

BEACON HOSPITAL

Health report





NAME	MRS ALICE WALSH	PID	9016291
DATE OF BIRTH	13/12/1985	AGE	31
SEX	FEMALE	LABORATORY	GENERAL LAB
PHYSICIAN	DR. ANDREW WHITE	DATE OF VISIT	08/12/16

PRESENT MEDICAL HISTORY

Currently feels well	✓
No Aches or Pains	✓
Nil on systemic questioning	✓
Last medical check up 2010 - nil reported	✓

PAST MEDICAL / SURGICAL HISTORY

Nil chronic	✓
No previous hospital admission	✓
No previous surgery	✓

GYNAECOLOGICAL HISTORY

No relevant	✓
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VACCINATION HISTORY

Up to date	✓
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FAMILY HISTORY / RECORD

Father - High blood pressure

Mother - Stroke

Siblings - High Cholesterol

History of Cancer in family - Auntie has Breast Cancer

SOCIAL HISTORY

Works as a teacher

Non smoker

No alcohol

-Exercise - regular

Diet - No strict dietary restriction













CURRENT MEDICATION AND DURATION

No regular medication

HISTORY OF ALLERGIES

No allergies to food or medication



 WEIGHT 60 kg	 HEIGHT 163 cm	 BMI 20	 PULSE RATE 66
 SYSTOLIC B.P. 100	 DIASTOLIC B.P. 76	 BODY FAT N/A%	 VISCERAL FAT N/A
 VISION RIGHT EYE 20/20	 VISION LEFT EYE 20/20	 COLOUR VISION NORMAL	 BMR N/A



Your medical today reveals that you have **high cholesterol**. The rest of your examination did not reveal anything else of clinical significance. May I suggest that you:

Make your lifestyle changes with regards to your diet and exercise.

This will help optimize your weight, improve your cholesterol and also reduce your risk of developing chronic disease. Please take into consideration what we have discussed and refer to the leaflet that we have given you.

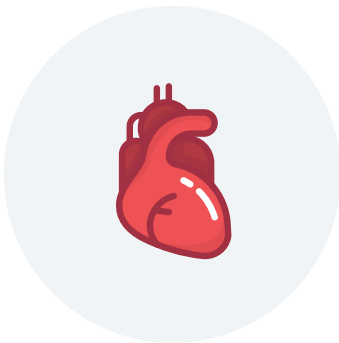
Please do not hesitate to contact us if you have any queries.

Dr. Andrew White



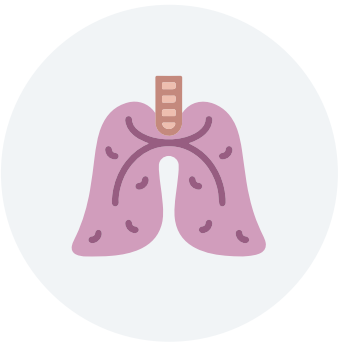
HEAD & NECK

- Looks comfortable. No distress. ✓
- Not clinically anaemic or jaundiced. ✓
- No lymphadenopathy. ✓
- Ear nose and throat appears normal. ✓



CARDIOVASCULAR SYSTEM

- Pulse 66 reg. BP 120/66. JVP not raised. ✓
- No heaves or thrills noted on palpation. ✓
- Heart sounds normal. No added sounds or murmurs. ✓
- No evidence of heart failure. ✓



RESPIRATORY SYSTEM

- Normal bilateral chest expansion. ✓
- RR 20 per minute. Good air entry bilaterally. ✓
- Vesicular breath sounds. No creps or wheeze. ✓
- Chest Clear. ✓



ADBOMEN

- Normal on inspection. ✓
- Soft, non tender with no rebound or guarding. ✓
- No masses or organomegaly. ✓
- Bowel sounds normal. ✓



BREAST EXAMINATION

Not done



MUSCULOSKELETAL SYSTEM

Normal power and movement in upper and lower limbs.

No gross sensory deficit.



PELVIC EXAMINATION (WHERE RELEVANT)

Not done.



Your Blood Group is A Rh (D) Positive

Blood group **A** has A antigens on the red blood cells with anti-B antibodies in the plasma

Red Blood Cells

Haemoglobin

Unit: g/L



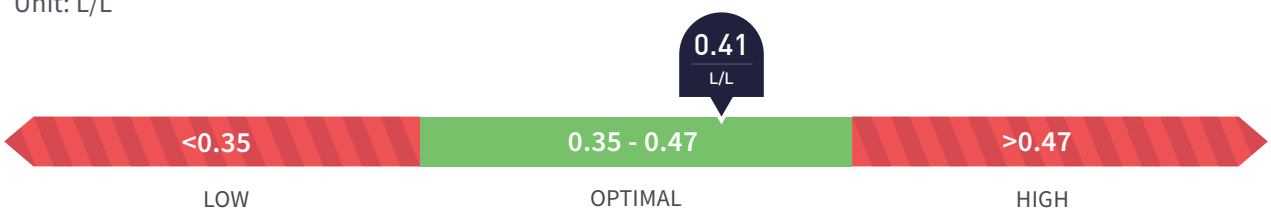
RBC

Unit: $\times 10^{12}/L$



PCV

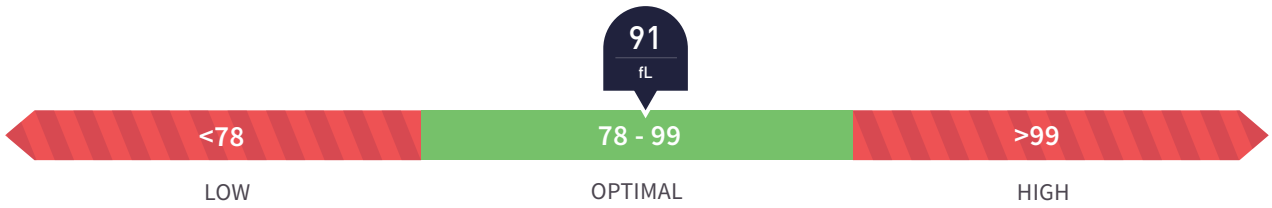
Unit: L/L





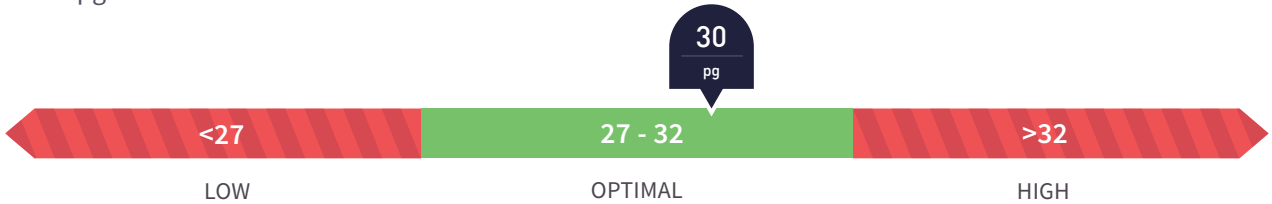
Mean Corpuscular Volume (MCV)

