

KOS, AMAL
U 2602 42 LAVER DR, ROBINA. 4226
Phone: 04 07211402
Birthdate: 21/09/1965 Sex: F Medicare Number: 23676205361
Your Reference: Lab Reference: 24-74224918-THY-0
Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH Referred by: DR HANNAH HORVATH

Name of Test: THYROID TEST MASTER
Requested: 08/01/2024 Collected: 16/01/2024 Reported: 16/01/2024
18:38

CUMULATIVE SERUM THYROID FUNCTION TESTS

Date	18/11/19	02/11/21	16/08/23	16/01/24
Time	08:45	07:20	11:09	07:35
Lab No	73243082	29855837	73867398	74224918
TSH	6.1	1.5	4.4	9.2 mIU/L (0.50-4.00)
free T4	16		15	13 pmol/L (10-20)
free T3	4.3		4.6	pmol/L (2.8-6.8)
Thyroglobulin AbII				134 IU/mL (< 4.6)
Thy. Peroxidase Ab				490 IU/mL (< 60)

Progress level - On Levothyroxine

The therapeutic target for replacement therapy in primary hypothyroidism is to maintain a normal TSH but it is reasonable to aim for a TSH level in the lower reference interval if the patient has persistent symptoms. In patients with differentiated thyroid cancer, the target TSH level should be subnormal or undetectable depending on individualized post-ablation risk stratification.

Note: Serum TSH should not be used to monitor T4 therapy in central hypothyroidism. Serum fT4 level should be maintained in the upper 50% of the normal range.

Please note that as of 06/9/2021, QML Pathology changed to a reformulated Atellica Thyroglobulin Antibody (TgAbII) assay. The reference interval has been updated. Differences in individual patient results may be observed compared to the previous method. If further information is required please contact a Chemical Pathologist on (07) 3121 4444.

Clinical Notes : On thyroxine tiredness history of abnormal b12

Tests Completed: THYROID TISSUE AB, TFT, FBC
Tests Pending : ACTIVE VITAMIN B12, IRON STUDIES, SERUM FOLATE, SERUM VITAMIN B12
Tests Pending : SE E/LFT, SE HDL

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U 2602 42 LAVER DR, ROBINA. 4226
Phone: 04 07211402
Birthdate: 21/09/1965 **Sex:** F **Medicare Number:** 23676205361
Your Reference: **Lab Reference:** 24-74224918-CBC-0
Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH **Referred by:** DR HANNAH HORVATH
Name of Test: MASTER FULL BLOOD COUNT
Requested: 08/01/2024 **Collected:** 16/01/2024 **Reported:** 16/01/2024
15:01

CUMULATIVE FULL BLOOD EXAMINATION

Date	16/01/24
Time	07:35
Lab No	74224918
Hb	131 g/L (115-160)
RCC	4.3 x10 ¹² /L (3.6-5.2)
Hct	0.40 (0.33-0.46)
MCV	94 fL (80-98)
MCH	31 pg (27-35)
Plats	252 x10 ⁹ /L (150-450)
WCC	5.8 x10 ⁹ /L (4.0-11.0)
Neuts	64 % 3.7 x10 ⁹ /L (2.0-7.5)
Lymphs	22 % 1.3 x10 ⁹ /L (1.1-4.0)
Monos	8 % 0.5 x10 ⁹ /L (0.2-1.0)
Eos	4 % 0.23 x10 ⁹ /L (0.04-0.40)
Basos	2 % 0.12 x10 ⁹ /L (< 0.21)

74224918 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 : On thyroxine tiredness history of abnormal b12

Tests Completed:FBC
Tests Pending :THYROID TISSUE AB, TFT, IRON STUDIES, SERUM FOLATE, SERUM VITAMIN B12
Tests Pending :SE E/LFT, SE HDL

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Your Reference: Lab Reference: 24-74224918-25T-0
Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH Referred by: DR HANNAH HORVATH

Name of Test: E/LFT (MASTER)
Requested: 08/01/2024 Collected: 16/01/2024 Reported: 16/01/2024
18:46

