

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980

**Sex:** M

**Reported:** 11/12/2023 12:05

**Reference:**

**Phone No:** 0420 244 738

**Referred:** 28/Nov/2023

**Collected:** 07/12/2023 08:30

**Tested:** 07/12/2023 14:33

**UR/MR No.:** 10451

**Lab No:** 23-81580604-PRB-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** PRB-Apolipoprotein B

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

TEST NAME: Apolipoprotein B

This test was performed by:  
Pathology, St Vincent's Hospital  
41 Victoria Parade  
Fitzroy Vic 3065  
Tel: (03) 9288 4223

Report was received on 11/12/2023 12:05 pm

REF LAB ID 23P811243

Results received from testing institution

Request No: P755994 P811243

Date: 14/11/23 07/12/23

Time: 08:15 08:30

Units Ref Range

SPECIAL LIPIDS (Serum/Plasma)

APO B 1.03 **1.38H** g/L <1.20

GLS-R GHB-R HCY-R INS-R FBE-R LIP-R CA-R ECU-R LFT-R CRP-R P

All tests on this request have now been completed

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 17:12	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-GHB-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b>	GHB-Glycated Hb		

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

BIOCHEMISTRY

HAEMOGLOBIN A1c

SPECIMEN: WHOLE BLOOD

Date	Coll Time	Req. No.	IFCC	DCCT
			HbA1c (mmol/mol)	HbA1c (%)
07/12/23	08:30	81580604	31	5.0
14/11/23	08:15	81580832	33	5.2

81580604 HbA1c consistent with euglycaemic state.

INTERPRETATION CRITERIA

DIAGNOSIS.

A HbA1c greater than or equal to 48 mmol/mol ( 6.5 %) is consistent with diabetes. Consider OGTT or repeat HbA1c for confirmation.  
HbA1c 6.0 - 6.4% is consistent with prediabetes. Repeat testing annually is recommended. (ADS position statement 2020)

MONITORING.

The Australian Diabetes Society (ADS) recommends individualised HbA1c targets depending on the patient's age, comorbidities and any Hypoglycaemia (ADS position statement 2009).  
A general target of less than or equal to 53 mmol/mol (7.0%) is often used.

Please note that Hb A1c results may be influenced by conditions affecting red cells or their survival times such as haemoglobinopathies, anaemias, recent transfusion or blood loss.

HbA1c tested on Roche c513 using Gen. 3 assay.

GLS-R GHB-C HCY-R INS-R FBE-R LIP-R CA-R ECU-R LFT-R CRP-R P

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980

**Sex:** M

**Reported:** 07/12/2023 16:12

**Reference:**

**Phone No:** 0420 244 738

**Referred:** 28/Nov/2023

**Collected:** 07/12/2023 08:30

**Tested:** 07/12/2023 14:33

**UR/MR No.:** 10451

**Lab No:** 23-81580604-HCY-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** HCY-Homocysteine

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

GENERAL CHEMISTRY

**HOMOCYSTEINE**

**SPECIMEN: SERUM**

Date	Time	Lab No.	Fasting status	Homocysteine	Units	Ref Range
07/12/23	08:30	81580604	Fasting	6.8	umol/L	(5.0 - 15.0)
14/11/23	08:15	81580832	Not Stated	* <b>4.2</b>		

81580604 Normal homocysteine level.

Homocysteine concentrations have been used to categorise

Cardiovascular risk:

<10 umol/L	-	desirable
10 - 15 umol/L	-	intermediate risk
15 - 30 umol/L	-	high risk
>30 umol/L	-	very high risk.