Unit: fL



Mean Corpuscular Hemoglobin (MCH)

Unit: pg



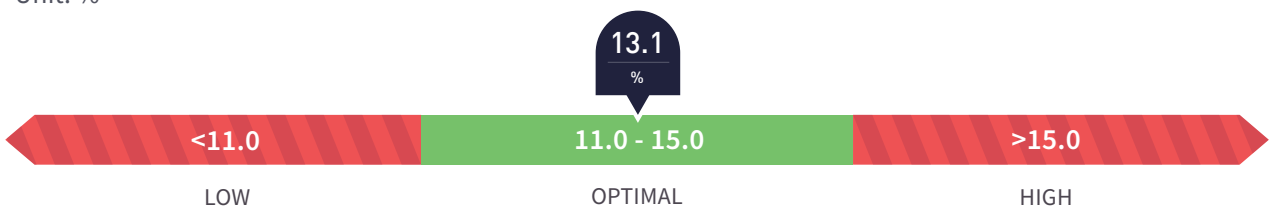
Mean Corpuscular Hemoglobin Concentration (MCHC)

Unit: g/L



Red Blood Cell Distribution Width (RDW)

Unit: %

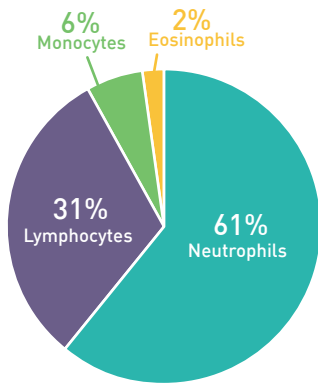
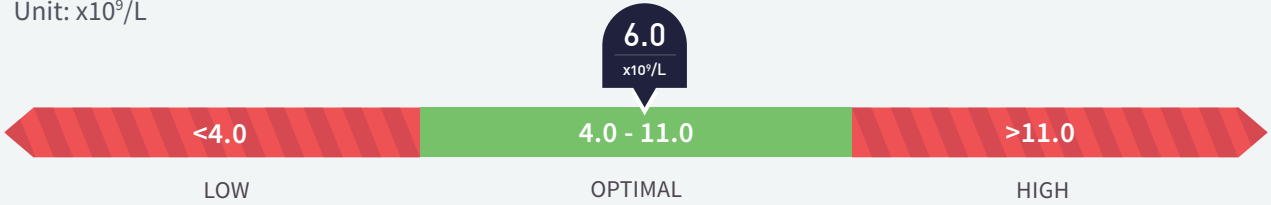




White Cell Count

White Cell Count

Unit: $\times 10^9/L$

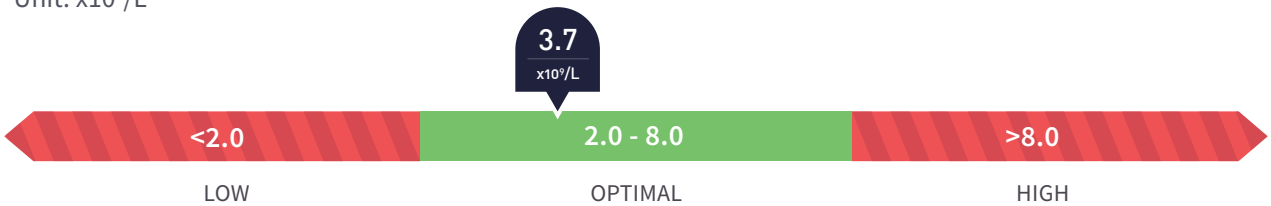


White cell count chart percentages

White blood cells (leukocytes) are the main cells involved in immune defence, and there are several types, including lymphocytes, monocytes, neutrophils, eosinophils, and basophils. The numbers of each cell type can vary in response to allergies, bacteria and viruses, as well as other conditions.

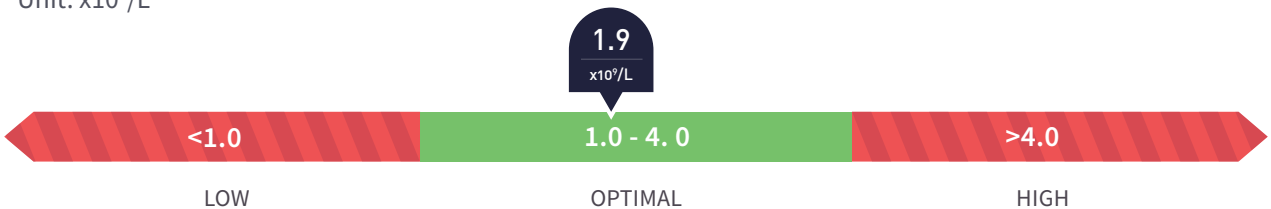
Neutrophils 61%

Unit: $\times 10^9/L$



Lymphocytes 31%

Unit: $\times 10^9/L$





Monocytes

6%

Unit: $\times 10^9/L$



Eosinophils

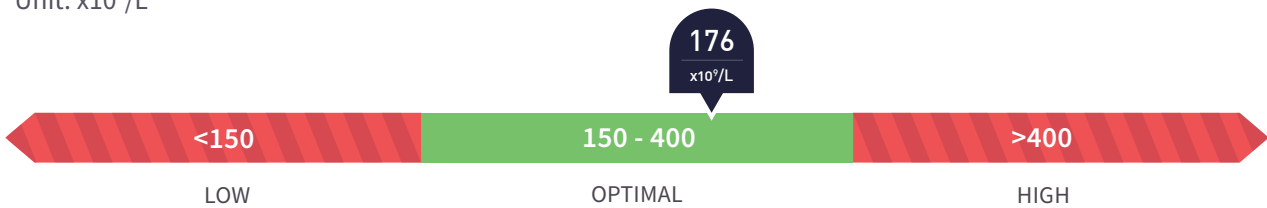
2%

Unit: $\times 10^9/L$



Platelets

Unit: $\times 10^9/L$



The haematology parameters are essentially normal.

Validated by [Muhamad Nazrin Sarafuddin](#) (Dip MLT Asia Metro.Univ.)



