

Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

20-Jun-2025 00:16 Chest X-ray, Erect

SGCR255021601479

Final

Report Link

Final

Additional Info

Final

Verified Date/Time : 20/06/2025 08:38

Verified Person : Dr. Chai Xun

Verified Section : SGH General Radiography

Performed at : Department of Diagnostic Radiology, Singapore General Hospital

Department of Diagnostic Radiology, Singapore General Hospital

Chest X-ray, Erect

Final

HISTORY

chest pain, SOB, urticaria

REPORT

Prior Chest X-ray, Erect 13/03/2015 noted.

Heart size is normal.

No consolidation or pleural effusion. No discernible pneumothorax.

Surgical clips over the bilateral chest wall/axilla, and projected over the bilateral perihilar regions.

Report Indicator: Known / Minor

Finalised by: Chai Xun, Resident, 65339Z

Finalised Date/Time: 20/06/2025 08:38

(For your attention)

20-Jun-2025 04:36 MRSA PCR Screening Test (this test is to be or

25:DJ0046877

Final

Reporting Information

Date/Time : 20/06/2025 1345

Final

SENIOR CONSULTANT: DR TAN AI LING

Laboratory : SGH Diagnostic Bacteriology

SINGAPORE GENERAL HOSPITAL PTE LTD

OUTRAM ROAD 169608

Received Date/Time

20/06/2025 0950

Final Updated

Specimen Comment

Final Updated

SOURCE : NOSE, AXILLA & GROIN

SPEC DESCRIPTION :

COMMENT : DIAGNOSIS: Admission

CPOE SOURCE: Nose, axilla and groin

Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

20-Jun-2025 04:36	MRSA PCR Screening Test (this test is to be or	25:DJ0046877	Final
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MRSA PCR Screening Test (this
test is to be ordered for all
MRSA screening with effect from
30/10/2017)

Final

MRSA PCR Screening Test

MRSA DNA Not Detected

MRSA PCR Screening Test SPC Ct 32.4
MRSA PCR Screening Test mec Ct 31.4
MRSA PCR Screening Test SCC Ct 0.0

Method: Real-time Polymerase Chain Reaction (Xpert MRSA NxG Assay)

Performance characteristics: PCR targets SCCmec, mecA and mecC genes

Sensitivity compared to enrichment culture: 89.2%

Specificity compared to enrichment culture: 98.2%

Analytical sensitivity at 95% confidence: 265-1000 CFU/eSwab depending on SCCmec allotype

Analytical specificity: No cross reactivity seen with bacterial species commonly found on skin and in nasopharynx

Limitations: A negative result does not exclude the possibility of MRSA
colonization. This assay does not detect novel variants or gene sequences not
targeted by the Xpert MRSA NxG Assay.

This test was modified from a US FDA-approved commercial assay and its
performance characteristics determined by the Diagnostic Bacteriology
Laboratory, Singapore General Hospital (SGH). The test was validated according
to College of American Pathologists (CAP) regulations. This test is used for
clinical purposes. It should not be regarded as investigational or for research.

DATE OF REPORTING: 20/06/25

20-Jun-2025 07:55	Glucose, POCT	2006:BT0814	Final
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Received Date/Time

20/06/2025 0755

Final Updated

Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

20-Jun-2025 07:55 Glucose, POCT 2006:BT0814 Final

Glucose, POCT	7.6	[3.9 - 11.0 MMOL/L]	Final
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FASTING (3.9-6.0) MMOL/L

Test(s) performed at Point of Care

Assay performance may not be identical to that achieved at the central laboratories of the Department of Pathology.

1. Reference intervals shown on this report are based on assay methodologies used by the central laboratories.

2. Interpretation of results in conjunction with test results from the central laboratories should be done with caution.

3. In case of doubt, always send a specimen to the central laboratories for confirmation.

20-Jun-2025 11:10 Glucose, POCT 2006:BT1122 Final

Received Date/Time	20/06/2025 1110	Final	Updated
Glucose, POCT	6.5	[3.9 - 11.0 MMOL/L]	Final

FASTING (3.9-6.0) MMOL/L

Test(s) performed at Point of Care

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20-Jun-2025 16:03 Histopathology 25:PB017978 Final

Received Date/Time	20/06/2025 1713	Final	Updated
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Reporting Information	Date/Time : 25/06/2025 1630	Final
	Histopathologist : DR LIM KOK HING	
	Laboratory : SGH Histopathology	
	SINGAPORE GENERAL HOSPITAL PTE LTD	
	OUTRAM ROAD 169608	

Consultant-In-Charge	JOSHUA TAN ZHI CHIEN	Final	Updated
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Submitting Physician	SEE TOH ZHI WEI	Final	Updated
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Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

20-Jun-2025 16:03 Histopathology

25:PB017978

Final

Histopathology Report

Final

DIAGNOSIS

A and B) Skin, left foot (Biopsy):- Mixed dermal inflammatory response, with suggestion of a small vessel vasculitic component.

Comment: Main considerations include infection vs. a form of hypersensitivity response e.g. to drugs or another exogenous trigger. There is some subcutaneous inflammation but this appears to be related to the main dermal infiltrate rather than a separate panniculitic process. Please correlate clinically.

GROSS DESCRIPTION

(A) The specimen is received in formalin, labelled with patient's data and designated "skin biopsy over left foot for histology". It consists of a punch biopsy measuring 3.5mm in diameter and 2mm thick. No discrete lesion is seen grossly. The skin surface appears unremarkable.

