

GRASSO, JENNIFER  
 28 MINNESOTA RD, HAMLYN TERRACE. 2259  
 Phone: 0400233289  
 Birthdate: 19/12/1938 Sex: F Medicare Number: 2159200309  
 Your Reference: 13C2E83D1D Lab Reference: 892541629-H- HAEM VIRTUAL  
 Laboratory: Douglass Hanly Moir Pathology  
 Addressee: DR AGERICO MICLAT Referred by: DR AGERICO MICLAT

Name of Test: Haematology  
 Requested: 22/01/2025 Collected: 25/01/2025 Reported: 25/01/2025  
 18:14

Clinical notes: health check

Clinical Notes : health check

#### HAEMATOLOGY

Date	01/02/23	08/11/23	21/06/24	25/01/25			
Time F-Fast	0841 F	1039 F	0814 F	0841 F			
Lab ID	885733195	836812696	851730975	892541629	Units	Reference	
<b>Haemoglobin</b>	133	130	129	131	g/L	(110-160)	
RCC	4.7	4.3	4.3	4.3	$\times 10^{12}/L$	(3.6-5.5)	
Haematocrit (0.30-0.46)	0.42	0.40	0.39	0.39			
MCV	91	94	91	91	fL	(80-100)	
MCH (27.0-32.0)	28.6	30.4	30.1	30.3	pg		
MCHC	316	323	331	335	g/L	(310-360)	
RDW (10.0-15.0)	13.0	12.6	13.3	13.1			
<b>WCC</b>	8.0	8.0	8.4	6.7	$\times 10^9/L$	(4.0-11.0)	
Neutrophils	3.22	4.00	3.80	2.84	$\times 10^9/L$	(2.0-7.5)	
Lymphocytes	4.04	3.22	3.68	3.27	$\times 10^9/L$	(1.0-4.0)	
Monocytes	0.58	0.60	0.61	0.41	$\times 10^9/L$	(0.0-1.0)	
Eosinophils	0.09	0.12	0.18	0.10	$\times 10^9/L$	(0.0-0.5)	
Basophils	0.09	0.08	0.09	0.07	$\times 10^9/L$	(0.0-0.3)	
NRBC	<1.0	<1.0	<1.0	<1.0	/100 WBC	(<1)	
<b>Platelets</b>	205	179	233	183	$\times 10^9/L$	(150-450)	

Comments on Collection 25/01/25 0841 F:  
 Full blood count is within reference limits

NATA Accreditation No 2178

Tests Completed: FBC(e)  
 Tests Pending : LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
 Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e)  
 Sample Pending :

GRASSO, JENNIFER  
 28 MINNESOTA RD, HAMILYN TERRACE. 2259  
**Phone:** 0400233289  
**Birthdate:** 19/12/1938 **Sex:** F **Medicare Number:** 2159200309  
**Your Reference:** 13C2E83D1D **Lab Reference:** 892541629-C-Biochemistry  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR AGERICO MICLAT **Referred by:** DR AGERICO MICLAT

**Name of Test:** Biochemistry  
**Requested:** 22/01/2025 **Collected:** 25/01/2025 **Reported:** 25/01/2025  
 19:29

**Clinical notes:** health check

Clinical Notes : health check

#### BIOCHEMISTRY

Date	01/02/23	08/11/23	21/06/24	25/01/25		
Time F-Fast	0841 F	1039 F	0814 F	0841 F		
Lab ID	885733195	836812696	851730975	892541629	Units	Reference
Status	Fasting	Fasting	Fasting	<b>Fasting</b>		
Sodium	139	138	140	<b>142</b>	mmol/L	(135-145)
Potassium	4.2	4.4	4.5	<b>4.2</b>	mmol/L	(3.5-5.5)
Chloride	103	104	107	<b>107</b>	mmol/L	(95-110)
Bicarbonate	28	25	24	<b>27</b>	mmol/L	(20-32)
Urea	6.0	5.1	6.0	<b>5.3</b>	mmol/L	(3.5-10.0)
Creatinine	60	60	65	<b>60</b>	umol/L	(45-95)
eGFR	80	80	72	<b>79</b>	mL/min/1.73m <sup>2</sup> (>59)	
Calcium				<b>2.36</b>	mmol/L	
(2.15-2.55)						
Corr Calcium				<b>2.34</b>	mmol/L	
(2.15-2.55)						
Bili.Total	15	H 19	H 20	<b>H 16</b>	umol/L	(3-15)
ALP	62	69	61	<b>69</b>	U/L	(30-115)
GGT	22	20	23	<b>24</b>	U/L	(5-35)
LD	205	248	248	<b>239</b>	U/L	(120-250)
AST	29	34	29	<b>H 38</b>	U/L	(10-35)
ALT	23	20	19	<b>H 31</b>	U/L	(5-30)
Total Protein	70	68	67	<b>68</b>	g/L	(60-81)
Albumin	45	43	44	<b>44</b>	g/L	(34-45)
Globulin	25	25	23	<b>24</b>	g/L	(23-39)
Cholesterol	5.3	5.4	4.4	<b>4.5</b>	mmol/L	(<5.5)
Triglycerides	1.9	1.5	1.6	<b>1.6</b>	mmol/L	(<2.0)

