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# Erskineville DOCTORS

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Healthlink ID: erskinef

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27/08/2025

**Healthlink ID: ERSKINEF**

Dr Chi-Jen Hsu  
Centurion Healthcare  
32 Elizabeth Street  
Ashfield NSW 2131  
Phone: 02 9798 2322  
Fax: 02 9798 2355

Dear Chi-Jen

**Re: Michael Mullins**  
**12 Northwood Street**  
**Camperdown 2050**  
**DOB: 14/11/1959**  
**ph. mobile: 0400438099**  
**Medicare no. 31990344381**

Thank you for seeing this 65-year-old gentleman for assessment and management of his hypercholesterolaemia and cardiovascular risk stratification.

Mr Mullins has been found to have a persistently elevated total cholesterol of 7.5 mmol/L with raised LDL cholesterol, despite normal triglycerides. His dietary cholesterol appears well-controlled, and he follows a modified ketogenic diet. There is no known family history of hypercholesterolaemia.

A previous CT coronary calcium score was reassuringly normal. However, given his total cholesterol now exceeds 7.5 mmol/L, we are considering statin therapy and would appreciate your expert opinion on risk stratification and management.

I have ordered a lipoprotein test to investigate potential genetic components to his hyperlipidaemia, results of which will be available for your review.

I would greatly appreciate your assessment regarding:

1. Cardiovascular risk stratification
2. Interpretation of lipoprotein studies
3. Recommendations regarding statin therapy
4. Need for additional cardiac investigations

5. Ongoing management plan

Thank you for your assistance in managing this patient.

**Past Medical History**

**Active**

	Perianal condylomata with dysplasia	
	Cataract	
	Grover's disease	
01/01/1969	Seborrhoeic dermatitis	
09/07/2014	Mild Hypercholesterolaemia	Good HDL/TG ratio. 26/4/15 CT Cor Cal = 4
01/2022	Ain 1	
2023	Melanoma	
06/2025	Melanoma in situ	

**Inactive**

01/01/1963	Left Strabismus repair	
01/01/1965	Tonsillectomy	
01/01/2011	Left Exostoses	Surgically debrided by David Pohl
01/10/2011	Right Atticoantrostomy	Dr David Pohl. Clearance of choleseatoma
10/01/2014	Mild Hypercholesterolaemia	
13/10/2014	Colonoscopy	Warwick Selby, NAD
14/02/2015	Pneumonia, community acquired	RUL
26/04/2015	Ct coronary calcium score	4
05/12/2015	Cystoscopy	Dr Arthur Vasilaras. NAD.
15/12/2017	Faecal occult blood test negative	

**Medication List**

Boostrix Syringe	use p.r.n.
Cefalexin 500mg Capsule	1 Capsule Twice a day For 7 Days.
Gardasil 9 270mcg Suspension for injection	For IMI administration at 0, 2 and 6 months.
Tenofovir /Emtricitabine 300mg;200mg Tablet	1 Tablet Daily.

**Allergies:** Nil known.

Yours sincerely




Dr Michael Tran  
MBBS, BSc(Med) Hons, FRACGP  
448107BF

MULLINS, MICHAEL J  
**Birthdate:** 14/11/1959 **Sex:** M **Medicare Number:** 31990344371  
**Your Reference:** 4503154 **Lab Reference:** 4503154  
**Laboratory:** alfredig  
**Addressee:** DR MICHAEL TRAN **Referred by:** DR MICHAEL TRAN

**Name of Test:** CT CALCIUM SCORE  
**Requested:** 29/11/2023 **Collected:** 02/12/2023 **Reported:** 04/12/2023 09:59

## CT CALCIUM SCORE

 <b>I-MED Radiology Network</b> <small>Comprehensive care. Uncompromising quality.</small>	<b>Patient Name:</b> MULLINS, MICHAEL	<b>Address:</b> 12 NORTHWOOD STREET CAMPERDOWN NSW 2050
	<b>DOB:</b> 14/11/1959 <b>Gender:</b> M	<b>Phone:</b> <b>Medicare Number:</b>
<b>Lab:</b> Alfred Imaging	<b>Referred By:</b> DR MICHAEL TRAN	<b>Radiologist:</b> DR MCGRILLEN KY
<b>Lab Reference:</b> 4503154	<b>Date Performed:</b> 02/12/2023 07:56	<b>Date Reported:</b> 04/12/2023 09:59

[To view images, please click here](#)

This report is for: Dr M. Tran

Referred By:

Dr M. Tran

CT CALCIUM SCORE 02/12/2023 Reference: 4503154

CT CORONARY CALCIUM SCORE

CLINICAL HISTORY: Low carbohydrates high fat diet.

