict coeliac disease which can be confirmed by biopsy.

Serology becomes negative on gluten free diet (6-9 months for IgA-deam gliadin and IgA-tTG, 9-15 months for IgG-deam gliadin and IgG-tTG). Without compliance, coeliac markers rise. Coeliac tissue-typing excludes coeliac disease risk by excluding HLA-DQ2 or DQ8 in persons with discordant serology or discordant serology-biopsy findings.

NATA ACCREDITATION NO 2178

Reported on 25-06-2022 12:36

Immunoglobulins

Immunoglobulin A	2.03	g/L	0.60 - 3.96
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Rubella Serology

Rubella IgG (CMIA)	18	IU/mL
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Comments

<5 IU/mL: Not immune
5-9 IU/mL: Equivocal
>=10 IU/mL: Immune

Antibody detected. In an asymptomatic individual this result is consistent with past infection or vaccination and correlates with protective immunity.

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LAB ID 881043459 DOB 03/03/1987 (35Y Female)

Referring Doctor Dr Angela McPhee

Your ref.

Address 29 Mount Street
GLENBROOK NSW 2773

Phone 0455 585 166

Requested 20 Jun 2022

Collected 24 Jun 2022 08:40 am

Received 24 Jun 2022 08:44 am

Reported 28 Jun 2022 14:27 pm

Dr Angela McPhee
Westmead Spec Med Ctr
Suite 206 Level 2
151-155 Hawkesbury Road
WESTMEAD NSW 2145

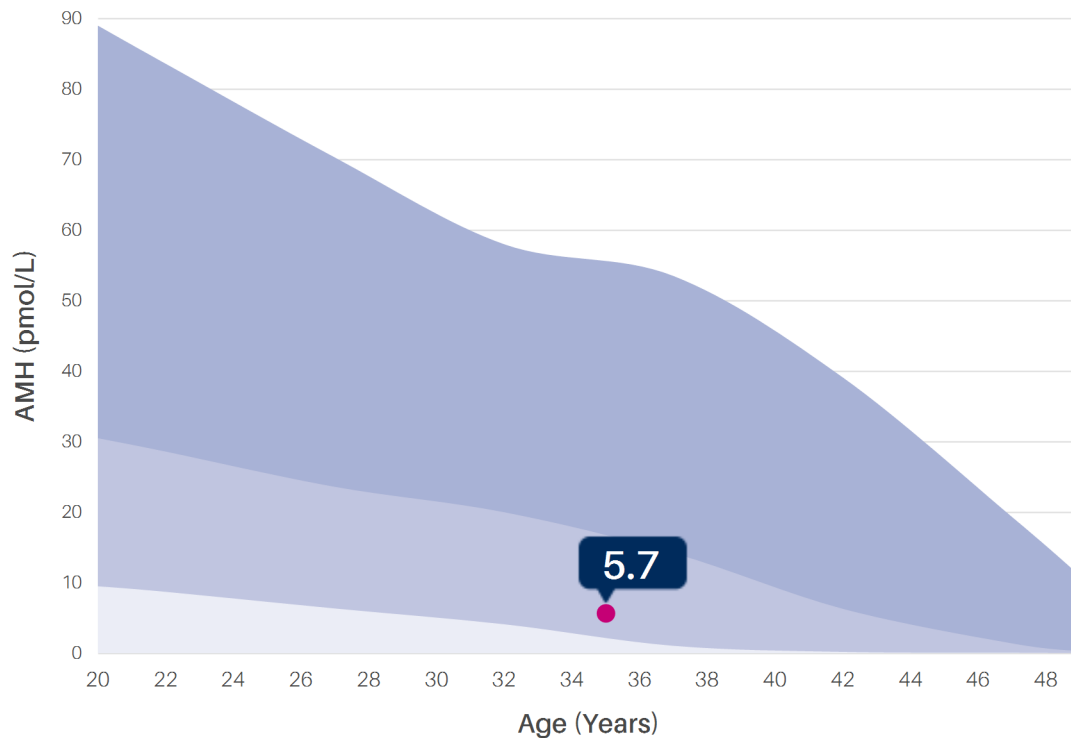
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Anti-Mullerian Hormone (AMH)

Marker of Ovarian Follicle Reserve

Collected	Test	Result	Units
24 Jun 2022 08:40 am	AMH	5.7	pmol/L



Assay used: Anti Mullerian H Snp

Specimen collected: Serum

REFERENCE: < 2.5th percentile 2.5th-50th percentile 50th-97.5th percentile >97.5th percentile