Comments on Collection 25/01/25 0841 F:  
 eGFR (mL/min/1.73m<sup>2</sup>) calculated by CKD-EPI formula - see [www.kidney.org.au](http://www.kidney.org.au)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Lipids HDL(s),  
 Ca(s), FBC(e)  
 Tests Pending : Iron(s), Vit D(s), TSH(s), HbA1c Diag(e)  
 Sample Pending :

GRASSO, JENNIFER  
28 MINNESOTA RD, HAMLYN TERRACE. 2259  
**Phone:** 0400233289  
**Birthdate:** 19/12/1938 **Sex:** F **Medicare Number:** 2159200309  
**Your Reference:** 13C2E83D1D **Lab Reference:** 892541629-C\_Glucose  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR AGERICO MICLAT **Referred by:** DR AGERICO MICLAT

**Name of Test:** Glucose  
**Requested:** 22/01/2025 **Collected:** 25/01/2025 **Reported:** 25/01/2025  
19:29

**Clinical notes:** health check

Clinical Notes : health check

**GLUCOSE**

<b>Date</b>	01/02/23	08/11/23	21/06/24	<b>25/01/25</b>		
<b>Time F-Fast</b>	0841 F	1039 F	0814 F	0841 F		
<b>Lab ID</b>	885733195	836812696	851730975	<b>892541629</b>	Units	Reference
F Gluc Plasma	4.6	4.5	4.4	4.4	mmol/L	(3.6-6.0)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Lipids HDL(s),  
Ca(s), FBC(e)  
Tests Pending : Iron(s), Vit D(s), TSH(s), HbA1c Diag(e)  
Sample Pending :

GRASSO, JENNIFER  
 28 MINNESOTA RD, HAMLYN TERRACE. 2259  
**Phone:** 0400233289  
**Birthdate:** 19/12/1938 **Sex:** F **Medicare Number:** 2159200309  
**Your Reference:** 13C2E83D1D **Lab Reference:** 892541629-C-HDL  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR AGERICO MICLAT **Referred by:** DR AGERICO MICLAT

**Name of Test:** Lipids HDL(s)  
**Requested:** 22/01/2025 **Collected:** 25/01/2025 **Reported:** 25/01/2025  
 19:29

**Clinical notes:** health check

Clinical Notes : health check

Date	01/02/23	08/11/23	21/06/24	25/01/25		
Time F-Fast	0841 F	1039 F	0814 F	0841 F		
Lab ID	885733195	836812696	851730975	892541629	Units	Reference
Status	Fasting	Fasting	Fasting	Fasting		
Cholesterol	5.3	5.4	4.4	4.5	mmol/L	(<5.5)
Triglycerides	1.9	1.5	1.6	1.6	mmol/L	(<2.0)
HDL Chol.	1.3	1.4	1.1	1.3	mmol/L	(>1.2)
LDL Chol.	H 3.1	H 3.3	2.6	2.5	mmol/L	(<3.0)
Non-HDL Chol.	H 4.0	H 4.0	3.3	3.2	mmol/L	(<4.0)

Comments on Collection 25/01/25 0841 F:

Please note that the above reference limits are decision limits.  
 A flag based on these limits is an indication to review the absolute cardiovascular risk for the patient. For assessment of absolute cardiovascular disease risk please see [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

The above decision limits are based on the European Atherosclerosis Society (EAS) and European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) Consensus Statement 2016 and the Australasian Association of Clinical Biochemistry and Laboratory Medicine (AACB) Lipid Reporting Guideline 2018.

Lipid treatment targets for patients at high risk of cardiovascular disease:

Total cholesterol	<4.0 mmol/L
Triglyceride	<2.0 mmol/L
HDL cholesterol	>1.0 mmol/L
LDL cholesterol	<2.5 mmol/L (<1.8 mmol/L for very high risk)
Non-HDL cholesterol	<3.3 mmol/L (<2.5 mmol/L for very high risk)

High risk - Primary prevention      Very high risk - Secondary prevention

Target values from the AACB Lipid Reporting Guideline 2018.