COMPARISON:26/6/15 which at the time the calcium score was 4, 40th centile for age and sex.

REPORT A coronary artery calcium score was performed using a standardised, low dose technique. The total dose is DLP 28.98mGy/cm.

Artery Score

Left Main Artery 0

Left Anterior Descending 2

Left Circumflex 0

Right Coronary Artery 0

Posterior Descending Artery 0

Diagonals 0

Other 0

TOTAL 2 (Volume -6 mm cubed)

The coronary artery calcium score was measured at 2, below the 25th centile for age and sex, previously 4 and 40th centile.

Calcium was previously measured in the left circumflex, none seen at that site today.

Further small fleck of calcification in the RCA, too small for

detection using this method.

**Other Findings:**

The heart is not enlarged. There is a trivial inferior pericardial effusion.

The visualised aorta is of normal calibre.

There is no oesophageal dilation.

Mild peribronchial thickening but no definite bronchiectasis. No pulmonary nodule or mass is seen in field of view.

Schmorls nodes associated with some adjacent sclerosis ?adjacent bone island, benign, stable from 2015.

**NOTES**

CAC = 0. Very low risk of death, 1% at 10 years

CAC = 1-100. Low risk, 10%

CAC = 101-400, and not >75th centile. Intermediate risk, 10-20%

CAC = 101-400 and is above >75th centile. Moderately high risk, 15-20%

CAC >400. High risk. >20%.

Reference: Heart, Lung and Circulation. Dec 2017, Volume 26, Issue 12, Pages 1239.1251.

Radiologist: Dr K. McGrillen

[To view images, please click here](#)

MULLINS, MICHAEL  
12 NORTHWOOD ST, CAMPERDOWN. 2050  
**Phone:** 0400438099  
**Birthdate:** 14/11/1959 **Sex:** M **Medicare Number:** 3199034437  
**Your Reference:** 8CFE190FC4 **Lab Reference:** 893166101-C-C924  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR MICHAEL TRAN **Referred by:** DR MICHAEL TRAN

**Name of Test:** Glucose  
**Requested:** 26/02/2025 **Collected:** 23/05/2025 **Reported:** 24/05/2025 02:13

**Clinical notes:** 65 year old male on PrEP Therapy

Clinical Notes : 65 year old male on PrEP Therapy

**GLUCOSE**

Date	12/11/20	20/05/21	18/11/21	23/05/25		
<b>Time F-Fast</b>	0759 F	0800 F	0817 F	<b>0810 F</b>		
<b>Lab ID</b>	846247344	861032060	862699413	<b>893166101</b>	Units	Reference
F Gluc Plasma	5.0	5.1	5.2	<b>4.7</b>	mmol/L	(3.6-6.0)

Comments on Collection 23/05/25 0810 F:  
Diabetes is unlikely if fasting glucose levels are less than 5.5 mmol/L but an OGTT could be indicated in the presence of risk factors such as metabolic syndrome or family history of type 2 diabetes.

