

SANDRA SILVA-IONESCU, 1980-07-13 8514342651

CHEMISTRY						
Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
FREE T3						
FREE T3	4.6	N	3.4 - 5.90	pmol/L	2025-10-18 02:30:06	
THYROGLOBULIN AB						
THYROGLOBULIN AB	151	H	<= 40.99	kIU/L	2025-10-20 08:25:04	
THYROGLOBULIN						
THYROGLOBULIN	22.8	N	3.5 - 40.00	ug/L	2025-10-20 08:25:04	
Thyroglobulin results must be interpreted together with Anti-thyroglobulin antibody results, as these antibodies may interfere with thyroglobulin assay.						
Roche Diagnostics Electrochemiluminescence Immunoassay (ECLIA). Values obtained with different assay methods or kits may not be comparable and cannot be used interchangeably.						
25 HYDROXY VITAMIN D						
25 HYDROXY VITAMIN D	66	L	76 - 250	nmol/L	2025-10-20 08:25:04	
INSUFFICIENCY: 25 - 75 nmol/L						
SUFFICIENCY: 76 - 250 nmol/L						
TOXICITY: > 250 nmol/L						
HEMATOLOGY						
Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
HEMOGLOBIN						
HEMOGLOBIN	141	N	110 - 147.000	g/L	2025-10-18 02:30:06	
HEMATOCRIT						
HEMATOCRIT	0.43	N	0.33 - 0.440	L/L	2025-10-18 02:30:06	
RBC						
RBC	4.5	N	3.8 - 5.200	x 10 ¹² /L	2025-10-18 02:30:06	
RBC INDICES: MCV						
RBC INDICES: MCV	95	N	76 - 98.000	fL	2025-10-18 02:30:06	
MCH						
MCH	31	N	24 - 33.000	pg	2025-10-18 02:30:06	
MCHC						
MCHC	331	N	313 - 344.000	g/L	2025-10-18 02:30:06	
RDW						
RDW	14.0	N	12.5 - 17.3		2025-10-18 02:30:06	
WBC						
WBC	5.4	N	3.2 - 9.400	x 10 ⁹ /L	2025-10-18 02:30:06	
PLATELETS						
PLATELETS	266	N	155 - 372.000	x 10 ⁹ /L	2025-10-18 02:30:06	
MPV						
MPV	8.5	N	4.0 - 14.000	fL	2025-10-18 02:30:06	
DIFFERENTIAL WBC'S						

SANDRA SILVA-IONESCU, 1980-07-13 8514342651

HEMATOLOGY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
NEUTROPHILS	3.5	N	1.4 - 6.3	x 10 ⁹ /L	2025-10-18 02:30:06	
LYMPHOCYTES	1.5	N	1.0 - 2.9	x 10 ⁹ /L	2025-10-18 02:30:06	
MONOCYTES	0.3	N	0.2 - 0.8	x 10 ⁹ /L	2025-10-18 02:30:06	
EOSINOPHILS	0.0	N	0.0 - 0.5	x 10 ⁹ /L	2025-10-18 02:30:06	
BASOPHILS	0.00	N	0.00 - 0.09	x 10 ⁹ /L	2025-10-18 02:30:06	

AUTOIMMUNE/IMMUNOHEMATOLOGY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
--------------	--------	-----	-----------------	-------	---------------------	--------

THYROID PEROXIDASE AB

THYROID PEROXIDASE AB	>599.00	A	<= 34.99	kIU/L	2025-10-20 08:25:04	
-----------------------	---------	---	----------	-------	---------------------	--

END OF REPORT

Detail Results: Patient Info				Results Info	
Patient Name:	SANDRA SILVA-IONESCU	Home Phone:	(647)501-2241	Date of Service:	2025-10-17 13:09
Date of Birth:	1980-07-13	Work Phone:		Date Received:	2025-10-20 12:05
Age:	45 years	Sex:	F	Report Status:	Final
Health Care #:	8514342651	Patient Location:	GDML	Client Ref. #:	
				Accession #:	34-56271696
Requesting Clinic: S.C. NWAIZU				cc: Client:	

CHEMISTRY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
--------------	--------	-----	-----------------	-------	---------------------	--------

CREATININE

CREATININE	64	N	50 - 100.00	umol/L	2025-10-18 02:30:06	
eGFR	104	N	60 - 99999.99	mL/min/1.73 m ²	2025-10-18 02:30:06	

eGFR is calculated using the CKD-EPI 2021 equation
which does not use a race-based adjustment.