Please note that as there is a continuum of risk, benefits are obtained for any measured lipid components moving towards and beyond the various target levels.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Lipids HDL(s),

Ca(s), FBC(e)  
Tests Pending : Iron(s), Vit D(s), TSH(s), HbA1c Diag(e)  
Sample Pending :

GRASSO, JENNIFER  
28 MINNESOTA RD, HAMLYN TERRACE. 2259  
**Phone:** 0400233289  
**Birthdate:** 19/12/1938 **Sex:** F **Medicare Number:** 2159200309  
**Your Reference:** 13C2E83D1D **Lab Reference:** 892541629-C-Iron Studies  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR AGERICO MICLAT **Referred by:** DR AGERICO MICLAT

**Name of Test:** Iron Studies  
**Requested:** 22/01/2025 **Collected:** 25/01/2025 **Reported:** 25/01/2025  
20:30

**Clinical notes:** health check

Clinical Notes : health check

**IRON**

<b>Date</b>	01/02/23	08/11/23	21/06/24	<b>25/01/25</b>		
<b>Time F-Fast</b>	0841 F	1039 F	0814 F	<b>0841 F</b>		
<b>Lab ID</b>	885733195	836812696	851730975	<b>892541629</b>	Units	Reference
Iron	20.5	17.6	18.4	<b>13.1</b>	umol/L	(5.0-30.0)
Transferrin	2.4	2.3	2.3	<b>2.4</b>	g/L	(2.0-3.2)
TIBC (Calc)	54	52	52	<b>54</b>	umol/L	(46-70)
Saturation	38	34	35	<b>24</b>	%	(10-45)
Ferritin	87	99	151	<b>83</b>	ug/L	(30-300)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), TSH(s), FBC(e)

Tests Pending : Vit D(s), HbA1c Diag(e)  
Sample Pending :

GRASSO, JENNIFER  
28 MINNESOTA RD, HAMLYN TERRACE. 2259  
Phone: 0400233289  
Birthdate: 19/12/1938 Sex: F Medicare Number: 2159200309  
Your Reference: 13C2E83D1D Lab Reference: 892541629-E-Thyroid

Function

Laboratory: Douglass Hanly Moir Pathology  
Addressee: DR AGERICO MICLAT Referred by: DR AGERICO MICLAT

Name of Test: Thyroid Function  
Requested: 22/01/2025 Collected: 25/01/2025 Reported: 25/01/2025  
20:30

Clinical notes: health check

Clinical Notes : health check

TFT

Date	25/11/21	01/08/22	01/02/23	25/01/25	
Time F-Fast	1029 F	1424	0841 F	0841 F	
Lab ID	865751920	881082901	885733195	892541629	Units Reference
TSH	1.50	1.01	1.24	L 0.34	mIU/L
(0.40-5.00)					

Comments on Collection 25/01/25 0841 F:  
? History of (treated) thyroid disease.  
TSH is borderline. Suggest review in one month.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), TSH(s), FBC(e)  
Tests Pending : Vit D(s), HbA1c Diag(e)  
Sample Pending :

GRASSO, JENNIFER  
28 MINNESOTA RD, HAMILYN TERRACE. 2259  
Phone: 0400233289  
Birthdate: 19/12/1938 Sex: F Medicare Number: 2159200309  
Your Reference: 13C2E83D1D Lab Reference: 892541629-C-VITD  
Laboratory: Douglass Hanly Moir Pathology  
Addressee: DR AGERICO MICLAT Referred by: DR AGERICO MICLAT

Name of Test: Vit D(s)  
Requested: 22/01/2025 Collected: 25/01/2025 Reported: 25/01/2025  
21:14

Clinical notes: health check

Clinical Notes : health check

Date	25/11/21	01/02/23	08/11/23	25/01/25
Time F-Fast	1029 F	0841 F	1039 F	0841 F
Lab ID	865751920	885733195	836812696	892541629 Units Reference
Vitamin D	96	94	80	115 nmol/L (50-140)

Comments on Collection 25/01/25 0841 F:  
According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11):686-687, 2012, Vitamin D status is defined as:

Mild Deficiency	30	-	49 nmol/L
Moderate Deficiency	12.5	-	29 nmol/L
Severe Deficiency	<12.5 nmol/L		

Vitamin D adequacy can be defined as a level >49 nmol/L at the end of winter - the level may need to be 10 - 20 nmol/L higher at the end of summer, to allow for seasonal decrease.  
From 1st November 2014, Medicare rebates for vitamin D testing will apply to patients at risk of Vitamin D deficiency such as chronic lack of sun exposure.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), FBC(e)  
Tests Pending : HbA1c Diag(e)  
Sample Pending :

GRASSO, JENNIFER  
28 MINNESOTA RD, HAMLYN TERRACE. 2259  
**Phone:** 0400233289  
**Birthdate:** 19/12/1938 **Sex:** F **Medicare Number:** 2159200309  
**Your Reference:** 13C2E83D1D **Lab Reference:** 892541629-C-GHB  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR AGERICO MICLAT **Referred by:** DR AGERICO MICLAT

**Name of Test:** HbA1c  
**Requested:** 22/01/2025 **Collected:** 25/01/2025 **Reported:** 26/01/2025  
02:15

**Clinical notes:** health check

Clinical Notes : health check

**HbA1c**

<b>Date</b>	01/02/23	08/11/23	21/06/24	<b>25/01/25</b>		
<b>Time F-Fast</b>	0841 F	1039 F	0814 F	0841 F		
<b>Lab ID</b>	885733195	836812696	851730975	<b>892541629</b>	Units	Reference
HbA1c (IFCC)	36	36	37	<b>37</b>	mmol/mol	(20-38)
HbA1c (NGSP)	5.4	5.4	5.5	<b>5.5</b>	%	(4.0-5.6)

Comments on Collection 25/01/25 0841 F:  
HbA1c less than 48 mmol/mol (6.5%) does not exclude a diagnosis of diabetes mellitus based upon elevated glucose results. The existing diagnostic criteria for fasting and random glucose levels and for oral glucose tolerance testing remain valid, and are the diagnostic tests of choice in the presence of conditions that interfere with HbA1c measurement. Conditions which may affect the measured HbA1c value include any of the haemolytic anaemias, anaemia of chronic disease, severe liver disease, vitamin B12 and/or folate deficiency, the haemoglobinopathies and regular phlebotomy performed for medical indications or for blood donation. It also should be noted that further investigation is required for any inexplicably low HbA1c level or significant discrepancy between HbA1c and glucose results.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :  
Sample Pending :

<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-C-C924	GRASSO	JENNIFER
<b>Provider:</b>	Douglass Hanly Moir Pathology		
<b>Reference Details</b>		<b>Collection Details</b>	
Medicare:	2159200309	2	Collected: 25/01/2025 8:41:00 AM
Veterans:			Copy to: DR JAMES ROGERS
Pension:	205 052 749A		Referred by: DR AGERICO MICLAT

**Investigation Result: GRASSO, Jennifer**

Page 1 of 1

Glucose

Glucose Fasting 4.4 mmol/L 3.6-6.0

Glucose

NATA Accreditation No 2178

Glucose

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

Glucose

Tests Pending :

Glucose

Sample Pending :

Clinical Notes : health check

**GLUCOSE**

Date	01/02/23	08/11/23	21/06/24	25/01/25
Time F-Fast	0841 F	1039 F	0814 F	0841 F
Lab ID	885733195	836812696	851730975	892541629 Units Reference

F Gluc Plasma 4.6 4.5 4.4 4.4 mmol/L (3.6-6.0)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :

Demographic Details			
Practice:	Mrs	GRASSO	Jennifer
Lab:	892541629-C-C141	GRASSO	JENNIFER
Provider:	Douglass Hanly Moir Pathology		
Reference Details		Collection Details	
Medicare:	2159200309	2	Collected: 25/01/2025 8:41:00 AM
Veterans:			Copy to: DR JAMES ROGERS
Pension:	205 052 749A		Referred by: DR AGERICO MICLAT

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### Biochemistry

Sodium	142 mmol/L	135-145	
Potassium	4.2 mmol/L	3.5-5.5	
Chloride	107 mmol/L	95-110	
Bicarbonate	27 mmol/L	20-32	
Urea	5.3 mmol/L	3.5-10.0	
Creatinine	60 umol/L	45-95	
Total Bilirubin	16 umol/L	3-15	H
Alk Phos	69 U/L	30-115	
ALT	31 U/L	5-30	H
AST	38 U/L	10-35	H
Gamma GT	24 U/L	5-35	
LDH	239 U/L	120-250	
Albumin	44 g/L	34-45	
Globulin	24 g/L	23-39	
Total Protein	68 g/L	60-81	
Cholesterol	4.5 mmol/L	<5.5	
Triglycerides	1.6 mmol/L	<2.0	
Calcium	2.36 mmol/L	2.15-2.55	
Corrected Calcium	2.34 mmol/L	2.15-2.55	
eGFR	79 mL/min/1.73m <sup>2</sup>	>59	
Status	Fasting		

#### Routine Biochemistry

Comment: Routine Biochemistry  
eGFR (mL/min/1.73m<sup>2</sup>) calculated by CKD-EPI formula - see [www.kidney.org.au](http://www.kidney.org.au)

#### Routine Biochemistry

NATA Accreditation No 2178

#### Routine Biochemistry

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### Routine Biochemistry

Tests Pending :

#### Routine Biochemistry

Sample Pending :

Clinical Notes : health check

#### BIOCHEMISTRY

Date	01/02/23	08/11/23	21/06/24	<b>25/01/25</b>
Time F-Fast	0841 F	1039 F	0814 F	<b>0841 F</b>
Lab ID	885733195	836812696	851730975	<b>892541629</b> Units

Status	Fasting	Fasting	Fasting	<b>Fasting</b>		
Sodium	139	138	140	<b>142</b>	mmol/L	(135-145)
Potassium	4.2	4.4	4.5	<b>4.2</b>	mmol/L	(3.5-5.5)
Chloride	103	104	107	<b>107</b>	mmol/L	(95-110)
Bicarbonate	28	25	24	<b>27</b>	mmol/L	(20-32)
Urea	6.0	5.1	6.0	<b>5.3</b>	mmol/L	(3.5-10.0)
Creatinine	60	60	65	<b>60</b>	umol/L	(45-95)
eGFR	80	80	72	<b>79</b>	mL/min/1.73m <sup>2</sup> (>59)	
Calcium				<b>2.36</b>	mmol/L	(2.15-2.55)
Corr Calcium				<b>2.34</b>	mmol/L	(2.15-2.55)
Bili.Total	15	H 19	H 20	<b>H 16</b>	umol/L	(3-15)
ALP	62	69	61	<b>69</b>	U/L	(30-115)
GGT	22	20	23	<b>24</b>	U/L	(5-35)
LD	205	248	248	<b>239</b>	U/L	(120-250)
AST	29	34	29	<b>H 38</b>	U/L	(10-35)
ALT	23	20	19	<b>H 31</b>	U/L	(5-30)
Total Protein	70	68	67	<b>68</b>	g/L	(60-81)
Albumin	45	43	44	<b>44</b>	g/L	(34-45)
Globulin	25	25	23	<b>24</b>	g/L	(23-39)
Cholesterol	5.3	5.4	4.4	<b>4.5</b>	mmol/L	(<5.5)
Triglycerides	1.9	1.5	1.6	<b>1.6</b>	mmol/L	(<2.0)

Comments on Collection 25/01/25 0841 F:

eGFR (mL/min/1.73m<sup>2</sup>) calculated by CKD-EPI formula - see [www.kidney.org.au](http://www.kidney.org.au)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :

<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-H-H902	GRASSO	JENNIFER
<b>Provider:</b> Douglass Hanly Moir Pathology			
<b>Reference Details</b>		<b>Collection Details</b>	
<b>Medicare:</b>	2159200309	2	<b>Collected:</b> 25/01/2025 8:41:00 AM
<b>Veterans:</b>			<b>Copy to:</b> DR JAMES ROGERS
<b>Pension:</b>	205 052 749A		<b>Referred by:</b> DR AGERICO MICLAT

**Investigation Result: GRASSO, Jennifer**

Page 1 of 2

**Haematology**

Haemoglobin	131 g/L	110-160
Red cell count	4.3 x10*12/L	3.6-5.5
Haematocrit	0.39	0.30-0.46
MCH	30.3 pg	27.0-32.0
MCHC	335 g/L	310-360
MCV	91 fL	80-100
White cell count	6.7 x10*9/L	4.0-11.0
Platelets	183 x10*9/L	150-450
Neutrophils	2.84 x10*9/L	2.0-7.5
Lymphocytes	3.27 x10*9/L	1.0-4.0
Monocytes	0.41 x10*9/L	0.0-1.0
Basophils	0.07 x10*9/L	0.0-0.3
Eosinophils	0.10 x10*9/L	0.0-0.5
RDW	13.1	10.0-15.0
NRBC	<1.0 /100 WBC	<1

HAEMATOLOGY

Comment: HAEMATOLOGY

Full blood count is within reference limits

HAEMATOLOGY

NATA Accreditation No 2178

HAEMATOLOGY

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

HAEMATOLOGY

Tests Pending :

HAEMATOLOGY

Sample Pending :

Clinical Notes : health check

**HAEMATOLOGY**

Date	01/02/23	08/11/23	21/06/24	25/01/25
Time F-Fast	0841 F	1039 F	0814 F	0841 F
Lab ID	885733195	836812696	851730975	892541629 Units Reference

