

Patient Name: VIJAY, PEARL
Patient Address: 19/5-15 BELAIR CLOSE, HORNSBY 2077
D.O.B: 14/05/1983
Medicare No.: 2819986811
Lab. Reference: 868177687-C-E613
Addressee: DR RADHA SIVAKUMARAN
Gender: F
IHI No.:
Provider: dhm
Referred by: Dr Radha Sivakumaran
Date Requested: 11/01/2022
Date Collected: 31/01/2022
Specimen:
Subject(Test Name): TG OR THY AB
Clinical Information:
Date Performed: 31/01/2022
Complete: Final

Clinical Notes : AS PER PT REQ

Thyroglobulin and/or Thyroid Antibodies

Thyroglobulin Ab	2.4	IU/mL	(<4.1)
Thyroid Peroxidase Ab	0.8	IU/mL	(<5.6)

Comment on Lab ID 868177687

NATA Accreditation No 2178

Tests Completed: FT3(s), Thyroid Abs(s)
Tests Pending : FT4(s)
Sample Pending :

Patient Name: VIJAY, PEARL
Patient Address: 19/5-15 BELAIR CLOSE, HORNSBY 2077
D.O.B: 14/05/1983
Medicare No.: 2819986811
Lab. Reference: 866909510-C-E673
Addressee: DR RADHA SIVAKUMARAN

Date Requested: 11/01/2022
Date Collected: 31/01/2022
Specimen:
Subject(Test Name): GTT/INSULIN
Clinical Information:

Gender: F
IHI No.:
Provider: dhm
Referred by: Dr Radha Sivakumaran

Date Performed: 31/01/2022
Complete: Final

Clinical Notes : AS PER PT REQ

Glucose Tolerance Test with Insulins

Glucose load 75 g

	Plasma Glucose			Insulin	
Fasting	H 6.8	mmol/L	(3.6 - 6.0)	70	mU/L
1 Hour	6.3	mmol/L		80	mU/L
2 Hours	6.3	mmol/L	(3.6 - 7.7)	65	mU/L

Comment on Lab ID 866909510

Impaired fasting glycaemia. Results, however, do not satisfy the diagnostic criteria for diabetes mellitus or impaired glucose tolerance. Follow-up is recommended.

Reference Limits for Insulin Resistance

Normal: <10 mU/L Fasting, <60 mU/L Post-load.

In a non-pregnant patient, Insulin(s) >80 mU/L following a 75g oral glucose load and/or fasting insulin(s) >14 mU/L (in the absence of insulinoma) are consistent with insulin resistance. Post-load insulin(s) of 60 - 80 mU/L and/or fasting insulin(s) of 10 - 14 mU/L are suggestive of insulin resistance. Further follow up is recommended in the presence of risk factors such as past gestational diabetes, polycystic ovaries, obesity or family history of type II diabetes. Insulin measured by Abbott method.

NATA Accreditation No 2178

Tests Completed: GTT(p), T Ins(s)
Tests Pending :
Sample Pending :

Patient Name: VIJAY, PEARL
Patient Address: UNIT 25 5-15 BELAIR CLOSE, HORNSBY 2077
D.O.B: 14/05/1983
Medicare No.: 2819986811
Lab. Reference: 846769676-C-E673
Addressee: DR RADHA SIVAKUMARAN

Gender: F
IHI No.:
Provider: dhm
Referred by: Dr Radha Sivakumaran

Date Requested: 23/09/2020
Date Collected: 24/09/2020
Specimen:
Subject(Test Name): GTT/INSULIN
Clinical Information:

Date Performed: 24/09/2020
Complete: Final

Clinical Notes : HAIR LOSS , OVERWEIGHT

Glucose Tolerance Test with Insulins

Glucose load	75	g		
	Plasma Glucose			Insulin
Fasting	5.4	mmol/L	(3.6 - 6.0)	13 mU/L
1 Hour	7.4	mmol/L		84 mU/L
2 Hours	6.3	mmol/L	(3.6 - 7.7)	75 mU/L

Comment on Lab ID 846769676

Results do not satisfy diagnostic criteria for impaired fasting glycaemia or impaired glucose tolerance.

Reference Limits for Insulin Resistance

Normal: <10 mU/L Fasting, <60 mU/L Post-load.

In a non-pregnant patient, Insulin(s) >80 mU/L following a 75g oral glucose load and/or fasting insulin(s) >14 mU/L (in the absence of insulinoma) are consistent with insulin resistance. Post-load insulin(s) of 60 - 80 mU/L and/or fasting insulin(s) of 10 - 14 mU/L are suggestive of insulin resistance. Further follow up is recommended in the presence of risk factors such as past gestational diabetes, polycystic ovaries, obesity or family history of type II diabetes.
Insulin measured by Abbott method.

Supervising Pathologist: GC, NT

NATA Accreditation No 2178

Tests Completed: B12(s), LFT(s), C(s), UCreat(s), E(s), HDL & LIPIDS, Ca(s), Ferr(s), Vit D(s), TSH(s), GTT(p), T Ins(s), FBC(e)

Tests Pending :
Sample Pending :