An eGFR result ≥ 60 mL/min/1.73m² rules out CKD stage 3-5. Assessment of urine ACR is required to definitively rule out or confirm CKD diagnosis. The KidneyWise toolkit (kidneywise.ca) recommends remeasuring eGFR and urine ACR annually for people with diabetes mellitus and less frequently in others unless clinical circumstances dictate otherwise.

ALBUMIN

ALBUMIN	45	N	35 - 52.00	g/L	2025-10-18 02:30:06	
---------	----	---	------------	-----	---------------------	--

BILIRUBIN TOTAL

BILIRUBIN TOTAL	7	N	≤ 22.99	umol/L	2025-10-18 02:30:06	
-----------------	---	---	--------------	--------	---------------------	--

FERRITIN

FERRITIN	39	N	30 - 125.00	ug/L	2025-10-18 02:30:06	
----------	----	---	-------------	------	---------------------	--

In patients with concomitant inflammation, use Iron studies, including TIBC and Transferrin Saturation, to assess Iron Deficiency status.
In absence of concomitant inflammation, Ferritin levels can be interpreted as follows:
30-50: Probable iron deficiency
51-100: Possible iron deficiency, if risk factors are present
101-300: Iron deficiency unlikely
For guidance, see www.hemequity.com/raise-the-bar

SODIUM

SODIUM	142	N	136 - 146.00	mmol/L	2025-10-18 02:30:06	
--------	-----	---	--------------	--------	---------------------	--

POTASSIUM

POTASSIUM	3.9	N	3.7 - 5.4	mmol/L	2025-10-18 02:30:06	
-----------	-----	---	-----------	--------	---------------------	--

ALKALINE PHOSPHATASE

ALKALINE PHOSPHATASE	73	N	35 - 122.00	U/L	2025-10-18 02:30:06	
----------------------	----	---	-------------	-----	---------------------	--

ALT

ALT	<10	N	≤ 35.99	U/L	2025-10-18 02:30:06	
-----	-----	---	--------------	-----	---------------------	--

TSH

TSH	6.37	H	0.35 - 5.00	mIU/L	2025-10-18 02:30:06	
-----	------	---	-------------	-------	---------------------	--

T4 FREE

T4 FREE	14	N	11 - 23	pmol/L	2025-10-18 02:30:06	
---------	----	---	---------	--------	---------------------	--

SANDRA SILVA-IONESCU, 1980-07-13 8514342651

CHEMISTRY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
FREE T3						
FREE T3	4.6	N	3.4 - 5.90	pmol/L	2025-10-18 02:30:06	

HEMATOLOGY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
HEMOGLOBIN						
HEMOGLOBIN	141	N	110 - 147.000	g/L	2025-10-18 02:30:06	
HEMATOCRIT						
HEMATOCRIT	0.43	N	0.33 - 0.440	L/L	2025-10-18 02:30:06	
RBC						
RBC	4.5	N	3.8 - 5.200	x 10 ¹² /L	2025-10-18 02:30:06	
RBC INDICES: MCV						
RBC INDICES: MCV	95	N	76 - 98.000	fL	2025-10-18 02:30:06	
MCH						
MCH	31	N	24 - 33.000	pg	2025-10-18 02:30:06	
MCHC						
MCHC	331	N	313 - 344.000	g/L	2025-10-18 02:30:06	
RDW						
RDW	14.0	N	12.5 - 17.3		2025-10-18 02:30:06	
WBC						
WBC	5.4	N	3.2 - 9.400	x 10 ⁹ /L	2025-10-18 02:30:06	
PLATELETS						
PLATELETS	266	N	155 - 372.000	x 10 ⁹ /L	2025-10-18 02:30:06	
MPV						
MPV	8.5	N	4.0 - 14.000	fL	2025-10-18 02:30:06	
DIFFERENTIAL WBC'S						
NEUTROPHILS	3.5	N	1.4 - 6.3	x 10 ⁹ /L	2025-10-18 02:30:06	
LYMPHOCYTES	1.5	N	1.0 - 2.9	x 10 ⁹ /L	2025-10-18 02:30:06	
MONOCYTES	0.3	N	0.2 - 0.8	x 10 ⁹ /L	2025-10-18 02:30:06	
EOSINOPHILS	0.0	N	0.0 - 0.5	x 10 ⁹ /L	2025-10-18 02:30:06	
BASOPHILS	0.00	N	0.00 - 0.09	x 10 ⁹ /L	2025-10-18 02:30:06	

END OF REPORT

Detail Results: Patient Info				Results Info	
Patient Name:	SANDRA SILVA-IONESCU	Home Phone:	(647)501-2241	Date of Service:	2025-10-17 13:09
Date of Birth:	1980-07-13	Work Phone:		Date Received:	2025-10-18 04:05
Age:	45 years	Sex:	F	Report Status:	Final
Health Care #:	8514342651	Patient Location:	GDML	Client Ref. #:	
				Accession #:	34-56271696
Requesting Client: S.C. NWAIZU				cc: Client:	

CHEMISTRY

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status
--------------	--------	-----	-----------------	-------	---------------------	--------

CREATININE

CREATININE	64	N	50 - 100.00	umol/L	2025-10-18 02:30:06	
eGFR	104	N	60 - 99999.99	mL/min/1.73 m ²	2025-10-18 02:30:06	

eGFR is calculated using the CKD-EPI 2021 equation
which does not use a race-based adjustment.