<b>Haemoglobin</b>	133	130	129	<b>131</b>	g/L	(110-160)
RCC	4.7	4.3	4.3	<b>4.3</b>	x10 <sup>12</sup> /L	(3.6-5.5)
Haematocrit	0.42	0.40	0.39	<b>0.39</b>		(0.30-0.46)
MCV	91	94	91	<b>91</b>	fL	(80-100)
MCH	28.6	30.4	30.1	<b>30.3</b>	pg	(27.0-32.0)
MCHC	316	323	331	<b>335</b>	g/L	(310-360)
RDW	13.0	12.6	13.3	<b>13.1</b>		(10.0-15.0)
<b>WCC</b>	8.0	8.0	8.4	<b>6.7</b>	x10 <sup>9</sup> /L	(4.0-11.0)
Neutrophils	3.22	4.00	3.80	<b>2.84</b>	x10 <sup>9</sup> /L	(2.0-7.5)
Lymphocytes	4.04	3.22	3.68	<b>3.27</b>	x10 <sup>9</sup> /L	(1.0-4.0)
Monocytes	0.58	0.60	0.61	<b>0.41</b>	x10 <sup>9</sup> /L	(0.0-1.0)
Eosinophils	0.09	0.12	0.18	<b>0.10</b>	x10 <sup>9</sup> /L	(0.0-0.5)
Basophils	0.09	0.08	0.09	<b>0.07</b>	x10 <sup>9</sup> /L	(0.0-0.3)
NRBC	<1.0	<1.0	<1.0	<b>&lt;1.0</b>	/100 WBC	(<1)
<b>Platelets</b>	205	179	233	<b>183</b>	x10 <sup>9</sup> /L	(150-450)

Comments on Collection 25/01/25 0841 F:  
Full blood count is within reference limits

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :

<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-C-E777	GRASSO	JENNIFER
<b>Provider:</b> Douglass Hanly Moir Pathology			
<b>Reference Details</b>		<b>Collection Details</b>	
Medicare:	2159200309	2	Collected: 25/01/2025 8:41:00 AM
Veterans:			Copy to: DR JAMES ROGERS
Pension:	205 052 749A		Referred by: DR AGERICO MICLAT

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### HbA1c

HbA1c (NGSP)	5.5 %	4.0-5.6
HbA1c (IFCC)	37 mmol/mol	20-38

#### HbA1c

Comment: HbA1c

HbA1c less than 48 mmol/mol (6.5%) does not exclude a diagnosis of diabetes mellitus based upon elevated glucose results. The existing diagnostic criteria for fasting and random glucose levels and for oral glucose tolerance testing remain valid, and are the diagnostic tests of choice in the presence of conditions that interfere with HbA1c measurement.

Conditions which may affect the measured HbA1c value include any of the haemolytic anaemias, anaemia of chronic disease, severe liver disease, vitamin B12 and/or folate deficiency, the haemoglobinopathies and regular phlebotomy performed for medical indications or for blood donation.

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

#### HbA1c

NATA Accreditation No 2178

#### HbA1c

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### HbA1c

Tests Pending :

#### HbA1c

Sample Pending :

Clinical Notes : health check

#### HbA1c

Date	01/02/23	08/11/23	21/06/24	25/01/25			
Time F-Fast	0841 F	1039 F	0814 F	0841 F			
Lab ID	885733195	836812696	851730975	892541629	Units	Reference	
HbA1c (IFCC)	36	36	37	37	mmol/mol	(20-38)	
HbA1c (NGSP)	5.4	5.4	5.5	5.5	%	(4.0-5.6)	

Comments on Collection 25/01/25 0841 F:

HbA1c less than 48 mmol/mol (6.5%) does not exclude a diagnosis of diabetes mellitus based upon elevated glucose results. The existing diagnostic

criteria for fasting and random glucose levels and for oral glucose tolerance testing remain valid, and are the diagnostic tests of choice in the presence of conditions that interfere with HbA1c measurement. Conditions which may affect the measured HbA1c value include any of the haemolytic anaemias, anaemia of chronic disease, severe liver disease, vitamin B12 and/or folate deficiency, the haemoglobinopathies and regular phlebotomy performed for medical indications or for blood donation. It also should be noted that further investigation is required for any inexplicably low HbA1c level or significant discrepancy between HbA1c and glucose results.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :

<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-C-C151	GRASSO	JENNIFER
<b>Provider:</b>	Douglass Hanly Moir Pathology		
<b>Reference Details</b>		<b>Collection Details</b>	
Medicare:	2159200309	2	Collected: 25/01/2025 8:41:00 AM
Veterans:			Copy to: DR JAMES ROGERS
Pension:	205 052 749A		Referred by: DR AGERICO MICLAT

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### Iron Studies

Iron	13.1 umol/L	5.0-30.0
TIBC (Calculated)	54 umol/L	46-70
Saturation	24 %	10-45
Transferrin	2.4 g/L	2.0-3.2
Ferritin	83 ug/L	30-300

#### Iron Studies

NATA Accreditation No 2178

#### Iron Studies

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### Iron Studies

Tests Pending :

