

Report to **DR S.**

Patient **LEE, MICHAEL**

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Phone
D.O.B. Age **59 Years** Sex **M**

Ref. by/copy to

Collect date **21/06/12** Lab ref **12-5370593**
Collect time **00:00** Your ref **455563191**
Printed **22/06/12**

Tests requested

Pending - CTD*,VITD*
Completed - TFT,CHEM,IRON,FBE,GLU,ESR,CRP

Clin notes

SERUM CHEMISTRY

Sodium	141	mmol/L	(135-145)
Potassium	4.4	mmol/L	(3.6-5.4)
Chloride	105	mmol/L	(97-110)
Bicarbonate	27	mmol/L	(21-30)
Anion Gap	13	mmol/L	(10-20)
Urea	6.9	mmol/L	(2.5-8.5)
Creatinine	65	umol/L	(40-120)
eGFR	> 90	mL/min/1.73m ²	
Urate	0.25	mmol/L	(0.18-0.42)
Bilirubin	5	umol/L	(< 20)
AST	28	U/L	(< 40)
ALT	27	U/L	(< 55)
GGT	20	U/L	(< 50)
Alkaline Phosphatase	48	U/L	(35-110)
Lactate Dehydrogenase (1)	357	U/L	(240-480)
Protein	71	g/L	(65-85)
Albumin	46	g/L	(38-50)
Globulin	25	g/L	(22-38)
Calcium	2.41	mmol/L	(2.13-2.63)
Corrected Calcium	2.35	mmol/L	(2.13-2.63)
Phosphate	1.38	mmol/L	(0.80-1.40)
Creatine Kinase	166	U/L	(< 210)

eGFR ≥ 90 mL/min/1.73m² usually indicates normal kidney function but does not exclude patients with early kidney damage (those with albuminuria, haematuria or abnormal kidney imaging).

SERUM/PLASMA GLUCOSE

Fasting status Random
Serum 4.5 mmol/L (3.4-7.7)

IRON STUDIES

Serum Iron 14 umol/L (10-30)
Transferrin 31 umol/L (27-53)
Transferrin Saturation 23 % (12-45)
Serum Ferritin 471* ug/L (20-400)

Normal transferrin saturation with a high ferritin may accompany an inflammatory process, liver disease, or an underlying chronic disorder. Please note change in ULN of serum ferritin as from 4/10/2008.

THYROID PROFILE

TSH 1.5 mIU/L (0.5-4.5)
Result(s) consistent with euthyroidism.

SURGERY USE

Normal
No Action/Plan
Patient Notified
Make Appoint.
Further Tests
Notes Required
Speak with Dr.
On Correct Treatment