NATA Accreditation No 2178

Tests Completed: Glu(p),RU-Malb,FBC(e)  
Tests Pending : LFT(s),C(s),UCreat(s),E(s),Phos(s),Ca(s),Mg(s),

Vit D(s),CTSW1,CTSW2,U-CTPCR,U-NGPCR,NGPCR,NGPCR2,  
HepC(s),HIV(s),HBsAg(s),HBsAb(s),\_HepB Serology,Syp(s)

Sample Pending :

MULLINS, MICHAEL  
12 NORTHWOOD ST, CAMPERDOWN. 2050  
Phone: 0400438099  
Birthdate: 14/11/1959 Sex: M Medicare Number: 3199034437  
Your Reference: 8CFE190FC4 Lab Reference: 893166101-C-C485  
Laboratory: Douglass Hanly Moir Pathology  
Addressee: DR MICHAEL TRAN Referred by: DR MICHAEL TRAN

Name of Test: RU-Malb  
Requested: 26/02/2025 Collected: 23/05/2025 Reported: 24/05/2025 02:13

Clinical notes: 65 year old male on PrEP Therapy

Clinical Notes : 65 year old male on PrEP Therapy

Date	28/08/24	19/11/24	19/02/25	23/05/25		
Time F-Fast	Unkn	0810 F	0805 F	0810 F		
Lab ID	853502470	854152041	893165465	893166101	Units	Reference
R U-Creatinine	8.5	8.9	10.5	11.1	mmol/L	
R U-Albumin	30.0	21.4	20.8	14.8	mg/L	
R U-Alb/Creat	H 3.5	2.4	2.0	1.3	mg/mmol	(<2.5)

NATA Accreditation No 2178

Tests Completed: Glu(p),RU-Malb,FBC(e)  
Tests Pending : LFT(s),C(s),UCreat(s),E(s),Phos(s),Ca(s),Mg(s),  
Vit D(s),CTSW1,CTSW2,U-CTPCR,U-NGPCR,NGPCR,NGPCR2,  
HepC(s),HIV(s),HBsAg(s),HBsAb(s),\_HepB Serology,Syp(s)  
Sample Pending :

MULLINS, MICHAEL  
12 NORTHWOOD STREET, CAMPERDOWN. 2050  
Phone: 0400438099  
Birthdate: 14/11/1959 Sex: M Medicare Number: 3199034438  
Your Reference: A957B0EE87 Lab Reference: 895535158-H-H902  
Laboratory: Douglass Hanly Moir Pathology  
Addressee: DR MICHAEL TRAN Referred by: DR MICHAEL TRAN

Name of Test: Haematology  
Requested: 28/05/2025 Collected: 25/08/2025 Reported: 25/08/2025 18:45

Clinical notes: 65 year old on PrEP therapy, previously elevated cholesterol .TELEHEALTH

Clinical Notes : 65 year old on PrEP therapy, previously  
elevated cholesterol .TELEHEALTH

#### HAEMATOLOGY

Date	21/08/24	19/02/25	23/05/25	25/08/25		
Time F-Fast	0808 F	0805 F	0810 F	0803 F		
Lab ID	851716096	893165465	893166101	895535158	Units	Reference
Haemoglobin	141	155	157	156	g/L	(130-180)
RCC	L 4.2	4.7	4.7	4.7	x10*12/L	(4.5-6.5)
Haematocrit	0.41	0.45	0.46	0.45		(0.39-0.54)
MCV	98	96	99	97	fL	(80-100)
MCH	H 33.5	H 33.3	H 33.5	H 33.5	pg	(27.0-32.0)
MCHC	342	348	340	345	g/L	(310-360)

RDW	13.3	14.2	13.4	<b>13.7</b>		(10.0-15.0)
<b>WCC</b>	<b>L 3.1</b>	<b>L 2.8</b>	<b>L 3.2</b>	<b>L 3.3</b>	x10 <sup>9</sup> /L	(4.0-11.0)
Neutrophils	<b>L 1.73</b>	<b>L 1.44</b>	<b>L 1.78</b>	<b>L 1.89</b>	x10 <sup>9</sup> /L	(2.0-7.5)
Lymphocytes	<b>L 0.95</b>	1.01	1.08	<b>1.01</b>	x10 <sup>9</sup> /L	(1.0-4.0)
Monocytes	0.34	0.30	0.28	<b>0.31</b>	x10 <sup>9</sup> /L	(0.0-1.0)
Eosinophils	0.07	0.06	0.06	<b>0.07</b>	x10 <sup>9</sup> /L	(0.0-0.5)
Basophils	0.03	0.03	0.02	<b>0.03</b>	x10 <sup>9</sup> /L	(0.0-0.3)
NRBC	<1.0	<1.0	<1.0	<b>&lt;1.0</b>	/100 WBC	(<1)
<b>Platelets</b>	163	171	174	<b>224</b>	x10 <sup>9</sup> /L	(150-450)

Comments on Collection 25/08/25 0803 F:  
Persistent neutropenia.

NATA Accreditation No 2178

Tests Completed: FBC(e)

Tests Pending : LFT(s), C(s), UCreat(s), E(s), Lipids HDL(s), RU-Malb,  
CTSW1, CTSW2, U-CTPCR, U-NGPCR, NGPCR, NGPCR2, PSA(s),  
HepC(s), HIV(s), HBsAg(s), HBsAb(s), \_HepB Serology, Syp(s)

Sample Pending :

MULLINS, MICHAEL  
12 NORTHWOOD STREET, CAMPERDOWN. 2050  
**Phone:** 0400438099  
**Birthdate:** 14/11/1959 **Sex:** M **Medicare Number:** 3199034438  
**Your Reference:** A957B0EE87 **Lab Reference:** 895535158-C-C141  
**Laboratory:** Douglass Hanly Moir Pathology  
**Addressee:** DR MICHAEL TRAN **Referred by:** DR MICHAEL TRAN

**Name of Test:** Biochemistry  
**Requested:** 28/05/2025 **Collected:** 25/08/2025 **Reported:** 25/08/2025 20:15

**Clinical notes:** 65 year old on PrEP therapy, previously elevated cholesterol .TELEHEALTH

Clinical Notes : 65 year old on PrEP therapy, previously  
elevated cholesterol .TELEHEALTH

#### BIOCHEMISTRY

Date	19/11/24	19/02/25	23/05/25	25/08/25		
Time F-Fast	0810 F	0805 F	0810 F	<b>0803 F</b>		
Lab ID	854152041	893165465	893166101	<b>895535158</b>	Units	Reference
Status	Fasting		Fasting	<b>Fasting</b>		
Sodium		138	141	<b>142</b>	mmol/L	(135-145)
Potassium		4.5	4.6	<b>4.7</b>	mmol/L	(3.5-5.5)
Chloride		105	107	<b>106</b>	mmol/L	(95-110)
Bicarbonate		24	<b>L 18</b>	<b>24</b>	mmol/L	(20-32)
Urea		6.2	7.9	<b>6.7</b>	mmol/L	(3.5-9.0)
Creatinine		85	90	<b>95</b>	umol/L	(60-110)
eGFR		85	76	<b>74</b>	mL/min/1.73m2	(>59)
Bili.Total		<b>H 30</b>	<b>H 26</b>	<b>H 23</b>	umol/L	(4-20)
ALP		49	50	<b>55</b>	U/L	(35-110)
GGT		18	19	<b>17</b>	U/L	(5-50)
LD		187	229	<b>211</b>	U/L	(120-250)
AST		40	32	<b>40</b>	U/L	(10-40)
ALT		24	24	<b>39</b>	U/L	(5-40)
Total Protein		74	72	<b>77</b>	g/L	(64-83)
Albumin		<b>H 49</b>	46	<b>H 51</b>	g/L	(36-47)
Globulin		25	26	<b>26</b>	g/L	(23-39)
Cholesterol	<b>H 6.9</b>			<b>H 7.5</b>	mmol/L	(<5.5)
Triglycerides	0.7			<b>1.0</b>	mmol/L	(<2.0)

Comments on Collection 25/08/25 0803 F:  
eGFR (mL/min/1.73m2) calculated by CKD-EPI formula - see [www.kidney.org.au](http://www.kidney.org.au)

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Lipids HDL(s), PSA(s),  
HepC(s), HIV(s), HBsAg(s), HBsAb(s), \_HepB Serology,  
FBC(e), Syp(s)

Tests Pending : RU-Malb, CTSW1, CTSW2, U-CTPCR, U-NGPCR, NGPCR, NGPCR2

Sample Pending :