CUMULATIVE SERUM BIOCHEMISTRY

Date	02/11/21	16/01/24	
Time	07:20	07:35	
Lab No	29855837	74224918	
	FASTING	FASTING	FASTING
Sodium	142	139	mmol/L (137-147)
Potass.	4.6	4.8	mmol/L (3.5-5.0)
Chloride	107	106	mmol/L (96-109)
Bicarb	28	26	mmol/L (25-33)
An.Gap	12	12	mmol/L (4-17)
Gluc	4.8	5.0	mmol/L (3.0-6.0)
Urea	5.0	6.0	mmol/L (2.5-7.5)
Creat	74	74	umol/L (50-120)
eGFR	77	77	mL/min (over 59)
Urate	0.27	0.27	mmol/L (0.14-0.35)
T.Bili	14	11	umol/L (2-20)
Alk.P	67	65	U/L (30-115)
GGT	8	8	U/L (0-45)
ALT	13	18	U/L (0-45)
AST	20	26	U/L (0-41)
LD	150	167	U/L (80-250)
Calcium	2.48	2.36	mmol/L (2.15-2.60)
Corr.Ca	2.47	2.37	mmol/L (2.15-2.60)
Phos	1.4	1.2	mmol/L (0.8-1.5)
T.Prot	67	67	g/L (60-82)
Alb	43	42	g/L (35-50)
Glob	24	25	g/L (20-40)
Chol	5.7	6.0	mmol/L (3.9-7.4)
Trig	0.9	1.0	mmol/L (0.3-2.2)
Lab No	29855837	74224918	
Date	02/11/21	16/01/24	

Clinical Notes : On thyroxine tiredness history of abnormal b12

Tests Completed: THYROID TISSUE AB, TFT, IRON STUDIES, FBC, SE E/LFT, SE HDL
Tests Pending : ACTIVE VITAMIN B12, SERUM FOLATE, SERUM VITAMIN B12

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Phone: 04 07211402
Birthdate: 21/09/1965 Sex: F Medicare Number: 23676205361
Your Reference: Lab Reference: 24-74224918-HDL-0
Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH Referred by: DR HANNAH HORVATH

Name of Test: HDL CHOLESTEROL, SERUM
Requested: 08/01/2024 Collected: 16/01/2024 Reported: 16/01/2024
18:46

CUMULATIVE LIPID RISK REPORT

Date	16/01/24	
Time	07:35	
Lab No	74224918	
	FASTING	
		Target if
		HIGH RISK
Total Cholesterol	6.0 mmol/L	(below 4.0)
Triglycerides	1.0 mmol/L	(below 2.0)
CHOLESTEROL FRACTIONS		
HDL	1.59 mmol/L	(above 1.0)
LDL (calculated)*	3.96 mmol/L	(below 2.5)
Non-HDL cholesterol*	4.41 mmol/L	(below 3.3)
Total/HDL ratio**	3.8	

* 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"

74224918 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 : On thyroxine tiredness history of abnormal b12

Tests Completed: THYROID TISSUE AB, TFT, IRON STUDIES, FBC, SE E/LFT, SE HDL
Tests Pending : ACTIVE VITAMIN B12, SERUM FOLATE, SERUM VITAMIN B12

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Birthdate: 21/09/1965 Sex: F Medicare Number: 23676205361
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Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH Referred by: DR HANNAH HORVATH

Name of Test: MASTER IRON STUDIES
Requested: 08/01/2024 Collected: 16/01/2024 Reported: 16/01/2024
18:46

CUMULATIVE IRON STUDIES

Date 16/01/24
Time 07:35
Lab No 74224918

Iron	9	umol/L	(10-33)
TIBC	46	umol/L	(45-70)
Saturation	20	%	(16-50)
Ferritin	93	ug/L	(30-320)

74224918 Comment:
The serum ferritin indicates essentially adequate iron stores.
The iron studies may reflect an infective or inflammatory
process.
In the absence of infection/inflammation the ferritin level will
probably be lower.

Clinical Notes : On thyroxine tiredness history of abnormal b12

Tests Completed: THYROID TISSUE AB, TFT, IRON STUDIES, FBC, SE E/LFT, SE HDL
Tests Pending : ACTIVE VITAMIN B12, SERUM FOLATE, SERUM VITAMIN B12

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Your Reference: Lab Reference: 24-74224918-BFM-0
Laboratory: QML Pathology
Addressee: DR HANNAH HORVATH Referred by: DR HANNAH HORVATH

Name of Test: MASTER VITAMIN B12 FOLATE
Requested: 08/01/2024 Collected: 16/01/2024 Reported: 16/01/2024
19:35

CUMULATIVE VITAMIN B12 AND FOLATE ASSAYS

Date 16/01/24
Time 07:35
Lab No 74224918

B12 Total	300	pmol/L	(162-811)
Active B12	> 146	pmol/L	(> 35)
S.Fol.	39.5	nmol/L	(8.4-55.0)

Comment:
74224918

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 : On thyroxine tiredness history of abnormal b12

Tests Completed: ACTIVE VITAMIN B12, THYROID TISSUE AB, TFT, IRON STUDIES, FBC
Tests Completed: SERUM FOLATE, SERUM VITAMIN B12, SE E/LFT, SE HDL
Tests Pending :