ABC, BBC

Mars, Jupiter

1234567890 Phone:

**Birthdate:** 7/08/1964  $\mathtt{Sex:} \quad \mathbb{F}$ Number:

Your Reference: 570535703 Lab Reference: 269746401-C- Glucose

Laboratory: DHM

Addressee: Dr ABC Referred by: Dr MR

Name of Test: Glucose

**Requested:** 15/08/2015 **Collected:** 15/08/2015 **Reported:** 18/08/2015

14:06

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Glucose

Glucose Fasting  $H = 13.0 \quad mmol/L \quad (3.6 - 6.0)$ 

Comment on Lab ID 269746401

Supervising Pathologist: GC, NT

Tests Completed: pGlu, HbA1c.

Tests Pending : Sample Pending:

ABC, BBC Mars, Jupiter

**Phone:** 1234567890

**Birthdate:** 7/08/1964 Sex: F Number:

Your Reference: 570535703 Lab Reference: 269746401-C- GHB

Laboratory: DHM

Addressee: Dr ABC Referred by: Dr MR

**Reported:** 18/08/2015

14:06

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Haemoglobin Alc

H 104 mmol/mol ( 20 - 42 HbA1c (IFCC) н 11.6 (4.0 - 6.0)HbA1c

Comment on Lab ID 269746401

According to current guidelines, a level of HbAlc greater than or equal to 48 mmol/mol (6.5%) is the recommended diagnostic cut-off point for diabetes mellitus. In an asymptomatic patient, additional testing should be performed to confirm the diagnosis.

It also should be noted that further investigation is required for any inexplicably high HbA1c level or significant discrepancy between HbA1c and glucose results.

Supervising Pathologist: GC, NT

Tests Completed: pGlu, HbA1c.

Tests Pending : Sample Pending :

ABC, BBC Mars, Jupiter

**Phone:** 1234567890

Birthdate: 7/08/1964 Sex: F Number:

Your Reference: 570535703 Lab Reference: 269746401-C- Glucose

Laboratory: DHM

Addressee: Dr MR Referred by:

Name of Test: Glucose

**Requested:** 15/08/2015 Collected: 15/08/2015 **Reported:** 15/08/2015

18:31

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Glucose

H 13.0 mmol/L ( 3.6 - 6.0 ) Glucose Fasting

Comment on Lab ID 269746401

Supervising Pathologist: GC, NT

Tests Completed: pGlu Tests Pending : HbAlc.

Sample Pending:

ABC, BBC Mars, Jupiter

1234567890 Phone:

F **Birthdate:** 7/08/1964 Sex: Number:

Your Reference: 570535703 269746401-C- GHB Lab Reference:

Laboratory: DHM

Addressee: Dr MR Referred by: Dr MR

Name of Test: \_HbA1c\_ Requested: 15/08/2015 Collected: 15/08/2015 **Reported:** 17/08/2015

13:02

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Clinical Notes: HOME BSL READING ABN HIGH - 12-18

Haemoglobin Alc

HbA1c (IFCC) H 104 mmol/mol ( 20 - 42 % (4.0 - 6.0) HbA1c н 11.6

Comment on Lab ID 269746401

According to current guidelines, a level of HbAlc greater than or equal to 48 mmol/mol (6.5%) is the recommended diagnostic cut-off point for diabetes mellitus. In an asymptomatic patient, additional testing should be performed to confirm the diagnosis.

It also should be noted that further investigation is required for any

inexplicably high HbAlc level or significant discrepancy between HbAlc and glucose results.

Supervising Pathologist: GC, NT

Tests Completed: pGlu, HbAlc.

Tests Pending : Sample Pending :

ABC, BBC

332 BUNGARRIBEE ROAD, BLACKTOWN. 2148

**Phone:** 1234567890

Birthdate: 7/08/1964 Sex: F Number:

Your Reference: 571241280 Lab Reference: 269675667-C-Biochemistry

Laboratory: DHM

Addressee: Dr MR Referred by: Dr MR

Name of Test: Biochemistry

**Requested:** 22/08/2015 **Collected:** 22/08/2015 **Reported:** 22/08/2015

22:04

Clinical Notes: NELY DIAGNOSED TYPE 2 DM

Clinical Notes: NELY DIAGNOSED TYPE 2 DM

## Biochemistry

		- /				
Sodium	137	${ t mmol/L}$	(	135 - 145	)	
Potassium	4.1	${\tt mmol/L}$	(	3.5 - 5.5	)	
Chloride	102	mmol/L	(	95 - 110	)	
Bicarbonate	21	mmol/L	(	20 - 32	)	
Urea	4.6	mmol/L	(	3.0 - 8.0	)	
Creatinine	75	umol/L	(	45 - 85	)	
eGFR	79	mL/min/1	.73m	12 ( >59		)
Total Bilirubin	13	umol/L	(	3 - 15	)	
Alk Phos	89	U/L	(	30 - 115	)	
Gamma GT	32	U/L	(	5 - 35	)	
LDH	Н 254	U/L	(	120 - 250	)	
AST	18	U/L	(	10 - 35	)	
ALT	14	U/L	(	5 - 30	)	
Total Protein	79	g/L	(	64 - 83	)	
Albumin	42	g/L	(	36 - 47	)	
Globulin	37	g/L	(	23 - 39	)	

Comment on Lab ID 269675667

eGFR (mL/min/1.73m2) calculated by CKD-EPI formula - see www.kidney.org.au

Supervising Pathologist: GC, NT

Tests Completed: LFT, C, UCr, E, FBC

Tests Pending : Sample Pending :

ABC, BBC

332 BUNGARRIBEE ROAD, BLACKTOWN. 2148

**Phone:** 1234567890

Birthdate: 7/08/1964 Sex: F Number:

Your Reference: 571241280 Lab Reference: 269675667-H-\_HAEM VIRTUAL

Laboratory: DHM

Addressee: Dr MR Referred by:

Name of Test: Haematology

**Requested:** 22/08/2015 **Collected:** 22/08/2015 **Reported:** 22/08/2015

19:01

Clinical Notes: NELY DIAGNOSED TYPE 2 DM

Clinical Notes: NELY DIAGNOSED TYPE 2 DM

## Haematology

Haemoglobin	129	g/L	(	119 - 160	)
Red cell count	4.8	x10*12/L	(	3.8 - 5.8	)
Haematocrit	0.40		(	0.35 - 0.48	)
MCV	83	fL	(	80 - 100	)
MCH	L 26.9	pg	(	27.0 - 32.0	)
MCHC	326	g/L	(	310 - 360	)
RDW	13.2		(	10.0 - 15.0	)
White cell count	8.2	x10*9/L	(	4.0 - 11.0	)
Neutrophils	4.86	x10*9/L	(	2.0 - 7.5	)
Lymphocytes	2.47	x10*9/L	(	1.0 - 4.0	)
Monocytes	0.56	x10*9/L	(	0.0 - 1.0	)
Eosinophils	0.22	x10*9/L	(	0.0 - 0.5	)
Basophils	0.04	x10*9/L	(	0.0 - 0.3	)
NRBC	<1.0	/100 WBC	(	<1	)
Platelets	257	x10*9/L	(	150 - 450	)

Comment on Lab ID 269675667

Full blood count is essentially normal

Supervising Pathologist: FH

Tests Completed: FBC

Tests Pending : LFT, C, UCr, E Sample Pending :

ABC, BBC

332 BUNGARRIBEE ROAD, BLACKTOWN. 2148

**Phone:** 1234567890

**Birthdate:** 7/08/1964 **Sex:** F Number:

Your Reference: 571241021 Lab Reference: 269680831-C-MALBUR

Laboratory: DHM

Addressee: Dr MR Referred by: Dr MR

Name of Test: RU-MALB

**Requested:** 22/08/2015 **Collected:** 24/08/2015 **Reported:** 24/08/2015

20:31

Clinical Notes: TYPE 2 DM

Clinical Notes: TYPE 2 DM

## Microalbumin, Random Urine

U-Creatinine 6.1 mmol/L R U-Albumin 14.1 ma/L R U-Albumin/Creat 2.3 mg/mmol ( <3.5 )

Comment on Lab ID 269680831

Please note that on 02/04/2013, the reference limits for urine albumin/creatinine ratio changed from 0.0 - 3.0 to <3.5 mg/mmol for female patients and from 0.0 - 2.5 to <2.5 mg/mmol for male patients.