You are Diabetic with **Satisfactory control**

NGSP: **6.5%**

Result: **48 mmol/mol**

HbA1c

NGSP (%)	IFCC (mmol/mol)	Glucose Control Index
<6.1	<43	Non-diabetic range
6.1 - 6.4	43 - 46	Diabetic with good control
6.5 - 7.5	48 - 58	Diabetic with Satisfactory control
>7.5	>58	Diabetic with poor control

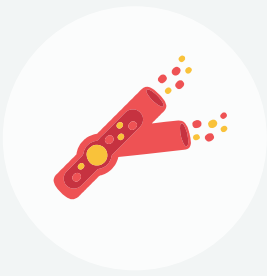
Effective 04/01/2011, glycated haemoglobin is analysed using Roche Integra platform
 Effective 07/06/2016, dual reporting of HbA1c results in NGSP and IFCC format.

! HIGH
Glucose
 Unit: mmol/L



Glucose result indicates fasting hyperglycaemia. Advice repeat fasting and 2 hour post-prandial glucose to confirm if indicated.

Specimen Collection Time : 09:50h



Lipids

Your results indicate that you have **moderate hypertriglyceridemia**

Lipids



HIGH

Total Cholesterol

Unit: mmol/L



HIGH

Triglyceride

Unit: mmol/L



HDL Cholesterol

Unit: mmol/L





LDL Cholesterol

Unit: mmol/L



Total Cholesterol / HDL ratio



Your Risk of developing Coronary Heart Disease within the next **10** years is: **5%**

Source: The Framingham Study for developing chronic heart disease.



A **5%** risk means that in a group of 20 people like you, **1** will have developed coronary heart disease in the next **10** years.



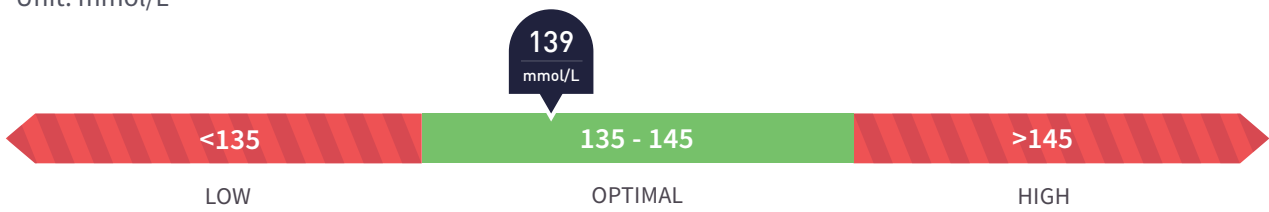
Electrolytes

Your **electrolytes** results are within the **normal range**

Electrolytes

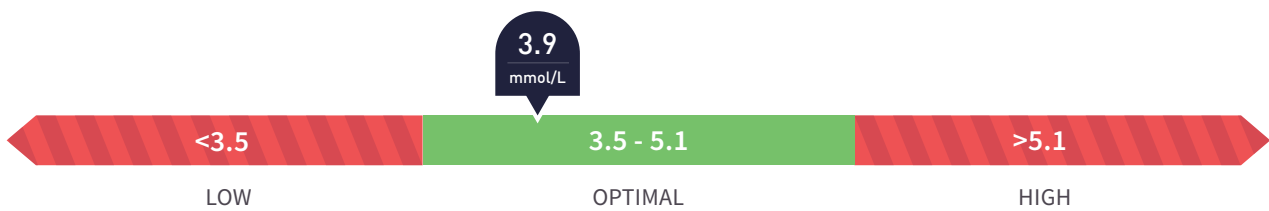
Sodium

Unit: mmol/L



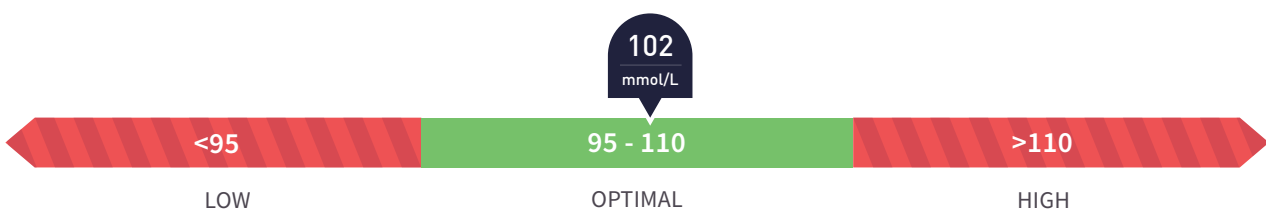
Potassium

Unit: mmol/L



Chloride

Unit: mmol/L

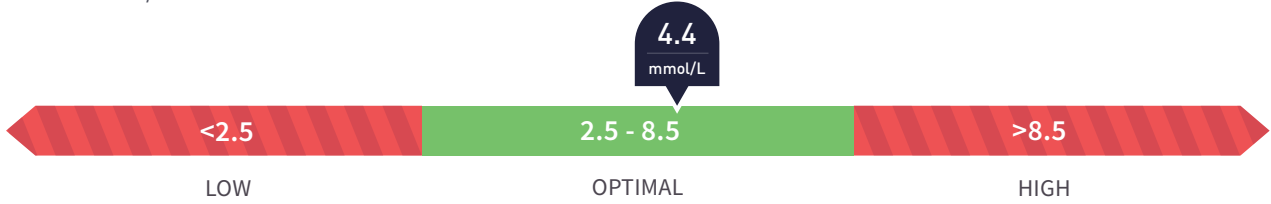




Renal Function Test (RFT)