An eGFR result ≥ 60 mL/min/1.73m² rules out CKD stage 3-5. Assessment of urine ACR is required to definitively rule out or confirm CKD diagnosis. The KidneyWise toolkit (kidneywise.ca) recommends remeasuring eGFR and urine ACR annually for people with diabetes mellitus and less frequently in others unless clinical circumstances dictate otherwise.

ALBUMIN

ALBUMIN	45	N	35 - 52.00	g/L	2025-10-18 02:30:06	
---------	----	---	------------	-----	---------------------	--

BILIRUBIN TOTAL

BILIRUBIN TOTAL	7	N	≤ 22.99	umol/L	2025-10-18 02:30:06	
-----------------	---	---	--------------	--------	---------------------	--

FERRITIN

FERRITIN	39	N	30 - 125.00	ug/L	2025-10-18 02:30:06	
----------	----	---	-------------	------	---------------------	--

In patients with concomitant inflammation, use Iron studies, including TIBC and Transferrin Saturation, to assess Iron Deficiency status.
In absence of concomitant inflammation, Ferritin levels can be interpreted as follows:
30-50: Probable iron deficiency
51-100: Possible iron deficiency, if risk factors are present
101-300: Iron deficiency unlikely
For guidance, see www.hemequity.com/raise-the-bar

SODIUM

SODIUM	142	N	136 - 146.00	mmol/L	2025-10-18 02:30:06	
--------	-----	---	--------------	--------	---------------------	--

POTASSIUM

POTASSIUM	3.9	N	3.7 - 5.4	mmol/L	2025-10-18 02:30:06	
-----------	-----	---	-----------	--------	---------------------	--

ALKALINE PHOSPHATASE

ALKALINE PHOSPHATASE	73	N	35 - 122.00	U/L	2025-10-18 02:30:06	
----------------------	----	---	-------------	-----	---------------------	--

ALT

ALT	<10	N	≤ 35.99	U/L	2025-10-18 02:30:06	
-----	-----	---	--------------	-----	---------------------	--

TSH

TSH	6.37	H	0.35 - 5.00	mIU/L	2025-10-18 02:30:06	
-----	------	---	-------------	-------	---------------------	--

T4 FREE

T4 FREE	14	N	11 - 23	pmol/L	2025-10-18 02:30:06	
---------	----	---	---------	--------	---------------------	--

Dayspring Medical Centre

Dr. Sylvia Chioma Nwaizu

56 Queen St N. Bolton, ON Ontario L7E 2M8

Tel: (905) 857-9797 Fax: 9058579791

Consultation Request

Date:	2025-10-22	Patient:	Silva, Sandra
Status:	Urgent	Address:	- 45 Tarquini Crescent Bolton, CA-ON, L7E 2Z5
Service:	Endocrinology	Phone:	
Consultant:	LMC, Brampton	Work Phone:	
Phone:	905-595-0560	Cell Phone:	6475012241
Fax:	905-595-0562	Email:	sandrasil13@gmail.com
Address:	2979 Bovaird Dr E	Birthdate:	1980-07-13 (y/m/d)
		Sex:	F
		Health Card No.:	(ON) 8514342651 AT
		Appointment date:	
		Time:	
		Chart No.:	

Reason for consultation:

Dear Endocrinology Team,

I'm referring Sandra Silva, a 45 year old female patient, for further evaluation and management of hypothyroidism with elevated antibody levels, ?Hashimoto's thyroiditis.

The patient's recent blood tests indicate hypothyroidism with elevated TSH 6.37 and thyroid antibodies (TPO peroxidase), despite her free T3 and T4 levels being within normal ranges. She has been taking Cytomel thyroid pills, recommended by a naturopath since April, and reports no improvement in her symptoms, even after doubling the dosage. I have ordered a Thyroid ultrasound for her. I would appreciate your expertise in further assessing her condition and recommending an appropriate treatment plan.

Thanks for considering this referral.

Billing #: 051548

Allergies:

No Known Drug Allergies Custom Allergy

Nwaizu, Dr. Sylvia Chioma (051548)

Signature:

