Preliminary Episode Report

George Laboratory
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Practice No:0774383

Report to: **DALING JAN-MARTEN**

Referred by: **MEDICLINIC GEORGE EMERGENCY**
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Requisition No: **723447030**
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Patient: *(**File No:** 88718)*
MR JAN-MARTEN DALING
Patient ID No: 8305145088089
Age:Sex:DoB: 41y: M: 1983-05-14
Contact No: 0825578133
Patient Email: JMDALING@GMAIL.COM

Guarantor:
MR J DALING
Med Aid: DISCOVERY
Member No: 255751841
Contact No: 0825578133

Tests requested: Query - Copy dr; FULL BLOOD COUNT & PLT; ERYTHROCYTE SEDIMENTATION RATE; U/E + CREAT-S; C-REACTIVE PROTEIN; LIVER FUNCTION TESTS; LD-S; TROPONIN-I (QUANT); AMYLASE-S; LIPASE-S; CKD-EPI (GFR ESTIMATE); BHCG TUMOUR MARKER (ROCHE); ALPHA FETOPROTEIN; CEA; CA 19.9

Referral ICD10 code(s): Z76.9

Ch BIOCHEMISTRY

0321:BA02199H — **Final**

Test Name	Result	Flag	Reference Range
SAMPLE APPEARANCE			
LIPAEMIC	ABSENT		
ICTERUS	ABSENT		
HAEMOLYSIS	ABSENT		
ELECTROLYTES			
S-SODIUM	136		136-145 mmol/L
S-POTASSIUM	4.5		3.5-5.1 mmol/L
S-CHLORIDE	101		98-108 mmol/L
S-BICARBONATE	24.2		22.0-28.0 mmol/L
ANION GAP	11		3-15 mmol/L
S-UREA	3.1		2.1-7.1 mmol/L
S-CREATININE (Enzymatic)	83		64-104 umol/L
CKD-EPI eGFR (ml/min/1.73m2)	100		>=90
Results for eGFR should be interpreted in conjunction with urine albumin creatinine ratio (ACR). eGFR may be unreliable in pregnancy, the elderly, extremes of muscle mass, acute renal impairment, severe dehydration. Ref: NKF K/DQI Guidelines/ KDIGO 2012 Guideline			
C-REACTIVE PROTEIN	73.7	H	0-5.0 mg/L
LIVER FUNCTIONS			
S-TOTAL PROTEIN	56	L	64-83 g/L
S-ALBUMIN	37		35-52 g/L
GLOBULIN	19	L	21-35 g/L
BILIRUBIN TOTAL-S	9		< 22 umol/L
S-CONJ. BILIRUBIN	4		< 9 umol/L
UNCONJ. BILIRUBIN	5		< 19 umol/L
S-ALK. PHOSPHATASE	89		53-128 IU/L
S-GAMMA GT	26		< 60 IU/L
S-ALT	21		< 41 IU/L

S-AST	19	< 41 IU/L
S-LD	216	125-220 IU/L
HIGH SENS TROPONIN-I(ABBOTT)	< 4	0 - 26 ng/L

Please Note: This is a high sensitivity Troponin I assay (Abbott). Troponin I assays are not standardized. The ABBOTT assay is therefore NOT comparable with the Stratus and Mini Vidas Assays.

Serial monitoring MUST be performed using the same assay. Reference range based on 99th percentile. Elevations > 130 ng/L have > 90% PPV for acute type 1 MI. Rising/falling cardiac troponin levels differentiate acute from chronic cardiac cardiomyocyte damage.

Other causes for raised troponin: cardiac failure, myocarditis, cardiomyopathy, cardiac contusion, arrhythmias, pulmonary embolism, aortic dissection, gastro-intestinal bleed, acute neurologic disease, sepsis, renal failure, extreme exertion, etc.
Analytical interference may cause false positive/negative results. Should the result not correlate with the clinical picture, please contact the laboratory.

S-AMYLASE	47	25 - 125 IU/L
S-LIPASE	18	8 - 78 IU/L

En ENDOCRINOLOGY

0321:EA00557H — **Final**

Test Name	Result	Flag	Reference Range
BHCG TUMOUR MARKER (ROCHE)	70482	H	< 2 IU/L

Result has been checked in dilution.
B-HCG is used as a tumour marker in testicular germ cell tumours. Raised levels are seen in about 35% of non-seminomatous tumours and in less than 20% of seminomatous tumours.

ALPHA FETOPROTEIN (ABBOTT)	< 2.0		0.9 - 8.8 ug/L
CEA (ABBOTT)	< 2		< 5 ug/L

CEA should not be used for cancer screening purposes. 7% of smokers may have values up to 10 ug/L.

CA 19.9 (ROCHE)	39	H	< 35 U/mL

CA 19-9 should not be used for screening purposes, but is specifically indicated for the monitoring of patients with confirmed pancreatic cancer. Levels < 35 U/mL do not exclude the diagnosis of pancreatic cancer.

Ha HAEMATOLOGY

0321:HA01746H — **Final**

Test Name	Result	Flag	Reference Range
RED CELLS			
Red cell count	3.74	L	4.5 - 5.9 x10E12/L
Haemoglobin	11.2	L	12.5 - 16.5 g/dL
Haematocrit	0.35	L	0.40 - 0.50 L/L
MCV	93		81 - 95 fl
MCH	30		28 - 35 pg
MCHC	32		32 - 36 g/dL
RDW	12.7		10 - 15 %
WHITE CELLS			
White cell count	7.0		4.0 - 11.0 x10E9/L

Neutrophils %	79.8		%
Lymphocytes %	12.9		%
Monocytes %	6.3		%
Eosinophils %	0.4		%
Basophils %	0.3		%
Imm Granulocytes %	0.3		<0.9 %
Neutrophils ABS	5.57		2.00 - 7.50 x10E9/L
Lymphocytes ABS	0.90	L	1.00 - 4.00 x10E9/L
Monocytes ABS	0.44		0.00 - 0.80 x10E9/L
Eosinophils ABS	0.03		0.00 - 0.40 x10E9/L
Basophils ABS	0.02		0.00 - 0.10 x10E9/L
Imm Granulocyte ABS	0.02		<0.07 x10E9/L
PLATELETS			
Platelet count	198		140 - 420 x10E9/L
FULL BLOOD COUNT COMMENT (SUPPLIED IF RELEVANT)			
-	.		

0321:HM00092H	**Final**

Test Name	**Result**	**Flag**	**Reference Range**
ESR (Measured)	36	H	2 - 28 mm/hr

This result was obtained with an ESR instrument that is not based on the standard Westergren methodology.
The sensitivity and specificity of this alternate method for various disease states may be different from the standard Westergren method.

The interpretation of laboratory test results requires the clinical evaluation to be known and contextualised. Please contact your medical practitioner for any questions related to these results. Your doctor would know whether further consultation with one of our specialist pathologists is necessary.

L=Low ***L**=Critically Low H=High ***H**=Critically High #=Delta Checked