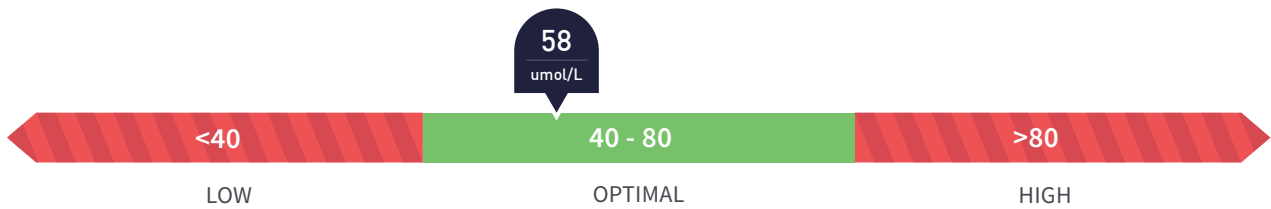
Urea

Unit: mmol/L



Creatinine

Unit: umol/L



eGFR

Unit: mL/min/1.73m²





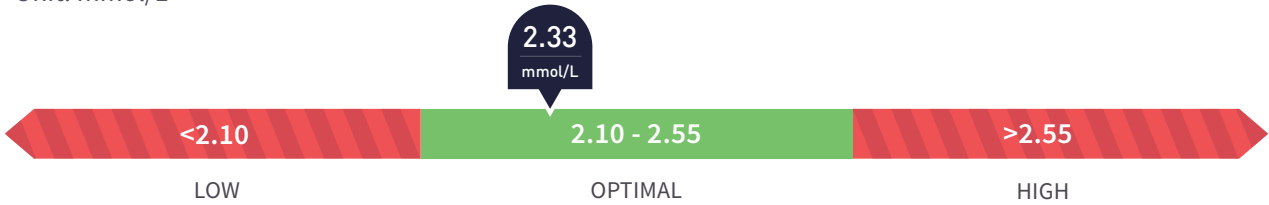
Uric Acid

Unit: mmol/L



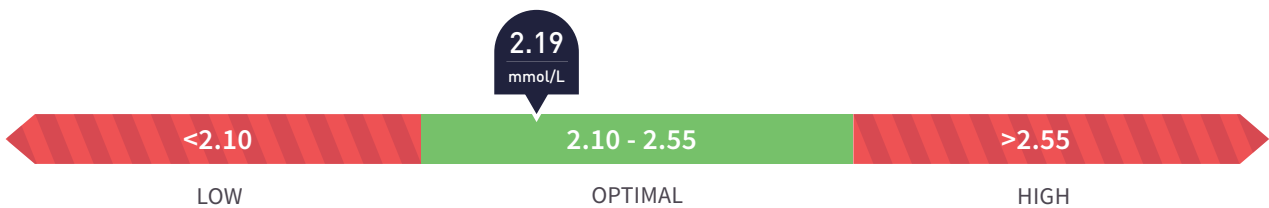
Calcium

Unit: mmol/L



Corrected Calcium

Unit: mmol/L



Phosphate

Unit: mmol/L





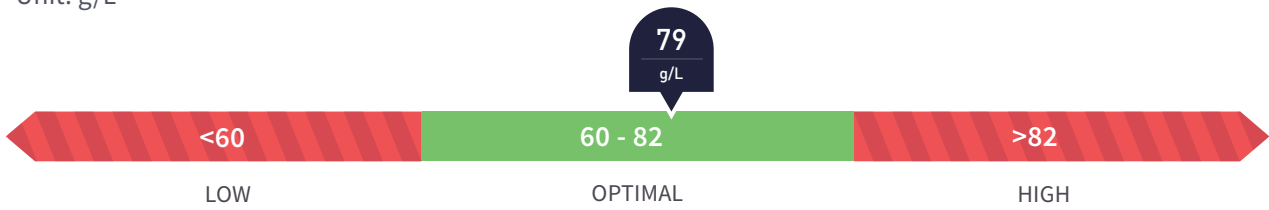
Liver function

Your **liver function** results are within the **normal range**

Liver Function Test (LFT)

