

DR. RAMI MOZES MEDICINE PROFESSIONAL CORPORATION

Dr. Rami Mozes

211-2401 YONGE STREET Toronto Ontario M4P 3H1

Tel: 416-486-9600 Fax: 4164869227

Consultation Request

Date:	2025-10-24	Patient:	TAWDE, RITUJA RAJENDRA
Status:	Non-Urgent	Address:	1414-88 Erskine Ave Toronto, CA-ON, M4P 1V3
Service:	Endocrinologist	Phone:	647-919-6341
Consultant:	Boright, Andrew	Work Phone:	
Phone:	416-645-2929	Cell Phone:	
Fax:	416-645-2931	Email:	rituja1992@gmail.com
Address:	1929 Bayview Ave #107	Birthdate:	1992-12-09 (y/m/d)
	Toronto ON	Sex:	F
		Health Card No.:	(ON) 6202783723 CK
		Appointment date:	
		Time:	
		Chart No.:	

Reason for consultation:

Please see regarding elevated blood sugar and prolactin. Thank you.

Pertinent Clinical Information:

Medical History:


PCO S
sinusitis
DM

Allergies:

NKDA Custom Allergy
DUST Custom Allergy

Mozes, Dr. Rami (245092)

Signature:



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DYNACARE LABORATORIES
115 MIDAIR CT, BRAMPTON L6T5MB

CUSTOMER SERVICE PHONE/FAX REPORT

COLLECTION TIME LRC BJ-56061085 REPRINT
2025/10/02 08:03

2025/10/02 2025/10/03

TAWDE, RITUJA
#1414-88 ERSKINE AVE
TORONTO
ONTARIO
M4P 1V3

6202783723 CK
1992/12/09
F 32 Y

DR. R.S. MOZES
ROCKCLIFFE CARE COMMUNITY
3015 LAWRENCE AVE E
SCARBOROUGH, ON
M1P 2V7

LRC
BRG03

PHONE: 647-919-6341
FASTING

PHONE: 416-264-3201

OUTSIDE
NORMAL
LIMITS

CODES	TEST DESCRIPTION	RESULTS	REFERENCE RANGE	LIMITS
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C H E M I S T R Y

GLUCOSE SERUM FASTING	8.3	mmol/L	8.3
3.6 - 6.0 NORMAL FASTING GLUCOSE			
6.1 - 6.9 IMPAIRED FASTING GLUCOSE			
>6.9 PROVISIONAL DIAGNOSIS OF DIABETES MELLITUS			

CREATININE	59.	50 - 100	umol/L
eGFR	119.	>=60.	mL/min/1.73m**2
eGFR is calculated using the CKD-EPI 2021 equation			
which does not use a race-based adjustment.			

An eGFR result >=60 ml/min/1.73m**2 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.

CALCIUM	2.35	2.15 - 2.60	mmol/L
PHOSPHORUS	1.36	0.80 - 1.45	mmol/L
MAGNESIUM	0.83	0.65 - 1.05	mmol/L
BILIRUBIN TOTAL	7.	<23	umol/L
URATE	287.	149 - 422	umol/L

The target for treatment of gout is a serum urate level < 360 umol/L (minimum). Lower serum concentrations may be required for alleviation of symptoms.
[Arthritis Care Research 64 (2012) 1431-1446]

HOURS FASTING	12.	hours
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CHOLESTEROL	4.43	< 5.20 mmol/L	
Total cholesterol and HDL-C used for risk assessment and to calculate non-HDL-C.			
TRIGLYCERIDES	0.94	< 1.70 mmol/L	
If nonfasting, triglycerides <2.00 mmol/L desired.			
HDL CHOLESTEROL	0.97	mmol/L	0.97
F: >=1.30 mmol/L			
HDL-C <1.30 mmol/L indicates risk for metabolic syndrome.			
LDL CHOLESTEROL CALC.	3.06	< 3.50 mmol/L	
LDL-C was calculated using the NIH equation.			
For additional LDL-C and non-HDL-C thresholds based on risk stratification, refer to 2021 CCS Guidelines.			
NON-HDL-CHOLESTEROL(CALC	3.46	< 4.20 mmol/L	
TC/HDL-C RATIO	4.6		
VITAMIN B12	360.	221 - 918 pmol/L	
60% of symptomatic patients have a hematologic or neurologic response to B12 supplementation at a level < 148 pmol/L			
Vitamin B12 Deficiency: < 148 pmol/L			
Vitamin B12 Insufficiency: 148 to 220 pmol/L			
FERRITIN	28.	30 - 109 ug/L	28.
Result consistent with Iron Deficiency			
For guidance, see www.hemequity.com/raise-the-bar			
SODIUM	138.	136 - 146 mmol/L	
POTASSIUM	4.7	3.7 - 5.4 mmol/L	
CHLORIDE	103.	95 - 108 mmol/L	
ALKALINE PHOSPHATASE	71.	35-122 U/L	