#### Iron Studies

Sample Pending :

Clinical Notes : health check

#### IRON

Date	01/02/23	08/11/23	21/06/24	25/01/25		
Time F-Fast	0841 F	1039 F	0814 F	0841 F		
Lab ID	885733195	836812696	851730975	892541629	Units	Reference
Iron	20.5	17.6	18.4	13.1	umol/L	(5.0-30.0)
Transferrin	2.4	2.3	2.3	2.4	g/L	(2.0-3.2)
TIBC (Calc)	54	52	52	54	umol/L	(46-70)
Saturation	38	34	35	24	%	(10-45)
Ferritin	87	99	151	83	ug/L	(30-300)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :



<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-C-C205	GRASSO	19/12/1938 Female
<b>Provider:</b> Douglass Hanly Moir Pathology			
<b>Reference Details</b>		<b>Collection Details</b>	
<b>Medicare:</b> 2159200309	2	<b>Collected:</b> 25/01/2025 8:41:00 AM	
<b>Veterans:</b>		<b>Copy to:</b> DR JAMES ROGERS	
<b>Pension:</b> 205 052 749A		<b>Referred by:</b> DR AGERICO MICLAT	

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### Lipids HDL(s)

Cholesterol	4.5 mmol/L	<5.5
HDL Cholesterol	1.3 mmol/L	>1.2
LDL Cholesterol	2.5 mmol/L	<3.0
Triglycerides	1.6 mmol/L	<2.0
Status	Fasting	
Non-HDL Cholesterol	3.2 mmol/L	<4.0

#### LIPIDS & HDL

Please note that the above reference limits are decision limits. A flag based on these limits is an indication to review the absolute cardiovascular risk for the patient. For assessment of absolute cardiovascular disease risk please see [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

The above decision limits are based on the European Atherosclerosis Society (EAS) and European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) Consensus Statement 2016 and the Australasian Association of Clinical Biochemistry and Laboratory Medicine (AACB) Lipid Reporting Guideline 2018.

Lipid treatment targets for patients at high risk of cardiovascular disease:

Total cholesterol	<4.0 mmol/L
Triglyceride	<2.0 mmol/L
HDL cholesterol	>1.0 mmol/L
LDL cholesterol	<2.5 mmol/L (<1.8 mmol/L for very high risk)
Non-HDL cholesterol	<3.3 mmol/L (<2.5 mmol/L for very high risk)

High risk - Primary prevention      Very high risk - Secondary prevention

Target values from the AACB Lipid Reporting Guideline 2018.

Please note that as there is a continuum of risk, benefits are obtained for any measured lipid components moving towards and beyond the various target levels.

#### LIPIDS & HDL

NATA Accreditation No 2178

#### LIPIDS & HDL

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### LIPIDS & HDL

Tests Pending :

#### LIPIDS & HDL

Sample Pending :

Clinical Notes : health check

<b>Date</b>	01/02/23	08/11/23	21/06/24	<b>25/01/25</b>
<b>Time F-Fast</b>	0841 F	1039 F	0814 F	<b>0841 F</b>
<b>Lab ID</b>	885733195	836812696	851730975	<b>892541629</b> Units      Reference

Status	Fasting	Fasting	Fasting	<b>Fasting</b>		
Cholesterol	5.3	5.4	4.4	<b>4.5</b>	mmol/L	(<5.5)
Triglycerides	1.9	1.5	1.6	<b>1.6</b>	mmol/L	(<2.0)
HDL Chol.	1.3	1.4	L 1.1	<b>1.3</b>	mmol/L	(>1.2)
LDL Chol.	H 3.1	H 3.3	2.6	<b>2.5</b>	mmol/L	(<3.0)
Non-HDL Chol.	H 4.0	H 4.0	3.3	<b>3.2</b>	mmol/L	(<4.0)

Comments on Collection 25/01/25 0841 F:

Please note that the above reference limits are decision limits.  
A flag based on these limits is an indication to review the absolute cardiovascular risk for the patient. For assessment of absolute cardiovascular disease risk please see [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

The above decision limits are based on the European Atherosclerosis Society (EAS) and European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) Consensus Statement 2016 and the Australasian Association of Clinical Biochemistry and Laboratory Medicine (AACB) Lipid Reporting Guideline 2018.

Lipid treatment targets for patients at high risk of cardiovascular disease:

Total cholesterol	<4.0 mmol/L
Triglyceride	<2.0 mmol/L
HDL cholesterol	>1.0 mmol/L
LDL cholesterol	<2.5 mmol/L (<1.8 mmol/L for very high risk)
Non-HDL cholesterol	<3.3 mmol/L (<2.5 mmol/L for very high risk)

High risk - Primary prevention      Very high risk - Secondary prevention

Target values from the AACB Lipid Reporting Guideline 2018.

