

Dr. Parastoo Azizi Namini
#200-418 Eglinton Av W Toronto ON M5N1A2
Phone: 647.479.8410 Fax: 6474800879

Consultation Request

Date: 2025-10-24

Consultant:	LMC Diabetes, and Endocrinology (Bayview)	Patient:	PEART, PATRICIA YVONNE
Urgency	Non-Urgent	Address:	145 Marlee Avenue, Apt 1715
Service:	Endocrinology	York,ON	M6B 3H3
Phone:	1.866.701.3636 x450	Phone:	647-774-4553
Fax:	18775622778	Cell Phone:	647-774-4553
Address:	LMC Diabetes & Endocrinology 1929 Bayview Ave Suite 107 Toronto, ON, M4G 3E8	Work Phone:	647-607-2126
		Email:	patricia.peart@gmail.com
		Birthdate:	1959-02-23 (y/m/d)
		Sex:	F
		Health Card No.:	(ON) 7578443207 RF
		Appointment date:	
		Time:	
		Chart No.:	

Clinician Reason for Consultation: Please see the attached requisition.

Administrative Note: Our understanding is that your office reliably and consistently contacts patients directly with appointment details. Accordingly, we do not plan to follow up with you directly in respect of an appointment date. Please advise us if this referral is declined, or if any extra information is required. Thank you.

Pertinent Clinical Information:

1. Migraine with Aura
2. Glaucoma
 - FU with Dr. Hess at Toronto Eye clinic
 - FU every six month.
3. Eczema
4. CTS
 - bilateral
 - Trial of splinting
5. N colonoscopy and gastroscopy; moderate sized hiatal hernia, occasional GERD.
6. Chronic mild anemia
 - Assessed by IM
7. Osteoporosis 2024

Current Medications:

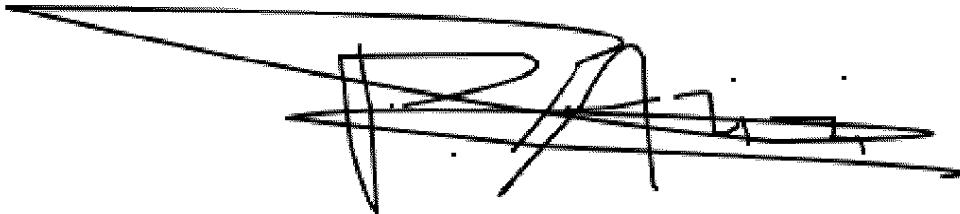
1. APO-Propranolol, 10mg BID PRN
2. Lumidona
3. Restasis BID
4. Caltrate, Vitamin C, Vitamin D
5. Imvexxy local vaginal estrogen (started by OB in Sep/2025)

- B complex+Iron+Folate+Vit C.
- Multivitamin 50+ womrn one/day.

Allergies:

IBUPROFEN ATC Class

Signature:



Referring Practitioner: Azizi Namini, Parastoo (045717)



Patient Referral Form

Barrie Bayview Brampton Downtown Etobicoke Oakville Scarborough Vaughan

Patient Name:	Patricia yvonne Peart (first name) _____ (last name) _____	DOB:	23/02/1959 (dd/mm/yyyy)
Health #:	7578443207	Version Code:	RF
Uninsured Specify: _____			
Address:	145 Marlee Avenue, Apt 1715 (number) _____ (street name) _____ (unit) _____ York M6B 3H3 patricia.peart@gmail.com		
(city) _____	(postal code) _____	(e-mail address - required) 647-774-4553 647-774-4553	
(mobile # - Required) _____	(home #) _____	(work # with extension)	

Language: _____

LMC uses an English-automated phone message system. If preferred spoken language is different, please specify.

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Consultation & shared care | <input type="radio"/> Diabetes Education only | <input type="radio"/> Optometry Consultation |
| <input type="radio"/> Consultation only | <input type="radio"/> Canadian Diabetes Prevention Program (CDPP) | <input type="radio"/> Weight Management Program (Downtown only) |
| <input type="radio"/> Chiropody Assessment | | |

DIABETES/ENDOCRINOLOGY PLEASE SPECIFY:		The following investigations would be helpful:		
<input type="radio"/> Diabetes	<input type="radio"/> Type 1	<input type="radio"/> Type 2	<input type="radio"/> GDM	<input type="radio"/> FPG, A1C, Lipids, Renal Function, uACR
<input type="radio"/> Newly Diagnosed Diabetes				<input type="radio"/> FPG, A1C, Lipids, Renal Function, uACR
<input type="radio"/> Thyroid				<input type="radio"/> Thyroid function, Relevant imaging
<input checked="" type="checkbox"/> Osteoporosis				<input type="radio"/> BMD report <2 years, other relevant labs
<input type="radio"/> Lipids				<input type="radio"/> TC, LDL, HDL (<3 months), A1C
<input type="radio"/> PCOS				<input type="radio"/> LH, FSH, estrogen, testosterone, A1C
<input type="radio"/> Other (please specify): _____				
<input checked="" type="checkbox"/> Routine:				
<input type="radio"/> Urgent*: _____				
* Expect a 5 business day delay in processing referrals. If an assessment is required sooner, we recommend directing your patient to the nearest Emergency Department, or alternatively, try contacting one of our endocrinologists directly.				

Notes: BMD: moderate risk; please see for query a candidate for Pharm therapy,

Current Medications:

1. APO-Propranolol, 10mg BID PRN
2. Lumidona
3. Restasis BID
4. Caltrate, Vitamin C, Vitamin D
5. Imvavu local vaginal estrogen

Referred By: Azizi Namini, Parastoo

Physician Billing #: 045717

Physician Signature: _____
Digitally created by
Parastoo Azizi Namini
2025 10 24 13:11:46

Parastoo Azizi Namini

Date: 2025-10-24

New Patient Referrals: **T:** 1.866.701.ENDO (3636) **F:** 1.877.LMC.APPT (562.2778)
E: referrals@lmc.ca **W:** www.LMC.ca/referrals



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**Dr. PARASTOO AZIZI NAMINI
418 EGLINTON AVENUE EAST TORONTO,
ONTARIO M5N 1A2
T. 647-479-8410
F. 647-480-0879**

**PATRICIA PEART
DOB: 1959/02/23
Tel. 647-774-4553
Exam Date: 2025/10/17
Report Date: 2025/10/17
Accession #: 2510177267**

BONE MINERAL DENSITY (BMD):

A 66-year-old postmenopausal female on calcium and vitamin D supplements.

Comparison with Jun 22, 2017.

Bone density was performed using a GE Lunar Prodigy 7 Advance.

LUMBAR SPINE:

BMD of the lumbar spine, L1 to L4, equals 0.964 g/cm sq., or 82% mean value in young adult patients. T-score of -1.8.

LEFT HIP:

BMD of the femoral neck equals 0.632 g/cm sq., or 64% mean value in young adult patients. T-score of -2.9.

BMD of the total hip equals 0.733 g/cm sq., or 73% mean value in young adult patients. T-score of -2.2.

OPINION:

1. Lumbar spine low bone mass, showing insignificant change of -0.8%
2. Left hip low bone mass, showing a slight further bone loss of -1.9 %.
3. Ten-year fracture risk is moderate (10-20%).
4. Optimal bone maintenance therapy and follow-up examination in 2 to 3 years.

BL

ADAMO C , MD, FRCPC

Final

Version: 2 of 2

Detail Results: Patient Info				Results Info			
Patient Name:	PATRICIA YVONNE PEART	Home Phone:	(647) 774-4553	Date of Service:	2025-10-15 07:50:00		
Date of Birth:	1959-02-23	Work Phone:		Reported on:	2025-10-15 20:45:31		
Age:	66 years	Sex:	F	Date Received:	2025-10-16 03:42		
Health Care #:	7578443207RF	Reported by:	LIFELABS ONTARIO	Report Status:	Completed		
				Client Ref. #:	115851		
				Accession #:	2025-4W2880090		
Requesting Client: PARASTOO AZIZI NAMINI		cc: Client: PARASTOO AZIZI NAMINI					

HAEM1								
Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #	

Complete Blood Count

WBC	4.6		4.0 - 11.0	x E9/L	2025-10-15 16:36:32	F	5687
RBC	4.68		4.00 - 5.10	x E12/L	2025-10-15 16:36:32	F	
Hemoglobin	118	L	120- 160	g/L	2025-10-15 16:36:32	F	
Hematocrit	0.398		0.350 - 0.450	L/L	2025-10-15 16:36:32	F	
MCV	85		80 - 100	fL	2025-10-15 16:36:32	F	
MCH	25.2	L	27.5 - 33.0	pg	2025-10-15 16:36:32	F	
MCHC	296	L	305 - 360	g/L	2025-10-15 16:36:32	F	
RDW	12.9		11.5 - 14.5	%	2025-10-15 16:36:32	F	
Platelets	283		150 - 400	x E9/L	2025-10-15 16:36:32	F	
Neutrophils	1.9	L	2.0 - 7.5	x E9/L	2025-10-15 16:36:32	F	
Lymphocytes	2.1		1.0 - 3.5	x E9/L	2025-10-15 16:36:32	F	
Monocytes	0.4		0.2 - 1.0	x E9/L	2025-10-15 16:36:32	F	
Eosinophils	0.2		0.0 - 0.5	x E9/L	2025-10-15 16:36:32	F	
Basophils	0.0		0.0 - 0.2	x E9/L	2025-10-15 16:36:32	F	
Immature Granulocytes	0.0		0.0 - 0.1	x E9/L	2025-10-15 16:36:32	F	
Nucleated RBC	0		/100 WBC	2025-10-15 16:36:32		F	

CHEM1								
Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #	

Vitamin B12

Vitamin B12	624	>220	pmol/L	2025-10-15 19:48:01	F		
>220 pmol/L: Normal, deficiency unlikely							
150-220 pmol/L: Borderline, deficiency is possible							
<150 pmol/L: Low, consistent with deficiency							

Ferritin

Ferritin	462		ug/L	2025-10-15 19:50:04	F		
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CHEM1

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
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In absence of concomitant inflammation, Ferritin levels can be interpreted as follows:

30-50 ug/L: Probable iron deficiency
 51-100 ug/L: Possible iron deficiency, if risk factors are present
 101-300 ug/L: Iron deficiency unlikely
 =>600 ug/L: Consider test for iron overload

In patients with concomitant inflammation, use Iron Studies, including TIBC and Transferrin Saturation, to assess Iron Deficiency status.

For guidance, see www.hemequity.com/raise-the-bar

CHEM4

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
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Sodium

Sodium	140		135-145	mmol/L	2025-10-15 19:38:59	F	
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Potassium

Potassium	4.6		3.5-5.2	mmol/L	2025-10-15 19:38:59	F	
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Calcium Ionized

Calcium Ionized	1.29		1.15 - 1.40	mmol/L	2025-10-15 18:34:54	F	
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pH	7.44				2025-10-15 18:34:54	F	
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Calcium Ionized Adjusted To pH 7.4	1.32		1.15 - 1.40	mmol/L	2025-10-15 18:34:54	F	
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NOTE: Differences between the uncorrected ionized calcium result and the ionized calcium corrected to pH 7.4 are due to the sample having a pH significantly different from pH 7.4. Specimen pH may be artificially decreased due to delayed processing and may be increased when the specimen is exposed to air. Due to these factors, ionized calcium corrected to pH 7.4 should be interpreted with caution and used when the clinician has knowledge of the patients' acid/base status.

Phosphate

Phosphate	1.2		0.8-1.5	mmol/L	2025-10-15 19:38:59	F	
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Albumin

Albumin	41		35-52	g/L	2025-10-15 19:38:59	F	
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Bilirubin Total

Bilirubin Total	5		<20	umol/L	2025-10-15 19:38:59	F	
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Alkaline Phosphatase

Alkaline Phosphatase	87		35-120	U/L	2025-10-15 19:38:59	F	
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Alanine Aminotransferase

Alanine Aminotransferase	19		<36	U/L	2025-10-15 19:38:59	F	
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Magnesium

Magnesium	0.84		0.70-1.00	mmol/L	2025-10-15 19:38:59	F	
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Hemoglobin A1c

CHEM4

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
Hemoglobin A1C/Total Hemoglobin	5.4		<6.0	%	2025-10-15 20:45:31	F	

Diabetes Canada 2018 Guidelines:

Screening and Diagnosis:

< 5.5 % Normal

5.5% - 5.9 % At risk

6.0% - 6.4 % Prediabetes

>OR= 6.5 % Diabetes Mellitus***

***Regarding diagnosis: in the absence of symptomatic hyperglycemia, if a single laboratory test result is in the diabetes range, a repeat confirmatory laboratory test (FPG, A1C, 2hPG in a 75 g OGTT) must be done on another day for diagnosis confirmation.

Monitoring: <OR= 7.0 %

Target in adults without comorbidities. Other targets may be more appropriate in children, elderly and patients with comorbidities.

Results may not accurately reflect mean blood glucose in patients with hemoglobin variants, disorders associated with abnormal erythrocyte turnover, severe renal and liver disorders.

Creatinine/GFR

Creatinine	49	L	50-100	umol/L	2025-10-15 19:38:59	F	
Glomerular Filtration Rate (eGFR)	101		See below		2025-10-15 19:38:59	F	

Results rule 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.

Reference interval: =>60 mL/min/1.73m²

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

CHEM6

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
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Lipid Assessment

Hours After Meal	9			Hours	2025-10-15 19:34:58	F	
Triglyceride	0.45			mmol/L	2025-10-15 19:38:59	F	
	FASTING: <1.70 mmol/L NON-FASTING: <2.00 mmol/L						
Cholesterol	4.21		<5.20	mmol/L	2025-10-15 19:38:59	F	
	Total cholesterol and HDL-C used for risk assessment and to calculate non HDL-C.						
HDL Cholesterol	1.16	L	>=1.30	mmol/L	2025-10-15 19:38:59	F	
	HDL-C <1.30 mmol/L indicates risk for metabolic syndrome.						
Non HDL Cholesterol	3.05		<4.20	mmol/L	2025-10-15 19:38:59	F	

PATRICIA YVONNE PEART 7578443207RF

CHEM6

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
Non HDL-Cholesterol is not affected by the fasting status of the patient.							
LDL Cholesterol	2.83	<3.50		mmol/L	2025-10-15 19:38:59	F	
LDL-C is calculated using the NIH equation.							
Cholesterol/HDL Cholesterol	3.6				2025-10-15 19:38:59	F	
Cholesterol/HDL-C is not included in the 2021 CCS guideline as a lipid initiation or treatment target but is recognized as an indicator of high CVD risk at Cholesterol/HDL-C ratio >6.0							

CHEM28

Test Name(s)	Result	Abn	Reference Range	Units	Date/Time Completed	Status	Lab Lic #
Vitamin D-25 Hydroxy							
25-Hydroxy Vitamin D	68.9	L	75.0 - 250.0	nmol/L	2025-10-15 19:34:58	F	
Vit D Deficiency: 25.0 - 74.9							

END OF REPORT

5687 - LifeLabs 100 International Blvd. Toronto Ontario M9W 6J6 Canada B