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ALT	<10.	<36	U/L	
TSH	3.53	0.35 - 5.00	mIU/L	
T4 FREE	15.	11 - 23	pmol/L	
FREE T3	4.7	3.4 - 5.9	pmol/L	
HEMOGLOBIN A1c	8.2		%	8.2
	NON-DIABETIC:	< 6.0	%	
	PREDIABETES:	6.0 - 6.4	%	
	DIABETIC:	> 6.4	%	
	OPTIMAL CONTROL:	< 7.0	%	
	SUB-OPTIMAL CONTROL:	7.0 - 8.4	%	
	INADEQUATE CONTROL:	> 8.4	%	
LH	2.5		IU/L	
	Follicular:	1.9 - 14.6		
	Ovulatory:	12.2 - 118.0		
	Luteal:	0.7 - 12.9		
	Post-menopausal:	5.3 - 65.4		
DHEAS	6.8	2.68 - 9.23	umol/L	
FSH	3.		IU/L	
	Follicular:	3 - 15		
	Ovulatory:	5 - 23		
	Luteal:	1 - 9		
	Post-menopausal:	16 - 157		

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P	PROLACTIN	55.	< 24 ug/L	55.
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Roche Diagnostics Electrochemiluminescence Immunoassay (ECLIA).

Values obtained with different assay methods or kits may not be comparable and cannot be used interchangeably.

Testing for the potential presence of macroprolactin is suggested in asymptomatic hyperprolactinemic patients. If clinically indicated, "Macroprolactin" testing should be requested on an OHIP laboratory requisition. A fresh blood sample (serum) will need to be collected.

P	PROGESTERONE	5.6	nmol/L
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Follicular: < 3.7
Ovulatory: < 57.2
Luteal: 3.4 - 83.6
Post-menopausal: < 0.7

R	CG	<1	IU/L
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Non-pregnant pre-menopausal: < 5
Equivocal (may indicate early pregnancy): 5 - 9
Post-menopausal: < 8

In the first three weeks of a normal pregnancy the serum HCG approximately doubles every two days. The doubling time of HCG is considered a more reliable method of evaluating an early pregnancy than a single serum HCG result. Serum chorionic gonadotropin (CG) measurements should be made only in relation to diagnosing pregnancy. Discrepancies between the laboratory value and clinical findings may be resolved with a urine CG measurement.

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ESTRADIOL	251.	pmol/L	
	Follicular:	45 - 854	
	Ovulatory:	151 - 1461	
	Luteal:	82 - 1251	
	Post-menopausal:	< 202	

H E M A T O L O G Y

HEMOGLOBIN	127.	110 - 147 g/L	
HEMATOCRIT	0.40	0.33 - 0.44 l/l	
RBC	5.2	3.8 - 5.2 x 10E12/L	
RBC INDICES: MCV	78.	76 - 98 fl	
. MCH	25.	24 - 33 pg	
. MCHC	318.	313 - 344 g/L	
RDW	15.2	12.5 - 17.3	
WBC	8.4	3.2 - 9.4 x 10E9/L	
PLATELETS	384.	155 - 372 x 10E9/L	384.
MPV	9.3	4.0 - 14.0 fl	
DIFFERENTIAL WBC'S :			
NEUTROPHILS	4.8	1.4 - 6.3 x10E9/L	
LYMPHOCYTES	3.0	1.0 - 2.9 x10E9/L	3.0
MONOCYTES	0.3	0.2 - 0.8 x10E9/L	
EOSINOPHILS	0.1	0.0 - 0.5 x10E9/L	
BASOPHILS	0.00	0.00 - 0.09 x10E9/L	

SMEAR:

SMEAR REFERRED TO PATHOLOGIST FOR REVIEW.

** PLEASE REVIEW THIS REPORT AS ADDITIONAL TESTING
HAS BEEN ADDED/REPORTED.

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CONSULTANT'S REPORT

MICROCYTOSIS (<80 FL)
CONSISTENT WITH IRON DEFICIENCY
LYMPHOCYTOSIS ?INFECTION ?DRUG EFFECT

Dr. Sanjeev Deodhare , MD, FRCPC

U R I N A L Y S I S

URINALYSIS CHEMICAL

GLUCOSE	NEG	NEGATIVE (mmol/L)
BILIRUBIN	NEG	NEGATIVE
KETONES	NEG	NEGATIVE (mmol/L)
SPECIFIC GRAVITY	1.014	1.005 - 1.030
BLOOD	NEG	NEGATIVE
pH	5.5	5.0 - 8.0
PROTEIN	NEG	NEGATIVE (g/L)
UROBILINOGEN	3.2	3.2 - 16 umol/L
NITRITE	NEG	NEGATIVE
LEUKOCYTES	NEG	NEGATIVE
COLOUR	YELLOW	YELLOW
APPEARANCE	CLEAR	CLEAR