Preliminary Episode Report

Christiaan Barnard Memorial Hospital
Room 1619, 16th Floor
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Tel: 021 424 5102

Practice No:0774383

Report to:
DALING JAN-MARTEN

Referred by: **DR J C H LAPORTA**
Copies to: DR G B DAVIDS

Requisition No: **654380537**
Collection Date: 20-08-2025 UNK
Received Date: 2025-08-20 12:33
Generated On: 2025-08-21 19:08

Patient:
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

Clinical Data: COLLECTION TIME NOT SUPPLIED OR UNCLEAR.

Tests requested: FULL BLOOD COUNT & PLT; U/E + CREAT-S; C-REACTIVE PROTEIN; LIVER FUNCTION TESTS; ZINC PLASMA; CKD-EPI (GFR ESTIMATE); VITAMIN D3 (25 OH); BHCG TUMOUR MARKER (ROCHE); PRE-ALBUMIN; INTERLEUKIN 6

Referral ICD10 code(s): C37

Ch Biochemistry

0820:BA04615U — **Final**

Test Name	Result	Flag	Reference Range
SAMPLE APPEARANCE			
LIPAEMIC	ABSENT		
ICTERUS	ABSENT		
HAEMOLYSIS	ABSENT		
ELECTROLYTES			
S-SODIUM	139		136-145 mmol/L
S-POTASSIUM	4.6		3.5-5.1 mmol/L
S-CHLORIDE	107		98-108 mmol/L
S-BICARBONATE	22.9		22.0-28.0 mmol/L
*** Delta : 28.0 - Aug 11 2025 9:35AM			
ANION GAP	9	#	3-15 mmol/L
*** Delta : 5 - Aug 11 2025 9:35AM			
S-UREA	4.7	#	2.1-7.1 mmol/L
*** Delta : 3.1 - Aug 11 2025 9:35AM			
S-CREATININE (Enzymatic)	67		64-104 umol/L
C-REACTIVE PROTEIN	6.5	# H	0-5.0 mg/L
*** Delta : 45.2 - Aug 7 2025 9:30AM			
LIVER FUNCTIONS			
S-TOTAL PROTEIN	56	L	64-83 g/L
S-ALBUMIN	38		35-52 g/L
GLOBULIN	18	L	21-35 g/L
S-TOTAL BILIRUBIN	5		< 22 umol/L
S-CONJ. BILIRUBIN	2	#	< 9 umol/L
*** Delta : 3 - Jul 26 2025 6:52AM			
UNCONJ. BILIRUBIN	3		< 19 umol/L
S-ALK. PHOSPHATASE	89		53-128 IU/L
S-GAMMA GT	44		< 60 IU/L
S-ALT	18		< 41 IU/L
*** Delta : 14 - Jul 26 2025 6:52AM			

S-AST	14	#	< 41 IU/L
*** Delta : 18 - Jul 26 2025 6:52AM			
CKD-EPI eGFR (ml/min/1.73m2)	113		>=90
Equation based on serum creatinine. Not valid in acute kidney injury or rapidly changing renal function. A value <60 mL/min/1.73 m2 may suggest CKD if persistent >=3 months. Consider combined cystatin C/creatinine-based eGFR if accuracy is uncertain (e.g. elderly, low muscle mass, pregnancy). Ref: KDIGO 2024 Chronic Kidney Disease Guideline			
PRE-ALBUMIN	320	#	180-450 mg/L
*** Delta : 169 - Jul 21 2025 10:11AM			

Prealbumin Comment:
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Synonyms: Transthyretin; TBPA

Indication:For monitoring nutritional status(t1/2 = 1-2d);
Rises in 4-8d of successful treatment.
Negative acute phase protein; synthesized in the liver.

Decreased levels:Protein-calorie malnutrition; inflammation
malignancy; liver cirrhosis;Zn-deficiency;
cystic fibrosis; hereditary amyloidosis.

Increased levels: Renal insufficiency; Hodgkins's disease;
Steroids; acute alcohol intoxication;
NSAIDs.

En Endocrinology

0820:EA02342U — **Preliminary**

Test Name	Result	Flag	Reference Range
VITAMIN D (25 OH) (ABBOTT)	40		ng/mL

Interpretation of 25-OH Vit D level [ng/ml]:
Deficiency: < 12
Partial deficiency: 12 - 19
Optimal level: > 20
Toxicity: > 100
Ref: Munn et al. JCEM.2016;101(2):394

Ha Haematology

0820:HA03457U — **Final**

Test Name	Result	Flag	Reference Range
RED CELLS			
Red cell count	3.34	L	4.5 - 5.9 x10E12/L
Haemoglobin	10.1	L	12.5 - 16.5 g/dL
Haematocrit	0.31	L	0.40 - 0.50 L/L
MCV	93		81 - 95 fl
MCH	30		28 - 35 pg
MCHC	32		32 - 36 g/dL
RDW	14.9		10 - 15 %
WHITE CELLS			
White cell count	**0.9**	*L	4.0 - 11.0 x10E9/L
ABNORMAL HAEMATOLOGY RESULTS HAVE BEEN CHECKED.			
Neutrophils %	47.6		%
Lymphocytes %	33.0		%
Monocytes %	5.7		%
Basophils %	2.3		%

Imm Granulocytes %	11.4	H	<0.9 %
Neutrophils ABS	**0.43**	***L**	2.00 - 7.50 x10E9/L
Lymphocytes ABS	**0.30**	***L**	1.00 - 4.00 x10E9/L
Monocytes ABS	0.05		0.00 - 0.80 x10E9/L
Eosinophils ABS	0.00		0.00 - 0.40 x10E9/L
Basophils ABS	0.02		0.00 - 0.10 x10E9/L
Imm Granulocyte ABS	0.10	H	<0.07 x10E9/L
PLATELETS			
Platelet count	151		140 - 420 x10E9/L
BLOOD FILM MORPHOLOGY			
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Toxic granulation of neutrophils
Neutrophil vacuolisation present.
Smear reviewed by Technical Laboratory Professional.
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FULL BLOOD COUNT COMMENT (SUPPLIED IF RELEVANT)			
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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