GLS-R GHB-W HCY-C INS-R FBE-R LIP-R CA-R ECU-R LFT-R CRP-R P

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 15:26	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-MBI-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b> MBI-Multiple Biochem Analysis			

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

GENERAL CHEMISTRY			SPECIMEN: SERUM	
Date:	07/12/23	14/11/23		
Coll. Time:	08:30	08:15		
Lab Number:	81580604	81580832		
-----				
Sodium	138	142	(135 - 145)	mmol/L
Potassium	4.1	4.5	(3.5 - 5.2)	mmol/L
Chloride	104	108	(95 - 110)	mmol/L
Bicarbonate	29	29	(22 - 32)	mmol/L
Urea	** 10.0	7.7	(3.5 - 8.0)	mmol/L
Creatinine	89	87	(60 - 110)	umol/L
eGFR	> 90	> 90	(> 59) mL/min/1.73m2	
Calcium	2.28	2.25	(2.10 - 2.60)	mmol/L
Adj. Ca.	2.33	2.27	(2.10 - 2.60)	mmol/L
T.Protein	62	* 59	(60 - 80)	g/L
Albumin	37	39	(35 - 50)	g/L
Globulin	25	* 20	(23 - 39)	g/L
ALP	63	87	(30 - 110)	U/L
Bilirubin	13	12	(3 - 20)	umol/L
GGT	17	16	(5 - 50)	U/L
AST	21	27	(5 - 35)	U/L
ALT	30	* 44	(5 - 40)	U/L

81580604 ELECTROLYTES

Raised urea with normal creatinine may be seen in dehydration, increased protein catabolism (e.g. G.I.T. bleed), cardiac failure or early renal impairment.

Please note: from 09.11.23 new reference intervals apply for Liver Function Tests. These are sourced from the RCPA Harmonised Reference Intervals (v2.0) document.

GLS-R GHB-W HCY-W INS-R FBE-R LIP-R CA-C ECU-C LFT-C CRP-R R

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 15:13	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-LS-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b> LS-Lipid Studies			

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

BIOCHEMISTRY

LIPID STUDIES			SPECIMEN: SERUM	
Date:	07/12/23	14/11/23		
Coll. Time:	08:30	08:15	Desirable Range	
Lab Number:	81580604	81580832	(Fasting)	
-----				
Fasting Status	Fasting	Fasting		
Total Chol.	* 6.0	5.1	(< 5.6)	mmol/L
HDL Chol.	1.5	1.6	(> 0.9)	mmol/L
LDL Chol.	* 4.1	* 3.2	(< 3.1)	mmol/L
Non-HDL Chol.	* 4.5	3.5	(< 4.1)	mmol/L
Triglyceride	0.9	0.6	(< 2.1)	mmol/L
LDL/HDL Ratio	2.7	2.0		
Chol/HDL Ratio	4.0	3.2		

81580604 Moderate elevation in LDL-Cholesterol. Interpret in conjunction with other cardiovascular risk factors or treatment targets.

Please note, from 27/09/2023, modified lipid reference ranges apply.

Recommended targets for high risk patients are  
Total cholesterol < 4.0 mmol/L  
HDL Cholesterol > 1.0 mmol/L  
LDL Cholesterol < 2.5 mmol/L ( < 1.8 mmol/L for very high risk)  
Non-HDL Cholesterol < 3.3 mmol/L ( < 2.5 mmol/L for very high risk)  
Fasting triglycerides < 2.0 mmol/L

Lipid ranges and targets are from the AACB Guideline for Harmonised Lipid Reporting (2018)  
Target values need to be individualised based on clinical assessment of overall risk.  
See the AusCVD Risk calculator at [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

GLS-C GHB-W HCY-W INS-C FBE-C LIP-C CA-W ECU-W LFT-W CRP-C R

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 15:13	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-GLS-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b> GLS-Glucose			

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

BIOCHEMISTRY

GLUCOSE

Date	Time	Lab#	Collection Type	Specimen	Glucose (mmol/L)
-----					
07/12/23	08:30	81580604	Fasting	serum	4.4
14/11/23	08:15	81580832	Not stated	serum	4.7

81580604 Normal fasting glucose.  
NOTE: HbA1c has been requested.

Glucose Reference Ranges

Random	3.0 - 6.9 mmol/L
Fasting	3.0 - 5.4 mmol/L
1 Hour post prandial	3.0 - 11.0 mmol/L
2 Hour post prandial	3.0 - 7.7 mmol/L

Specimen Legend:

F1-ox = Fluoride oxalate, serum = Serum, np = Non-Preserved

GLS-C GHB-W HCY-W INS-C FBE-C LIP-W CA-W ECU-W LFT-W CRP-C R

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 15:12	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-INS-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
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<b>Test:</b>	INS-Insulin		