Please note that as there is a continuum of risk, benefits are obtained for any measured lipid components moving towards and beyond the various target levels.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :  
Sample Pending :

End of Report :

Demographic Details			
Practice:	Mrs	GRASSO	Jennifer
Lab:	892541629-E-E031	GRASSO	19/12/1938 Female
Provider: Douglass Hanly Moir Pathology			

Reference Details		Collection Details	
Medicare:	2159200309	Collected:	25/01/2025 8:41:00 AM
Veterans:	2	Copy to:	DR JAMES ROGERS
Pension:	205 052 749A	Referred by:	DR AGERICO MICLAT

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### Thyroid Function

TSH	0.34 mIU/L	0.40-5.00	L
-----	------------	-----------	---

#### Thyroid Function

Comment: Thyroid Function  
 ? History of (treated) thyroid disease.  
 TSH is borderline. Suggest review in one month.

#### Thyroid Function

NATA Accreditation No 2178

#### Thyroid Function

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### Thyroid Function

Tests Pending :

#### Thyroid Function

Sample Pending :

Clinical Notes : health check

#### TFT

Date	25/11/21	01/08/22	01/02/23	25/01/25
Time F-Fast	1029 F	1424	0841 F	0841 F
Lab ID	865751920	881082901	885733195	892541629 Units Reference

TSH	1.50	1.01	1.24	L 0.34 mIU/L	(0.40-5.00)
-----	------	------	------	--------------	-------------

Comments on Collection 25/01/25 0841 F:

? History of (treated) thyroid disease.  
 TSH is borderline. Suggest review in one month.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
 Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :  
 Sample Pending :

End of Report :

<b>Demographic Details</b>			
<b>Practice:</b>	Mrs	GRASSO	Jennifer
<b>Lab:</b>	892541629-C-C513	GRASSO	JENNIFER
<b>Provider:</b>	Douglass Hanly Moir Pathology		
<b>Reference Details</b>		<b>Collection Details</b>	
Medicare:	2159200309	2	Collected: 25/01/2025 8:41:00 AM
Veterans:			Copy to: DR JAMES ROGERS
Pension:	205 052 749A		Referred by: DR AGERICO MICLAT

### Investigation Result: GRASSO, Jennifer

Page 1 of 2

#### Vit D(s)

Vitamin D	115 nmol/L	50-140
-----------	------------	--------

#### VITAMIN D-25 OH

According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11):686-687, 2012, Vitamin D status is defined as:

Mild Deficiency	30	-	49 nmol/L
Moderate Deficiency	12.5	-	29 nmol/L
Severe Deficiency	<12.5	nmol/L	

Vitamin D adequacy can be defined as a level >49 nmol/L at the end of winter - the level may need to be 10 - 20 nmol/L higher at the end of summer, to allow for seasonal decrease.

From 1st November 2014, Medicare rebates for vitamin D testing will apply to patients at risk of Vitamin D deficiency such as chronic lack of sun exposure.

#### VITAMIN D-25 OH

NATA Accreditation No 2178

#### VITAMIN D-25 OH

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s), Lipids HDL(s), Ca(s), Vit D(s), TS H(s), HbA1c Diag(e), FBC(e)

#### VITAMIN D-25 OH

Tests Pending :

#### VITAMIN D-25 OH

Sample Pending :

Clinical Notes : health check

Date	25/11/21	01/02/23	08/11/23	25/01/25
Time F-Fast	1029 F	0841 F	1039 F	0841 F
Lab ID	865751920	885733195	836812696	892541629 Units Reference

Vitamin D	96	94	80	115 nmol/L (50-140)
-----------	----	----	----	---------------------

Comments on Collection 25/01/25 0841 F:

According to the Position Statement 'Vitamin D and health in adults in Australia and New Zealand' MJA, 196(11):686-687, 2012, Vitamin D status is defined as:

Mild Deficiency	30	-	49 nmol/L
-----------------	----	---	-----------

Moderate Deficiency	12.5	-	29 nmol/L
Severe Deficiency	<12.5 nmol/L		

Vitamin D adequacy can be defined as a level >49 nmol/L at the end of winter - the level may need to be 10 - 20 nmol/L higher at the end of summer, to allow for seasonal decrease.

From 1st November 2014, Medicare rebates for vitamin D testing will apply to patients at risk of Vitamin D deficiency such as chronic lack of sun exposure.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Glu(p), Iron(s),  
Lipids HDL(s), Ca(s), Vit D(s), TSH(s), HbA1c Diag(e), FBC(e)

Tests Pending :

Sample Pending :

End of Report :