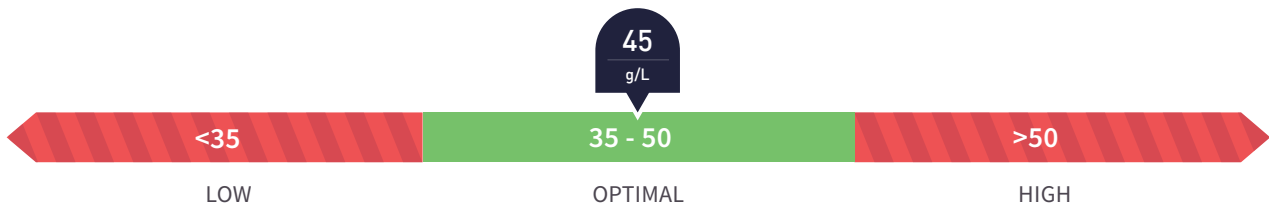
Total Protein

Unit: g/L



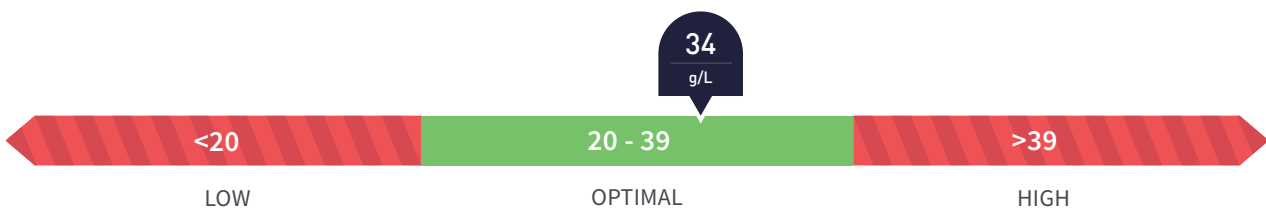
Albumin

Unit: g/L



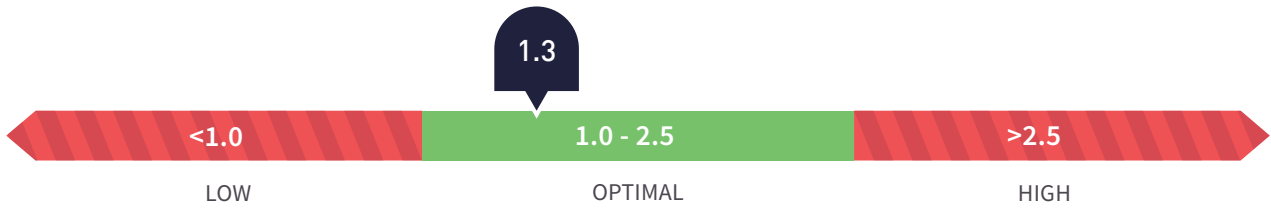
Globulin

Unit: g/L



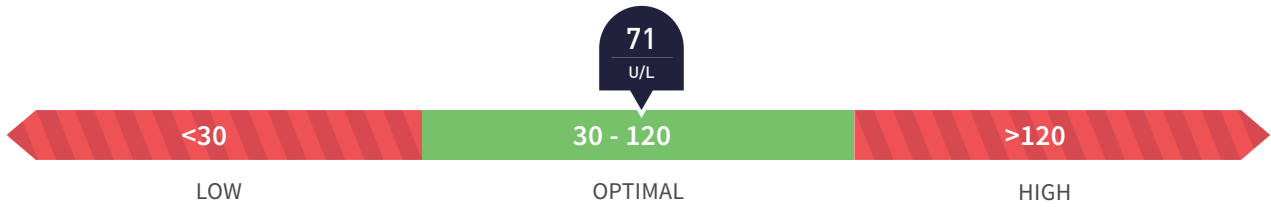


Albumin/Globulin ratio



Alkaline Phosphatase

Unit: U/L



Total Bilirubin

Unit: umol/L



GGT

Unit: U/L





AST

Unit: U/L



ALT

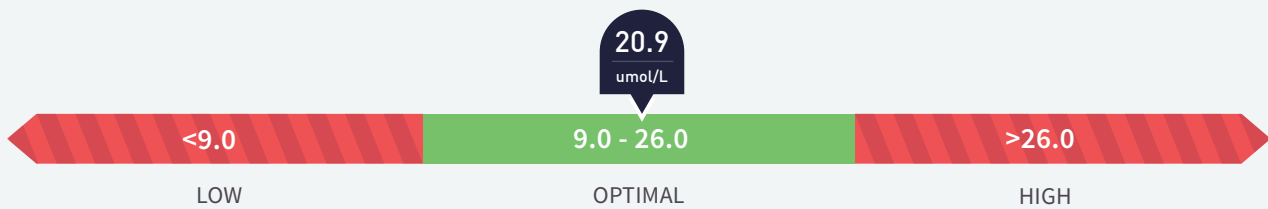
Unit: U/L



Iron Studies

Serum Iron

Unit: umol/L



Validated by [N.Mohanaraja B.](#) BioMedical Sc. (Hons) UM, Dip MLT (USM).



Rheumatoid Screen

Your **rheumatoid screen** results are within the **normal range**

Rheumatoid Screen

Rheumatoid Factor

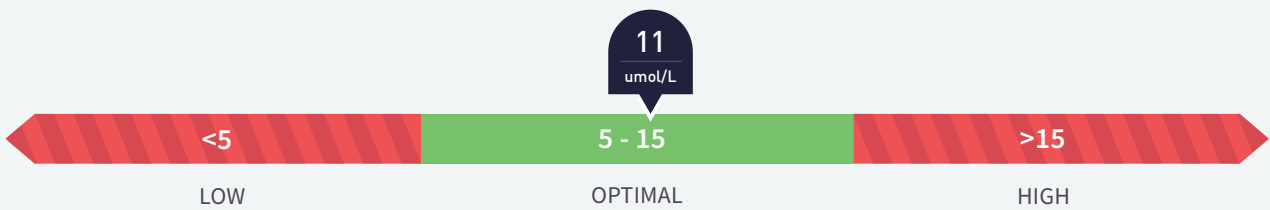
Unit: IU/ml



Homocysteine Studies

Serum Homocysteine

Unit: umol/L





Hepatitis

This is a screening test only. The presence of HBsAg may also indicate either acute or chronic Hepatitis B infection. To clarify status suggest liver function test., AFP and further serology tests (e.g. HBeAg, anti-HBc IgM, anti-HBc IgG).

Hepatitis

Hep .B surface antigen (HbsAg)	Hep .B surface antibody (HBsAb)
DETECTED	0 IU/L



Urine Feme

Your **urine feme** results are within the **normal range**

Chemistry

Protein	Nil
Glucose	Nil
S.G.	1.006
pH	6.5
Ketones	Nil
Blood	Nil

Leucocytes

Unit: $\times 10^6/L$





Erythrocytes

Unit: $\times 10^6/L$



Epithelial





Endocrinology

Your **endocrinology** results are within the **normal range**

Tumour Marker

Alpha-feto Protein

Unit: ug/L



Serum CA125

Unit: U/ml



Serum CA 15.3

Unit: U/ml





Serum CA 19.9

Unit: U/ml

Specimen: Serum

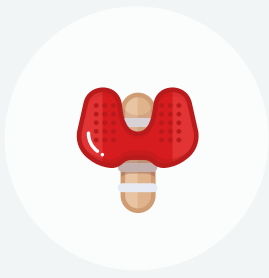


C.E.A

Unit: ug/L

Specimen: Serum





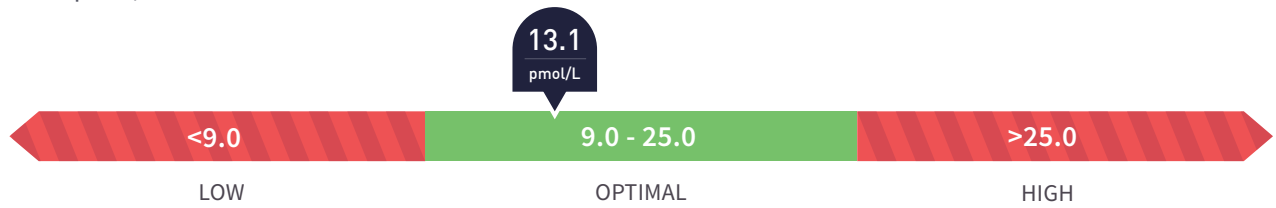
Thyroid Function Assays

Your **Thyroid Function** results are within the **normal range**

Thyroid Function Assays

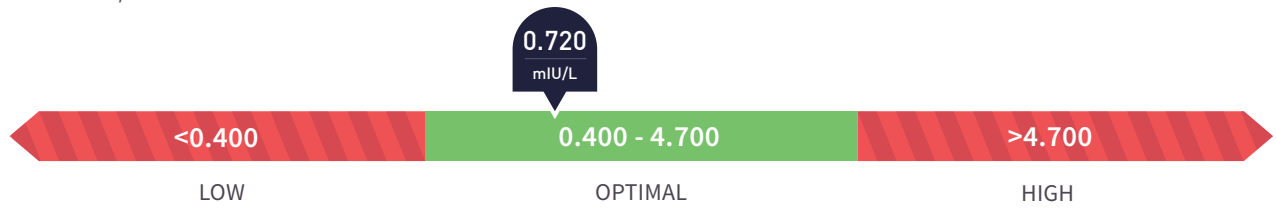
Free Thyroxine (FT4)

Unit: pmol/L



Triglyceride

Unit: mIU/L



Section Two

Food Allergies & Intolerances

Section Two

Food Allergies & Intolerances



Dairy & Egg

Milk allergy is far more common in children than in adults. 90% of milk allergic children lose the allergy by the age of three. It is extremely uncommon for adults to have milk allergy. Many adults, however, cannot tolerate milk because of an inborn deficiency in the ability to break down the milk sugar, lactose.

