

Final Episode Report

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Practice No:0774383

Report to:
DALING JAN-MARTEN

Referred by: DR GARTH DAVIDS
Copies to: CONSTANTIABERG MEDICLINIC (R)

Requisition No: 664004133
Collection Date: 2025-07-26 06:52
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Patient: (File No: 66604)
MR JAN-MARTEN DALING
Patient ID No: 8305145088089
Age:Sex:DoB: 42y: 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: U/E + CREAT-S; URATE-S; CALCIUM; PHOSPHATE-S; LIVER FUNCTION TESTS; CKD-EPI (GFR ESTIMATE)

Referral ICD10 C37
code(s):

Ch	Biochemistry
0726:BA01236H	
Final	

Test Name	Result	Flag	Reference Range
SAMPLE APPEARANCE			
LIPAEMIC	ABSENT		
ICTERUS	ABSENT		
HAEMOLYSIS	ABSENT		
ELECTROLYTES			
S-SODIUM	134	L	136-145 mmol/L
S-POTASSIUM	4.5		3.5-5.1 mmol/L
S-CHLORIDE	100		98-108 mmol/L
S-BICARBONATE	22.0		22.0-28.0 mmol/L
ANION GAP	12		3-15 mmol/L
S-UREA	5.0		2.1-7.1 mmol/L
S-CREATININE (Enzymatic)	78		64-104 umol/L
S-URATE	0.27		0.21 - 0.42 mmol/L
S-CALCIUM (total)	2.06	L	2.15-2.50 mmol/L
CALCIUM (adjusted)	2.22		2.15-2.50 mmol/L
Please note: A new locally derived formula for albumin-adjusted calcium has been implemented as of 06 May 2025. Ionised calcium remains the gold standard for the assessment of calcium status.			
S-PHOSPHATE	1.40		0.78-1.42 mmol/L
LIVER FUNCTIONS			
S-TOTAL PROTEIN	51	L	64-83 g/L
S-ALBUMIN	35		35-52 g/L
GLOBULIN	16	L	21-35 g/L
A PROTEIN ELECTROPHORESIS may be of diagnostic help to ascertain the cause of the abnormal globulin. Please phone your local laboratory if required.			
BILIRUBIN TOTAL-S	8	#	< 22 umol/L
*** Delta : 6 - Jul 23 2025 6:40AM			
S-CONJ. BILIRUBIN	3		< 9 umol/L
UNCONJ. BILIRUBIN	5		< 19 umol/L
S-ALK. PHOSPHATASE	99		53-128 IU/L

S-GAMMA GT	47	#	< 60 IU/L
*** Delta : 33 - Jul 23 2025 6:40AM			
S-ALT	14	#	< 41 IU/L
*** Delta : 8 - Jul 23 2025 6:40AM			
S-AST	18	#	< 41 IU/L
*** Delta : 13 - Jul 23 2025 6:40AM			
CKD-EPI eGFR (ml/min/1.73m2)	106		>=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			

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