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

ENDOCRINOLOGY

INSULIN STUDIES				SPECIMEN: SERUM	
Date	Time	Lab No.	Insulin	Ref Range	Units
<hr/>					
07/12/23	08:30	81580604	2	(See below)	mU/L
14/11/23	08:15	81580832	* 1		

Insulin Reference Ranges:

Fasting	2 - 12 mU/L
2hr post prandial	5 - 30 mU/L

GLS-W GHB-W HCY-W INS-C FBE-C LIP-W CA-W ECU-W LFT-W CRP-C R

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	28/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	07/12/2023 08:30
<b>Sex:</b>	M	<b>Tested:</b>	07/12/2023 14:33
<b>Reported:</b>	07/12/2023 15:12	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580604-CRP-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b> CRP-C-Reactive Protein			

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

BIOCHEMISTRY

C REACTIVE PROTEIN (CRP)

SPECIMEN: SERUM

Date	Time	Lab No.	CRP	Units	Ref. Range
07/12/23	08:30	81580604	< 0.7	mg/L	(< 3.0)

In the setting of infection, CRP levels >100 mg/L are supportive of bacterial rather than viral aetiology.

Note results from this CRP assay should not be used for cardiac risk assessment. Please request the high sensitivity assay (hsCRP) instead.

GLS-W GHB-W HCY-W INS-C FBE-C LIP-W CA-W ECU-W LFT-W CRP-C R

This request has other tests in progress at the time of reporting



**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980

**Sex:** M

**Reported:** 07/12/2023 15:09

**Reference:**

**Phone No:** 0420 244 738

**Referred:** 28/Nov/2023

**Collected:** 07/12/2023 08:30

**Tested:** 07/12/2023 14:33

**UR/MR No.:** 10451

**Lab No:** 23-81580604-HAE-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** HAE-Haematology General

**CLINICAL NOTES:** TELEHEALTH; Rapamycin;

HAEMATOLOGY

SPECIMEN: WHOLE BLOOD

Date:	<b>07/12/23</b>	14/11/23	(#Refers to current
Coll. Time:	08:30	08:15	result only)
Lab Number:	#81580604	81580832	

<b>HAEMOGLOBIN</b>	141	152	(125 - 175) g/L
RBC	4.61	4.86	(4.50 - 6.50) x10 <sup>12</sup> /L
HCT	0.42	0.45	(0.40 - 0.55)
MCV	92	92	(80 - 99) fL
MCH	30.6	31.3	(27.0 - 34.0) pg
MCHC	332	340	(310 - 360) g/L
RDW	12.1	12.4	(11.0 - 15.0) %
<b>WCC</b>	<b>* 3.3</b>	<b>* 3.7</b>	(4.0 - 11.0) x10 <sup>9</sup> /L
Neutrophils	<b>** 1.4</b>	<b>* 1.9</b>	(2.0 - 8.0) x10 <sup>9</sup> /L
Lymphocytes	1.4	1.4	(1.0 - 4.0) x10 <sup>9</sup> /L
Monocytes	0.5	0.3	(< 1.1) x10 <sup>9</sup> /L
Eosinophils	0.0	< 0.1	(< 0.7) x10 <sup>9</sup> /L
Basophils	< 0.1	< 0.1	(< 0.3) x10 <sup>9</sup> /L
<b>PLATELETS</b>	222	229	(150 - 450) x10 <sup>9</sup> /L

#81580604 : Moderate neutropenia with otherwise normal analyser differential. Consider medication effect, autoimmune or post viral causes.