Food Type	Results (U/ml)	NORMAL	BORDERLINE	ELEVATED
		<23 U/ml	24-29 U/ml	>30 U/ml
Alpha-Lactalbumin	0	Green bar		
Beta-Lactoglobulin	1	Green bar		
Casein	39			Red bar
Egg White	79	Green bar		
Egg Yolk	26		Yellow bar	
Milk (Buffalo)	0	Green bar		
Milk (Cow)	105			Red bar
Milk (Goat)	36			Red bar
Milk (Sheep)	38			Red bar



Grains (Gluten-Containing)

Wheat allergy is most common in children; about two-thirds of them outgrow it at a relatively young age. Though many patients with wheat allergy can eat other grains, that's not true for everyone. Talk with your allergist about what you can safely eat and what you should avoid.

Food Type	Results (U/ml)	NORMAL	BORDERLINE	ELEVATED
		<23 U/ml	24-29 U/ml	>30 U/ml
Barley	43			
Couscous	25			
Durum Wheat	28			
Gliadin	53			
Malt	13			
Oat	18			
Rye	9			
Spelt	48			
Wheat	48			
Wheat Bran	27			



Elevated Foods

Elevated results indicate that the level of IgG antibody detected is equal or greater than 30 U/ml, and therefore a high reaction is detected. The foods listed below should be eliminated for a period from your diet. Please refer to the further information before removing or substituting foods.

Food Type	Results (U/ml)	ELEVATED
		>30 U/ml
Milk (Cow)	105	
Egg White	79	
Potato	61	
Gliadin	53	
Bean (Red Kidney)	52	
Spelt	48	
Wheat	48	
Hazelnut	47	
Barley	43	
Casein	39	



Borderline Foods

Borderline results indicate that the level of IgG antibody detected is between 24 and 29 U/ml, and therefore a moderate reaction is detected. The foods listed below should be reduced or rotated in your diet.

Food Type	Results (U/ml)	ELEVATED
		24-29 U/ml
Pike	29	<div style="width: 90%;"></div>
Durum Wheat	28	<div style="width: 80%;"></div>
Wheat Bran	27	<div style="width: 65%;"></div>
Egg Yolk	26	<div style="width: 45%;"></div>
Mussel	26	<div style="width: 45%;"></div>
Pistachio	26	<div style="width: 45%;"></div>
Cashew Nut	26	<div style="width: 45%;"></div>
Couscous	25	<div style="width: 25%;"></div>
Ginkgo	25	<div style="width: 25%;"></div>
Sea Bream (Red)	24	<div style="width: 10%;"></div>



Normal Foods

Normal results indicate that the level of IgG antibody detected is less than or equal to 23 U/ml, and therefore no signification reaction is detected. The foods listed below do not need to be restricted, unless you have previously experiences an adverse reaction.

Food Type	Results (U/ml)	ELEVATED
		<23 U/ml
Almond	22	
Celery	20	
Guava	20	
Bean (White Haricot)	19	
Cola Nut	19	
Crab	19	
Coconut	18	
Oat	18	
Soya Bean	18	
Tiger Nut	17	



Food Type	Results (U/ml)	ELEVATED
		<23 U/ml
Yeast (Baker's)	16	
Cabbage (Savoy/White)	15	
Bean (Broad)	14	
Orange	14	
Pomegranate	14	
Malt	13	
Peanut	13	
Radish	13	
Squash (Butternut)	13	
Broccoli	12	
Cherry	12	
Herring	12	
Mackerel	12	
Agar Agar	11	

Section Three

Imaging

Section Three

Imaging



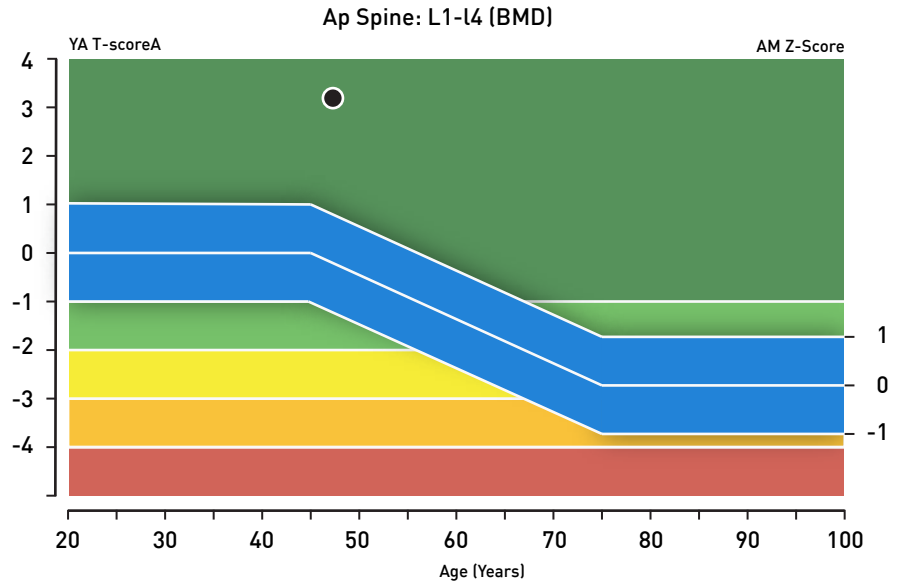
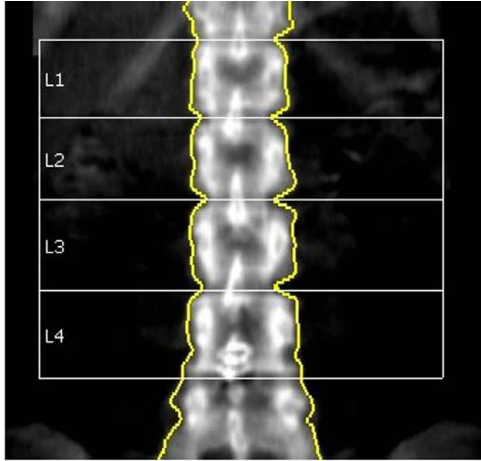
Anterior Posterior Spine Results

The T-score as compared to the WHO classification for Bone Mineral Density (BMD) indicates **Normal** of the Lumbar vertbrae.