(A1; no reserve)

(B) Fresh tissue received for immunofluorescence. It consists of skin measuring 0.3 x 0.4cm with underlying tissue measuring 0.3cm.

(B1; no reserve)

MICROSCOPIC DESCRIPTION

Sections show skin to depth of subcutis. There is a heavy interstitial dermal mixed infiltrate of lymphocytes, eosinophils and neutrophils. There is some focal extension into subcutis, with focal multinucleated giant cells. No definite granulomas seen. There is some superficial dermal oedema, but otherwise definite basal clefting of epidermis or other blister formation is not seen. There is some suggestion of obliteration of superficial capillaries with some red blood cell extravasation, together with some mild endothelial cell reactive changes and scattered karyorrhectic debris. Epidermis itself is relatively unremarkable with basketweave orthokeratosis; no interface changes seen. PAS staining is negative for fungi. Alcian blue staining is negative for significant dermal mucin. No malignancy seen.

Direct immunofluorescence shows focal 1-2+ deposition of C3 around a few superficial capillaries; it is negative for significant deposition of IgG, IgA, IgM and fibrinogen.

Comment: Special stains, immunohistochemistry and/or in-situ hybridisation are performed with in-house positive and/or negative controls which show satisfactory performance. Immunofluorescence studies are performed using internal controls and show satisfactory results. For tests performed on externally processed material, it is unknown if their pre-analytical characteristics will contribute to variation in staining.

Pathologist :
DR LIM KOK HING
25/06/2025

20-Jun-2025 17:24 Glucose, POCT

2006:BT1964

Final

Received Date/Time

20/06/2025 1724

Final Updated

Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

20-Jun-2025 17:24	Glucose, POCT	2006:BT1964	Final
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Glucose, POCT	5.8	[3.9 - 11.0 MMOL/L]	Final
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FASTING (3.9-6.0) MMOL/L

Test(s) performed at Point of Care

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20-Jun-2025 21:57	Glucose, POCT	2006:BT2485	Final
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Received Date/Time	20/06/2025 2157	Final	Updated
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Glucose, POCT	5.9	[3.9 - 11.0 MMOL/L]	Final
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FASTING (3.9-6.0) MMOL/L

Test(s) performed at Point of Care

Assay performance may not be identical to that achieved at the central laboratories of the Department of Pathology.

1. Reference intervals shown on this report are based on assay methodologies used by the central laboratories.

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21-Jun-2025 11:59	C3 Complement, serum	2106:BC2759	Final
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C3 Complement, serum	1.22	[0.90 - 1.80 G/L]	Final
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Reporting Information	Date/Time : 21/06/2025 1423	Final
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Medical Lab Scientist: Ms Rebecca Tan, Medical

Officer: Dr Cher Boon Meng

Laboratory : SGH Clinical Biochemistry

SINGAPORE GENERAL HOSPITAL PTE LTD

OUTRAM ROAD 169608

Received Date/Time	21/06/2025 1252	Final	Updated
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Specimen Comment		Final	Updated
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Specimen Type: Blood (Plain)

21-Jun-2025 11:59	C4 Complement, serum	2106:BC2759	Final
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C4 Complement, serum	0.24	[0.10 - 0.40 G/L]	Final
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Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

21-Jun-2025 11:59 C4 Complement, serum 2106:BC2759 Final

Reporting Information	Date/Time : 21/06/2025 1423 Medical Lab Scientist: Ms Rebecca Tan, Medical Officer: Dr Cher Boon Meng Laboratory : SGH Clinical Biochemistry SINGAPORE GENERAL HOSPITAL PTE LTD OUTRAM ROAD 169608	Final
Received Date/Time	21/06/2025 1252	Final Updated
Specimen Comment		Final Updated
Specimen Type: Blood (Plain)		

21-Jun-2025 12:00 Antinuclear Antibody Profile 2106:IM6196 Final

Received Date/Time	23/06/2025 0842	Final Updated
Reporting Information	Date/Time : 23/06/2025 1521 Senior Principal Medical Lab Scientist : Huang Shan Wei Laboratory : SGH Immunology SINGAPORE GENERAL HOSPITAL PTE LTD OUTRAM ROAD 169608	Final
Specimen Comment		Final Updated
Specimen Type: Blood (Plain)		
CLINICAL DIAGNOSIS: autoimmune screen		
Antinuclear Antibody	Negative Screened at 1:160 Test performed using ANA HEp-20-10 cells IgG IFT - EUROIMMUN	Final

21-Jun-2025 12:00 Anti Double-stranded DNA Antibody 2106:IM6196 Final

Reporting Information	Date/Time : 23/06/2025 1500 Senior Principal Medical Lab Scientist : Huang Shan Wei Laboratory : SGH Immunology SINGAPORE GENERAL HOSPITAL PTE LTD OUTRAM ROAD 169608	Final
Received Date/Time	23/06/2025 0842	Final Updated
Specimen Comment		Final Updated
Specimen Type: Blood (Plain)		
CLINICAL DIAGNOSIS: autoimmune screen		

Patient Results

All results performed dates from 25-Mar-2025

Requested By: Rumida Binti Abdul Rahman (Medical Record Officer)

25/09/2025 12:39

21-Jun-2025 12:00	Anti Double-stranded DNA Antibody	2106:IM6196	Final
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Anti Double-stranded DNA Antibody	1.6	[IU/ml]	Final
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Interpretation:

<10 IU/ml	:	Negative
10-15 IU/ml	:	Indeterminate
>15 IU/ml	:	Positive

Test performed using EliA, Phadia, Thermofisher Scientific.

End of Report

This is a computer generated report and no signature is required.