GLS-W GHB-W HCY-W INS-W FBE-C LIP-W CA-W ECU-W LFT-W CRP-W R

This request has other tests in progress at the time of reporting

Australian Clinical Labs 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	08/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	14/11/2023 08:15
<b>Sex:</b>	M	<b>Tested:</b>	14/11/2023 08:39
<b>Reported:</b>	20/11/2023 15:05	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580832-LPA-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX

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**Test:** LPA-Lipoprotein A

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**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

TEST NAME: Lipoprotein (a)

This test was performed by:  
St. Vincent's Pathology  
41 Victoria Parade  
Fitzroy Vic 3065  
Tel: (03) 9288 4223

Test was referred on 15/11/23

Report was received on 20/11/2023 3:05 pm

REF LAB ID 23P755994

Results received from testing institution

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Request No: P755994  
Date: 14/11/23  
Time: 08:15  
Units Ref  
Range  
-----  
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SERUM/PLASMA  
Lp(a) **103H** nmol/L <75

Lp(a) is a casual and continuous atherogenic risk factor that is independent of traditional lipid parameters, diet and exercise. According to the HEART UK consensus statement the following cardiovascular risk applies.

Lp(a) Concentration (nmol/L)	Cardiovascular risk
32 - 90	Minor
90 - 200	Moderate
200 - 400	High
>400	Very High

Please contact our Chemical Pathologist on 9231 3638 with clinical enquiries.

Lp(a) is measured using the Binding Site Optilite assay, which is traceable to international standard WHO/IFCC SRM-2B. This assay measures Lp(a) in nmol/L and correlates with Lp(a) particle concentration, the formative marker of atherogenic risk. Accurate conversion of mass to molar concentration of Lp(a) is not possible due to high variability in Lp(a) particle size. For more information, please contact the laboratory on 9231 4093.

GLS-R GHB-R HCY-R INS-R FBE-R LIP-R CA-R ECU-R LFT-R SCR-R P

All tests on this request have now been completed

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980  
**Sex:** M  
**Reported:** 16/11/2023 15:05

**Reference:**  
**Phone No:** 0420 244 738

**Referred:** 08/Nov/2023

**Collected:** 14/11/2023 08:15

**Tested:** 14/11/2023 08:39

**UR/MR No.:** 10451

**Lab No:** 23-81580832-PRB-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** PRB-Apolipoprotein B

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

TEST NAME: Apolipoprotein B

This test was performed by:  
Pathology, St Vincent's Hospital  
41 Victoria Parade  
Fitzroy Vic 3065  
Tel: (03) 9288 4223

Report was received on 16/11/2023 3:05 pm

REF LAB ID 23P755994

Results received from testing institution

Request No: P755994

Date: 14/11/23

Time: 08:15

Units Ref Range

SPECIAL LIPIDS (Serum/Plasma)

APO B 1.03 g/L <1.20

GLS-R GHB-R HCY-R INS-R FBE-R LIP-R CA-R ECU-R LFT-R SCR-R P

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	08/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	14/11/2023 08:15
<b>Sex:</b>	M	<b>Tested:</b>	14/11/2023 08:39
<b>Reported:</b>	15/11/2023 08:37	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580832-HCY-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX

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**Test:** HCY-Homocysteine

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**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

GENERAL CHEMISTRY

**HOMOCYSTEINE**

**SPECIMEN: SERUM**

Date	Time	Lab No.	Fasting status	Homocysteine	Units	Ref Range
14/11/23	08:15	81580832	Not Stated	*	4.2	umol/L (5.0 - 15.0)

81580832 Homocysteine concentrations have been used to categorise Cardiovascular risk:

<10 umol/L	-	desirable
10 - 15 umol/L	-	intermediate risk
15 - 30 umol/L	-	high risk
>30 umol/L	-	very high risk.

GLS-R GHB-R HCY-C INS-R FBE-R LIP-R CA-R ECU-R LFT-R REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980  
**Sex:** M  
**Reported:** 14/11/2023 22:06

**Reference:**  
**Phone No:** 0420 244 738

**Referred:** 08/Nov/2023  
**Collected:** 14/11/2023 08:15  
**Tested:** 14/11/2023 08:39  
**UR/MR No.:** 10451  
**Lab No:** 23-81580832-INS-0  
**Status:** Final  
**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** INS-Insulin

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

ENDOCRINOLOGY

**INSULIN STUDIES**

**SPECIMEN: SERUM**

Date	Time	Lab No.	Insulin	Ref Range	Units
14/11/23	08:15	81580832	*	1 (See below)	mU/L

Insulin Reference Ranges:

Fasting 2 - 12 mU/L  
2hr post prandial 5 - 30 mU/L

GLS-R GHB-R HCY-W INS-C FBE-R LIP-R CA-R ECU-R LFT-R REF-W S

This request has other tests in progress at the time of reporting

Australian Clinical Labs 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	08/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	14/11/2023 08:15
<b>Sex:</b>	M	<b>Tested:</b>	14/11/2023 08:39
<b>Reported:</b>	14/11/2023 21:36	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580832-GHB-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<hr/>			
<b>Test:</b>	GHB-Glycated Hb		

CLINICAL NOTES: TELEHEALTH; FASTING; Rapamycin, AF;

BIOCHEMISTRY

HAEMOGLOBIN A1c

SPECIMEN: WHOLE BLOOD

Date	Coll Time	Req. No.	IFCC	DCCT
			HbA1c (mmol/mol)	HbA1c (%)
14/11/23	08:15	81580832	33	5.2

81580832 HbA1c consistent with euglycaemic state.

INTERPRETATION CRITERIA

DIAGNOSIS.

A HbA1c greater than or equal to 48 mmol/mol ( 6.5 %) is consistent with diabetes. Consider OGTT or repeat HbA1c for confirmation.  
HbA1c 6.0 - 6.4% is consistent with prediabetes. Repeat testing annually is recommended. (ADS position statement 2020)

MONITORING.

The Australian Diabetes Society (ADS) recommends individualised HbA1c targets depending on the patient's age, comorbidities and any Hypoglycaemia (ADS position statement 2009).  
A general target of less than or equal to 53 mmol/mol (7.0%) is often used.

Please note that Hb A1c results may be influenced by conditions affecting red cells or their survival times such as haemoglobinopathies, anaemias, recent transfusion or blood loss.

HbA1c tested on Roche c513 using Gen. 3 assay.

GLS-C GHB-C HCY-W INS-W FBE-R LIP-C CA-C ECU-C LFT-C REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980  
**Sex:** M  
**Reported:** 14/11/2023 21:31

**Reference:**  
**Phone No:** 0420 244 738

**Referred:** 08/Nov/2023

**Collected:** 14/11/2023 08:15

**Tested:** 14/11/2023 08:39

**UR/MR No.:** 10451

**Lab No:** 23-81580832-GLS-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** GLS-Glucose

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

BIOCHEMISTRY

GLUCOSE

Date	Time	Lab#	Collection Type	Specimen	Glucose (mmol/L)
14/11/23	08:15	81580832	Not stated	serum	4.7

81580832 Normal random glucose.

NOTE: HbA1c has been requested.

Glucose Reference Ranges

Random 3.0 - 6.9 mmol/L

Fasting 3.0 - 5.4 mmol/L

1 Hour post prandial 3.0 - 11.0 mmol/L

2 Hour post prandial 3.0 - 7.7 mmol/L

Specimen Legend:

Fl-ox = Fluoride oxalate, serum = Serum, np = Non-Preserved

GLS-C GHB-W HCY-W INS-W FBE-R LIP-C CA-C ECU-C LFT-C REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

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**Tested:** 14/11/2023 08:39

**UR/MR No.:** 10451

**Lab No:** 23-81580832-LS-0

**Status:** Final

**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** LS-Lipid Studies

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

BIOCHEMISTRY

**LIPID STUDIES**

**SPECIMEN: SERUM**

**Date:** 14/11/23  
**Coll. Time:** 08:15  
**Lab Number:** 81580832

**Desirable Range**  
(Fasting)

Fasting Status	Fasting		
Total Chol.	5.1	(< 5.6)	mmol/L
HDL Chol.	1.6	(> 0.9)	mmol/L
LDL Chol.	* 3.2	(< 3.1)	mmol/L
Non-HDL Chol.	3.5	(< 4.1)	mmol/L
Triglyceride	0.6	(< 2.1)	mmol/L
LDL/HDL Ratio	2.0		
Chol/HDL Ratio	3.2		

81580832 Mild increase in LDL-cholesterol. Interpret in conjunction with other cardiovascular risk factors or treatment targets.

Please note, from 27/09/2023, modified lipid reference ranges apply.