MEASURED DATE: 13/12/1985

SCANNER TYPE: GE Lunar Prodigy Advance

PHYSICIAN DR. ANDREW WHITE



Region	BMD (g/cm ²)	Young Adult1 (T-score)	Age-Matched2 (Z-score)
L1	1.383 g/cm ²	2.8	3.0
L2	1.502 g/cm ²	3.2	3.4
L3	1.648 g/cm ²	4.3	4.4
L4	1.617 g/cm ²	4.0	4.2
L1-L4	1.544 g/cm ²	3.6	3.8

1- Asia (ages 20-40) AP Spine and Femur Reference Population
 2- Matched for Age, Weight (males/females 25-100g) and Ethnic

WHO Classification

Normal: T-score at or above -1.0 SD

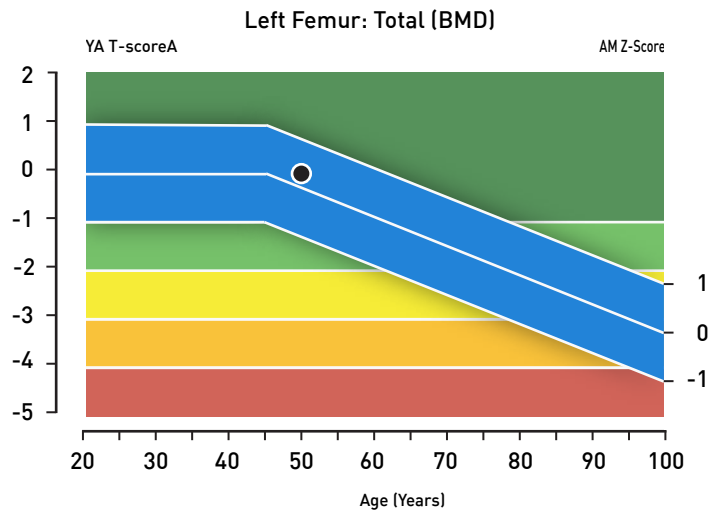
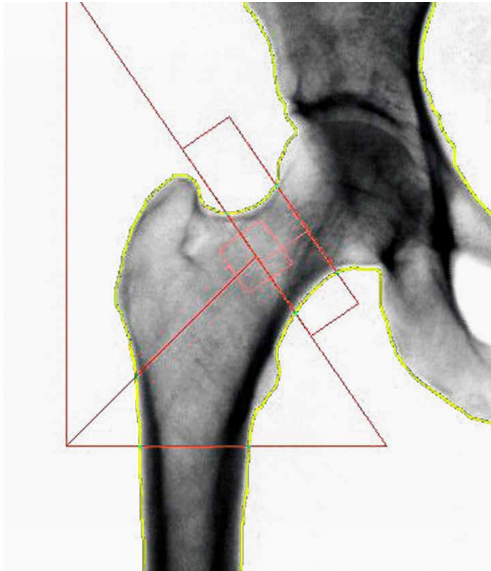
Osteopenia: T-score between -1.0 and -2.5 SD

Osteoporosis: T-score below -2.5 SD



Left Femur Results

The T-score as compared to the WHO classification for Bone Mineral Density (BMD) indicates **Normal** of the left femur.



Region (Left)	BMD (g/cm ²)	Young Adult1 (T-score)	Age-Matched2 (Z-score)
Neck	0.875 g/cm ²	-0.3	0.2
Wards	0.712 g/cm ²	-1.2	-0.5
Troch	0.617 g/cm ²	-1.3	-1.2
Shaft	1.224 g/cm ²	N/A	N/A
Total	0.940 g/cm ²	-0.1	0.2

1- Asia (ages 20-40) AP Spine and Femur Reference Population

2- Matched for Age, Weight (males/females 25-100g) and Ethnic

WHO Classification

Normal: T-score at or above -1.0 SD

Osteopenia: T-score between -1.0 and -2.5 SD

Osteoporosis: T-score below -2.5 SD



10-year Probability of Fracture¹

We have calculated the probability of a fracture to the left femur for the next 10 years.

Major Osteoporotic Fracture²

1.6%

 = 1 person

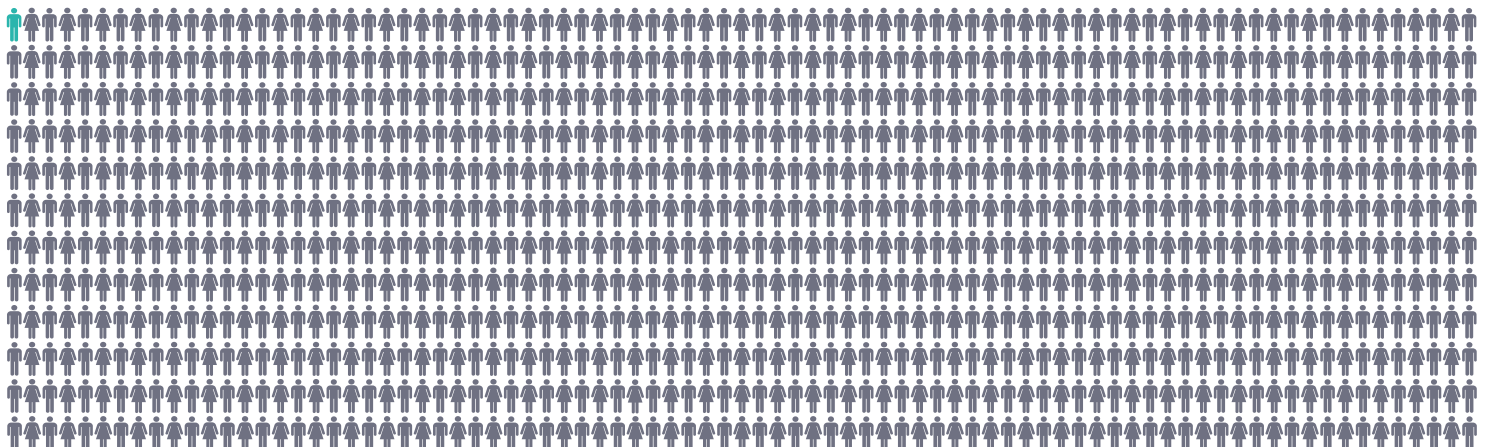
Your risk of a fracture to the spine, forearm, hip or shoulder in the next 10 years is **1.6%**. This means **1 in 63** people like you would experience a fracture within 10 years.



Hip Fracture²

0.1%

Your risk of a fracture to the hip in the next 10 years is **0.1%**. This means **1 in 1000** people like you would experience a fracture within 10 years.



