

Result/Report origin: Organisation:7A1 - Department:
BSC

Full blood count (Authorised)

White blood cell (WBC) count $11.6 \times 10^9/L$ H 4.0-11.0

Haemoglobin (Hb) 192 g/L H 130-180

Platelet (PLT) count $293 \times 10^9/L$ 150-400

Red blood cell (RBC) count $5.83 \times 10^{12}/L$ 4.50-6.00

Haematocrit (Hct) 0.56 L/L H 0.40-0.52

Mean cell volume (MCV) 95 fL 80-100

Mean cell haemoglobin (MCH) 32.9 pg 27.0-33.0

Red cell distribution width (RDW) 13.1 % 11.0-14.8

Neutrophil count $5.7 \times 10^9/L$ 1.7-7.5

Lymphocyte count $4.6 \times 10^9/L$ H 1.0-4.5

Monocyte count $1.1 \times 10^9/L$ H 0.2-0.8

Eosinophil count $0.3 \times 10^9/L$ 0.0-0.4

Basophil count $0.0 \times 10^9/L$ 0.0-0.1

Note high Hb

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Electrolyte Profile (Authorised)

Sodium 140 mmol/L 133-146

Potassium 4.1 mmol/L 3.5-5.3

Creatinine 84 $\mu\text{mol}/L$ 58-110

Estimated GFR 77 ml/min/1.73m²

eGFR is an estimation and requires careful interpretation in certain clinical scenarios. For example, eGFR is affected by muscle mass and may underestimate renal impairment in patients who are underweight, particularly the elderly.

For further information on the limitations of eGFR, including pregnancy, diet and certain drugs, please refer to Lab Tests Online and Renal Association Guidelines.

Liver function test (Authorised)

Bilirubin 12 $\mu\text{mol}/L$ <21

Protein 77 g/L 60-80

Albumin 42 g/L 35-50

Globulin 35 g/L

Alkaline phosphatase 100 U/L 30-130

Alanine transaminase 44 U/L H <41

PSA (Authorised)

PSA 2.6 ug/L <5.0

PSA should be interpreted with caution in patients prescribed 5 alpha reductase inhibitors (eg. Finasteride or Dutasteride) which can reduce PSA concentrations by up to 50%.

Assayed by COBAS e602 immunoassay

(Electrochemiluminescence) Roche E-modular.

Testosterone (Authorised)

Testosterone 13.0 nmol/L 9.0-31.0

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