Recommended targets for high risk patients are

Total cholesterol < 4.0 mmol/L  
HDL Cholesterol > 1.0 mmol/L  
LDL Cholesterol < 2.5 mmol/L ( < 1.8 mmol/L for very high risk)  
Non-HDL Cholesterol < 3.3 mmol/L ( < 2.5 mmol/L for very high risk)  
Fasting triglycerides < 2.0 mmol/L

Lipid ranges and targets are from the AACB Guideline for Harmonised Lipid Reporting (2018)

Target values need to be individualised based on clinical assessment of overall risk.

See the AusCVD Risk calculator at [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

GLS-C GHB-W HCY-W INS-W FBE-R LIP-C CA-C ECU-C LFT-C REF-W S

This request has other tests in progress at the time of reporting



**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980  
**Sex:** M  
**Reported:** 14/11/2023 21:31

**Reference:**  
**Phone No:** 0420 244 738

**Referred:** 08/Nov/2023  
**Collected:** 14/11/2023 08:15  
**Tested:** 14/11/2023 08:39  
**UR/MR No.:** 10451  
**Lab No:** 23-81580832-MBI-0  
**Status:** Final  
**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** MBI-Multiple Biochem Analysis

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

GENERAL CHEMISTRY

**SPECIMEN: SERUM**

**Date:** 14/11/23  
**Coll. Time:** 08:15  
**Lab Number:** 81580832

Sodium	142	(135 - 145)	mmol/L
Potassium	4.5	(3.5 - 5.2)	mmol/L
Chloride	108	(95 - 110)	mmol/L
Bicarbonate	29	(22 - 32)	mmol/L
Urea	7.7	(3.5 - 8.0)	mmol/L
Creatinine	87	(60 - 110)	umol/L
eGFR	> 90	(> 59) mL/min/1.73m2	
Calcium	2.25	(2.10 - 2.60)	mmol/L
Adj. Ca.	2.27	(2.10 - 2.60)	mmol/L
T.Protein	* 59	(60 - 80)	g/L
Albumin	39	(35 - 50)	g/L
Globulin	* 20	(23 - 39)	g/L
ALP	87	(30 - 110)	U/L
Bilirubin	12	(3 - 20)	umol/L
GGT	16	(5 - 50)	U/L
AST	27	(5 - 35)	U/L
ALT	* 44	(5 - 40)	U/L

81580832 LIVER FUNCTION  
Borderline increase in ALT.

Please note: from 09.11.23 new reference intervals apply for Liver  
Function Tests. These are sourced from the RCPA Harmonised  
Reference Intervals (v2.0) document.

GLS-W GHB-W HCY-W INS-W FBE-R LIP-C CA-C ECU-C LFT-C REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

<b>Patient:</b>	BELL, NICHOLAS 26 COSHAM STREET BRIGHTON VIC 3186	<b>Referred:</b>	08/Nov/2023
<b>DOB:</b>	14/Aug/1980	<b>Collected:</b>	14/11/2023 08:15
<b>Sex:</b>	M	<b>Tested:</b>	14/11/2023 08:39
<b>Reported:</b>	14/11/2023 21:30	<b>UR/MR No.:</b>	10451
<b>Reference:</b>		<b>Lab No:</b>	23-81580832-SCR-0
<b>Phone No:</b>	0420 244 738	<b>Status:</b>	Final
		<b>Patient Belongs to User:</b>	HUGH LESLIE 025531DX
<b>Test:</b> SCR-High Sensitive CRP			

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

BIOCHEMISTRY

C REACTIVE PROTEIN (hsCRP)

SPECIMEN: SERUM

Date	Time	Lab No.	hsCRP	Units	Ref. Range
14/11/23	08:15	81580832	< 0.5	mg/L	see below

For assessment of cardiovascular risk in the WELL individual see the following table (Reference: American Heart Association)

CRP (mg/L)	Relative Risk.
< 1.0	Low risk
1.0 - 3.0	Average risk
> 3.0	High risk

GLS-W GHB-W HCY-W INS-W FBE-R LIP-W CA-W ECU-W LFT-W REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

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**DOB:** 14/Aug/1980  
**Sex:** M  
**Reported:** 14/11/2023 20:15