Supervising Pathologist: GC, NT

Tests Completed: RU-MALB

Tests Pending : Sample Pending :

ABC, BBC

332 BUNGARRIBEE ROAD, BLACKTOWN. 2148

**Phone:** 1234567890

**Birthdate:** 7/08/1964 Sex: F Number:

Your Reference: 571936371 Lab Reference: 245736508-M-MSU

Laboratory: DHM

Addressee: Dr MR Referred by: Dr MR

Name of Test: MSU

**Requested:** 29/08/2015 **Collected:** 29/08/2015 **Reported:** 30/08/2015

10:31

Clinical Notes: DYSURIA

Clinical Notes : DYSURIA

Urine

Nil Protein Glucose

Blood Trace Ketones Nil

Bilirubin Nil

1.015 Specific gravity (1.005 - 1.030)

Microscopy

Leucocytes x10\*6/L <10 Erythrocytes x10\*6/L 1 <10 x10\*6/L

Epithelial cells 14

Casts NIL

No significant growth Culture

Supervising Pathologist: IC

Tests Completed: MSU Tests Pending : Sample Pending :

ABC, BBC Mars, Jupiter

**Phone:** 1234567890

Birthdate: 7/08/1964  $\mathbf{Sex}\colon\quad \mathbb{F}$ Number:

Your Reference: 00036041 Lab Reference: 267894370-M-SWAB

Laboratory: DHM

Addressee: DRR Referred by: DRR

Name of Test: GMC1

**Requested:** 03/12/2017 **Collected:** 04/12/2017 **Reported:** 06/12/2017

10:17

Clinical Notes: ABSCESS IN THE RIGHT BREAST

Abscess Swab (Right) breast

Gram stain

+ G+ve cocci + Leucocytes

Culture

## Organism 1 Gram negative bacillus

Moderate growth

Comment on Lab ID 267894370

Organism 1 - Sensitivities to follow.

Organism 1 - The reporting of antibiotic sensitivities should not be taken as an indication for treatment. Results are provided in case clinical assessment indicates that antibiotic therapy is necessary. Further report to follow.

Supervising Pathologist: IC

\*\*\* The above result is provisional \*\*\*

Tests Completed: Tests Pending : GMC1 Sample Pending:

ABC, BBC Mars, Jupiter

**Phone:** 1234567890 **Birthdate:** 7/08/1964 Sex: F Number:

Your Reference: 00036041 Lab Reference: 267894370-M-SWAB

Laboratory: DHM

Addressee: DRR Referred by: DRR

Name of Test: GMC1

**Requested:** 03/12/2017 **Collected:** 04/12/2017 **Reported:** 06/12/2017

13:47

Clinical Notes: ABSCESS IN THE RIGHT BREAST

Abscess Swab (Right) breast

Gram stain

Leucocytes + G+ve cocci

Culture

Organism 1 Proteus vulgaris

Moderate growth

Comment on Lab ID 267894370

Organism 1 - Sensitivities to follow.

Organism 1 - The reporting of antibiotic sensitivities should not be taken as an indication for treatment. Results are provided in case clinical assessment indicates that antibiotic therapy is necessary. Further report to follow.

Supervising Pathologist: IC

\*\*\* The above result is provisional \*\*\*

Tests Completed:

Tests Pending : GMC1 Sample Pending :

ABC, BBC Mars, Jupiter

**Phone:** 1234567890

Birthdate: 7/08/1964 Sex: F Number:

Your Reference: 00036041 Lab Reference: 267894370-M-SWAB

Laboratory: DHM

Addressee: DRR Referred by: DRR

Name of Test: GMC1

**Requested:** 03/12/2017 **Collected:** 04/12/2017 **Reported:** 07/12/2017

08:47

Clinical Notes : ABSCESS IN THE RIGHT BREAST

Abscess Swab (Right) breast

Gram stain

Leucocytes + G+ve cocci +

Culture

Organism 1 Proteus vulgaris Moderate growth

Sensitivities

1 Ampi/Amoxycillin R Augmentin Cefotaxime/Ceftriaxone R Ciprofloxacin R Cotrimoxazole s s Cefepime Gentamicin s Meropenem s Piperacillin/Tazobactam R

Comment on Lab ID 267894370

Organism 1 - The reporting of antibiotic sensitivities should not be taken as an indication for treatment. Results are provided in case clinical assessment indicates that antibiotic therapy is necessary.

Supervising Pathologist: IC

Tests Completed: GMC1

Tests Pending : Sample Pending :