Based on Femur (Left) Neck BMD

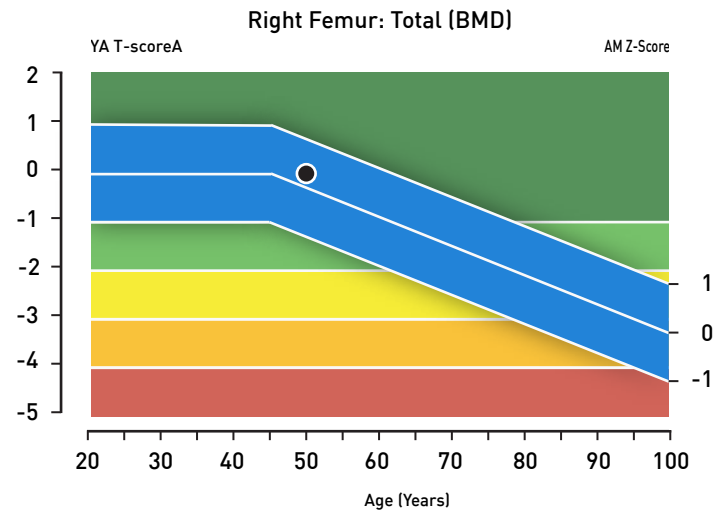
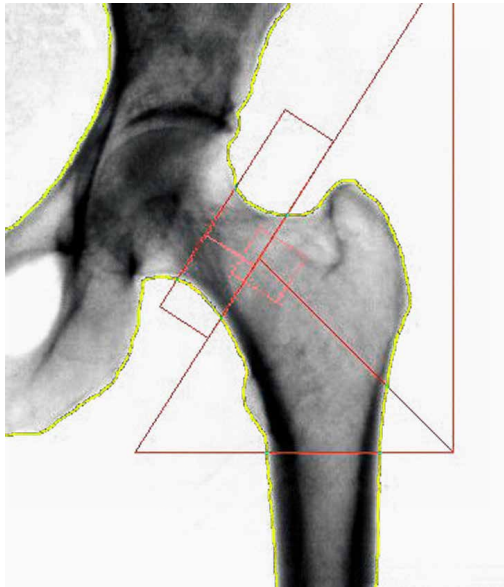
- 1- The 10-year probability of fracture may be lower than reported if the patient has received treatment
- 2- Major Osteoporotic Fracture: Clinical Spine, Forearm, Hip or Shoulder

*FRAX is a trademark of the University of Sheffield Medical School's Centre for Metabolic Bone Disease, a World Health Organization (WHO) Collaborating Centre



Right Femur Results

The T-score as compared to the WHO classification for Bone Mineral Density (BMD) indicates **Normal** of the right femur.



Region (Left)	BMD (g/cm ²)	Young Adult1 (T-score)	Age-Matched2 (Z-score)
Neck	0.875 g/cm ²	-0.3	0.2
Wards	0.712 g/cm ²	-1.2	-0.5
Troch	0.617 g/cm ²	-1.3	-1.2
Shaft	1.224 g/cm ²	N/A	N/A
Total	0.940 g/cm ²	-0.1	0.2

1- Asia (ages 20-40) AP Spine and Femur Reference Population

2- Matched for Age, Weight (males/females 25-100g) and Ethnic

WHO Classification

Normal: T-score at or above -1.0 SD

Osteopenia: T-score between -1.0 and -2.5 SD

Osteoporosis: T-score below -2.5 SD



10-year Probability of Fracture¹

We have calculated the probability of a fracture to the right femur for the next 10 years.

Major Osteoporotic Fracture²

1.6%

= 1 person

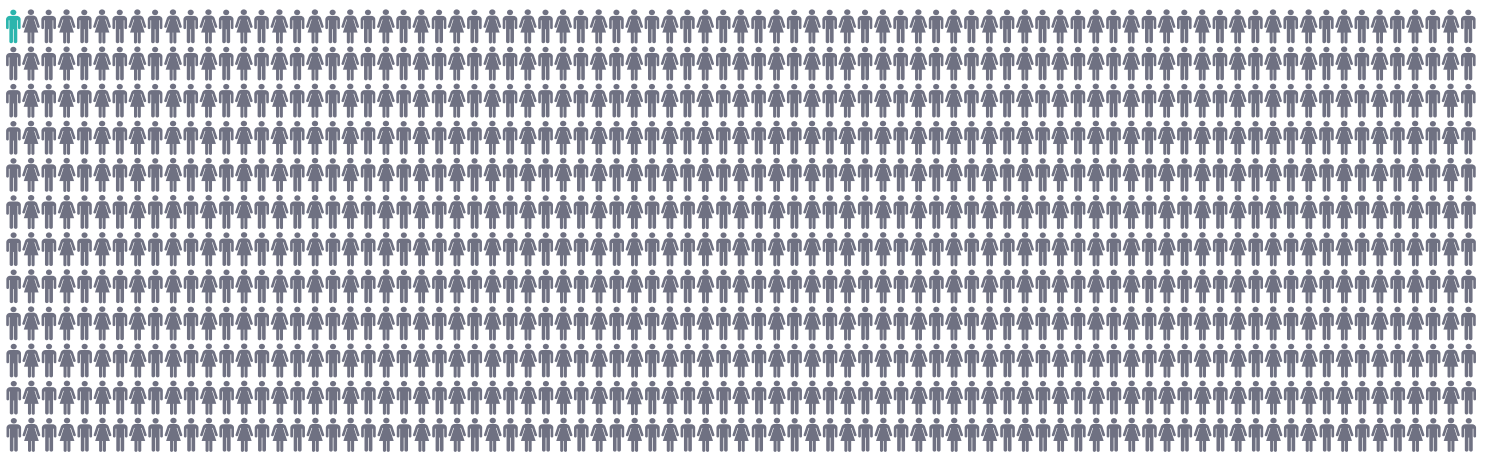
Your risk of a fracture to the spine, forearm, hip or shoulder in the next 10 years is **1.7%**. This means **1 in 59** people like you would experience a fracture within 10 years.



Hip Fracture²

0.1%

Your risk of a fracture to the hip in the next 10 years is **0.1%**. This means **1 in 1000** people like you would experience a fracture within 10 years.



Based on Femur (Left) Neck BMD

- 1- The 10-year probability of fracture may be lower than reported if the patient has received treatment
- 2- Major Osteoporotic Fracture: Clinical Spine, Forearm, Hip or Shoulder

*FRAX is a trademark of the University of Sheffield Medical School's Centre for Metabolic Bone Disease, a World Health Organization (WHO) Collaborating Centre



Vent rate 59 bpm PR interval 148 ms QRS duration 48 60 44

QT/QTc 410/405 ms P-R-T axes 82 ms

Sinus bradycardia | Otherwise normal ECG