**Reference:**  
**Phone No:** 0420 244 738

**Referred:** 08/Nov/2023  
**Collected:** 14/11/2023 08:15  
**Tested:** 14/11/2023 08:39  
**UR/MR No.:** 10451  
**Lab No:** 23-81580832-HAE-0  
**Status:** Final  
**Patient Belongs to User:** HUGH LESLIE 025531DX

**Test:** HAE-Haematology General

**CLINICAL NOTES:** TELEHEALTH; FASTING; Rapamycin, AF;

HAEMATOLOGY

SPECIMEN: WHOLE BLOOD

Date: 14/11/23 (#Refers to current  
Coll. Time: 08:15 result only)  
Lab Number: #81580832

HAEMOGLOBIN	152	(125 - 175) g/L
RBC	4.86	(4.50 - 6.50) x10 <sup>12</sup> /L
HCT	0.45	(0.40 - 0.55)
MCV	92	(80 - 99) fL
MCH	31.3	(27.0 - 34.0) pg
MCHC	340	(310 - 360) g/L
RDW	12.4	(11.0 - 15.0) %
WCC	* 3.7	(4.0 - 11.0) x10 <sup>9</sup> /L
Neutrophils	* 1.9	(2.0 - 8.0) x10 <sup>9</sup> /L
Lymphocytes	1.4	(1.0 - 4.0) x10 <sup>9</sup> /L
Monocytes	0.3	(< 1.1) x10 <sup>9</sup> /L
Eosinophils	< 0.1	(< 0.7) x10 <sup>9</sup> /L
Basophils	< 0.1	(< 0.3) x10 <sup>9</sup> /L
PLATELETS	229	(150 - 450) x10 <sup>9</sup> /L

#81580832 : There is a mild neutropenia. Possible drug effect, viral or autoimmune disorder. Suggest repeat FBE to review neutropenia if clinically indicated.

GLS-W GHB-W HCY-W INS-W FBE-C LIP-W CA-W ECU-W LFT-W REF-W S

This request has other tests in progress at the time of reporting

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

**Patient:** BELL, NICHOLAS  
26 COSHAM STREET  
BRIGHTON VIC 3186

**DOB:** 14/Aug/1980

**Sex:** M

**Reported:** 26/11/2015 14:22

**Reference:** GEN12189\_21743

**Phone No:** 0420 244 738

**Referred:** 18/Nov/2015

**Collected:** 26/11/2015 09:01

**Tested:** 26/11/2015 14:22

**UR/MR No.:** GEN12189\_21743

**Lab No:** 15-8858859-HAE-0

**Status:** Final

**Patient Belongs to User:** JOHN GALL 095252DH

**Test:** HAE-Haematology General

**CLINICAL NOTES:**

HAEMATOLOGY

**SPECIMEN: WHOLE BLOOD**

Date: **26/11/15**

Coll. Time: 09:01

Lab Number: #8858859

(#Refers to current  
result only)

<b>HAEMOGLOBIN</b>	157	(130 - 180) g/L
RBC	4.90	(4.50 - 6.50) x10 <sup>12</sup> /L
PCV	0.47	(0.40 - 0.55)
MCV	96	(80 - 99) fL
MCH	32.0	(27.0 - 32.0) pg
MCHC	334	(310 - 360) g/L
RDW	13.0	(11.0 - 15.0) %
<b>WCC</b>	<b>* 3.7</b>	(4.0 - 11.0) x10 <sup>9</sup> /L
Neutrophils	<b>* 1.8</b>	(2.0 - 8.0) x10 <sup>9</sup> /L
Lymphocytes	1.3	(1.0 - 4.0) x10 <sup>9</sup> /L
Monocytes	0.5	(< 1.1) x10 <sup>9</sup> /L
Eosinophils	< 0.1	(< 0.6) x10 <sup>9</sup> /L
Basophils		(< 0.3) x10 <sup>9</sup> /L
<b>PLATELETS</b>	272	(150 - 450) x10 <sup>9</sup> /L

#8858859 : There is a mild neutropenia.