MULLINS, MICHAEL

12 NORTHWOOD STREET, CAMPERDOWN. 2050

Phone: 0400438099

Birthdate: 14/11/1959 Sex: M Medicare Number: 3199034438

Your Reference: A957B0EE87 Lab Reference: 895535158-C-C205

Laboratory: Douglass Hanly Moir Pathology

Addressee: DR MICHAEL TRAN Referred by: DR MICHAEL TRAN

Name of Test: Lipids HDL(s)

Requested: 28/05/2025 Collected: 25/08/2025 Reported: 25/08/2025 20:15

Clinical notes: 65 year old on PrEP therapy, previously elevated cholesterol .TELEHEALTH

Clinical Notes : 65 year old on PrEP therapy, previously  
elevated cholesterol .TELEHEALTH

Date	20/05/24	21/08/24	19/11/24	25/08/25		
Time F-Fast	1027 F	0808 F	0810 F	0803 F		
Lab ID	851714695	851716096	854152041	895535158	Units	Reference
Status	Fasting	Fasting	Fasting	Fasting		
Cholesterol	H 6.5	H 7.0	H 6.9	H 7.5	mmol/L	(<5.5)
Triglycerides	0.6	0.8	0.7	1.0	mmol/L	(<2.0)
HDL Chol.	1.8	1.6	1.8	1.7	mmol/L	(>1.0)
LDL Chol.	H 4.4	H 5.0	H 4.8	H 5.4	mmol/L	(<3.0)
Non-HDL Chol.	H 4.7	H 5.4	H 5.1	H 5.8	mmol/L	(<4.0)

Comments on Collection 25/08/25 0803 F:

Hypercholesterolaemia noted with LDL cholesterol between 5.0 and 6.4 mmol/L.

Secondary causes (e.g. hypothyroidism, cholestasis and nephrotic syndrome) should be excluded.

In the absence of secondary causes, the possibility of familial hypercholesterolaemia (FH) needs to be considered.

Clinical features of FH include tendon xanthomata and personal or family history of premature atherogenesis.

Calculation of the likelihood of FH is available at [www.athero.org.au/fh/calculator](http://www.athero.org.au/fh/calculator)

If not already undertaken, recommend specialist review and, for a patient with signs of premature or accelerated atherogenesis, consideration of Medicare rebated genetic testing for FH.

In patients with a first- or second-degree relative with a documented causative FH gene identified, genetic testing for FH is eligible for a Medicare rebate as a general practitioner request.

For further information, please also see [www.sonicgenetics.com.au/fh](http://www.sonicgenetics.com.au/fh)

Please note that the above reference limits are decision limits.

A flag based on these limits is an indication to review the absolute cardiovascular risk for the patient. For assessment of absolute cardiovascular disease risk please see [www.cvdcheck.org.au](http://www.cvdcheck.org.au)

The above decision limits are based on the European Atherosclerosis Society (EAS) and European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) Consensus Statement 2016 and the Australasian Association of Clinical Biochemistry and Laboratory Medicine (AACB) Lipid Reporting Guideline 2018.

Lipid treatment targets for patients at high risk of cardiovascular disease:

Total cholesterol	<4.0 mmol/L
Triglyceride	<2.0 mmol/L
HDL cholesterol	>1.0 mmol/L
LDL cholesterol	<2.5 mmol/L (<1.8 mmol/L for very high risk)
Non-HDL cholesterol	<3.3 mmol/L (<2.5 mmol/L for very high risk)

High risk - Primary prevention                      Very high risk - Secondary prevention

Target values from the AACB Lipid Reporting Guideline 2018.

Please note that as there is a continuum of risk, benefits are obtained for any measured lipid components moving towards and beyond the various target levels.

NATA Accreditation No 2178

Tests Completed: LFT(s), C(s), UCreat(s), E(s), Lipids HDL(s), PSA(s),  
HepC(s), HIV(s), HBsAg(s), HBsAb(s), \_HepB Serology,  
FBC(e), Syp(s)

Tests Pending : RU-Malb, CTSW1, CTSW2, U-CTPCR, U-NGPCR, NGPCR, NGPCR2

Sample Pending :