GLS-W MBI-W LS-W HAE-C

This request has other tests in progress at the time of reporting

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**Reference:** GEN12189\_21743

**Phone No:** 0420 244 738

**Referred:** 18/Nov/2015

**Collected:** 26/11/2015 09:01

**Tested:** 26/11/2015 14:22

**UR/MR No.:** GEN12189\_21743

**Lab No:** 15-8858859-LS-0

**Status:** Final

**Patient Belongs to User:** JOHN GALL 095252DH

**Test:** LS-Lipid Studies

**CLINICAL NOTES:**

BIOCHEMISTRY

**LIPID STUDIES**

**SPECIMEN: SERUM**

Date: 26/11/15

Coll. Time: 09:01

Lab Number: 8858859

Desirable Range

(Fasting)

Fasting Status Fasting

Total Chol. 4.6

HDL Chol. \* 0.8

LDL Chol. \* 3.5

(< 5.6) mmol/L

(> 1.0) mmol/L

(< 2.5) mmol/L

Triglyceride 0.6

(< 1.5) mmol/L

LDL/HDL Ratio 4.4

Chol/HDL Ratio 5.7

8858859 Mild increase in LDL-cholesterol and low HDL-cholesterol which exceed the desirable values. Interpret in conjunction with other cardiovascular risk factors.

LDL Cholesterol desirable range less than 2.0 mmol/L for high CV risk patients.

GLS-C MBI-C LS-C HAE-R

All tests on this request have now been completed

**Australian Clinical Labs** 1868 DANDENONG RD, CLAYTON

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26 COSHAM STREET  
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**DOB:** 14/Aug/1980

**Sex:** M

**Reported:** 26/11/2015 14:22

**Reference:** GEN12189\_21743

**Phone No:** 0420 244 738

**Referred:** 18/Nov/2015

**Collected:** 26/11/2015 09:01

**Tested:** 26/11/2015 14:22

**UR/MR No.:** GEN12189\_21743

**Lab No:** 15-8858859-GLS-0

**Status:** Final

**Patient Belongs to User:** JOHN GALL 095252DH

**Test:** GLS-Glucose

**CLINICAL NOTES:**

BIOCHEMISTRY

**GLUCOSE**

Date	Time	Lab#	Collection Type	Specimen	Glucose (mmol/L)
26/11/15	09:01	8858859	Fasting	serum	4.5

8858859 INTERPRETATION  
Normal fasting glucose.

**Glucose Reference Ranges**

Random	3.0 - 6.9 mmol/L
Fasting	3.0 - 5.4 mmol/L
1 Hour post prandial	3.0 - 11.0 mmol/L
2 Hour post prandial	3.0 - 7.7 mmol/L

**Specimen Legend:**

fl-ox = Fluoride oxalate, serum = Serum, np = Non-Preserved

GLS-C MBI-W LS-W HAE-R

This request has other tests in progress at the time of reporting

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**Tested:** 26/11/2015 14:22

**UR/MR No.:** GEN12189\_21743

**Lab No:** 15-8858859-MBI-0

**Status:** Final

**Patient Belongs to User:** JOHN GALL 095252DH

**Test:** MBI-Multiple Biochem Analysis

**CLINICAL NOTES:**

GENERAL CHEMISTRY

**SPECIMEN: SERUM**

Date: **26/11/15**

Coll. Time: 09:01

Lab Number: 8858859

Sodium	141	(135 - 145)	mmol/L
Potassium	4.8	(3.5 - 5.2)	mmol/L
Chloride	105	(95 - 110)	mmol/L
Bicarbonate	32	(22 - 32)	mmol/L
Urea	7.7	(2.5 - 8.0)	mmol/L
Creatinine	86	(60 - 110)	umol/L
eGFR	> 90	mL/min/1.73m2	
T.Protein	68	(60 - 82)	g/L
Albumin	44	(35 - 50)	g/L
ALP	99	(30 - 120)	U/L
Bilirubin	11	(< 25)	umol/L
GGT	15	(< 51)	U/L
AST	30	(< 41)	U/L
ALT	36	(< 51)	U/L

8858859 Within normal limits.

GLS-C MBI-C LS-C HAE-R

All tests on this request have now been completed