Patient Name	: NARINDER KAUR 1971669252	Barcode	: H2577587
Age/Gender	: 55/Female	Sample Collected On	: 09/Mar/2020 07:26AM
Order Id	: 1971669252	Sample Centrifuged On	: 09/Mar/2020 11:34AM
Referred By	: Self	Sample Received On	: 09/Mar/2020 12:07PM
Customer Since	: 09/Mar/2020	Report Generated On	: 09/Mar/2020 03:01PM
Sample Type	: Whole Blood EDTA	Sample Temperature	: Maintained

DEPARTMENT OF BIOCHEMISTRY

Test Name	Value	Unit	Bio. Ref Interval
Glycosylated Hemoglobin(Hba1c),blood			
Hba1c (Glycosylated Hemoglobin) Method: HPLC	**5.9**	%	4.2-5.7
Average Blood Glucose	122.63		

Comment:*INTERPRETATION:*

AS PER AMERICAN DIABETES ASSOCIATION (ADA):		
REFERENCE GROUP	**GLYCOSYLATED HEMOGLOBIN (HBAIC) in %**	
Non diabetic	<5.7	
At Risk (Prediabetes)	5.7 – 6.4	
Diagnosing Diabetes	>= 6.5	
Therapeutic goals for glycemic control	**Age > 19 Years**	
	Goals of Therapy:	< 7.0
	Actions Suggested:	>8.0
	Age < 19 Years	
	Goal of therapy:	<7.5

REMARKS :

1.HbA1c is used for monitoring diabetic control.It reflects the mean plasma glucose over three months.
2.HbA1c may be falsely low in diabetics with hemolytic disease. In these individuals a plasma fructosamine level may be used which evaluates diabetes over 15 days.
3. HbA1C may be increased in patients with polycythemia or post-splenectomy.
4. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
5. Any sample with >15% HbA1C should be suspected of having a hemoglobin variant, especially in a non-diabetic patients
6. HbA1c target in pregnancy is to attain level <6 % .
7. HbA1c target in pediatric age group is to attain level < 7.5 %.

Method : ion-exchange high-performance liquid chromatography (HPLC).
Reference : American Diabetes Associations. Standards of Medical Care in Diabetes 2015

*** End Of Report ***

Dr. Maneet Luthra
(MD Pathology)
Consultant Pathologist

SIN No:H2577587

Lab Id.	**00012003100252**	Reg No	1648983
Patient Name	**Mrs.NARINDER KAUR**	Reg Date	10/Mar/2020 02:19AM
Age/Sex	55 YRS/Female	Sample Coll. Date	10/Mar/2020
Refered By	SELF	Sample Rec.Date	10/Mar/2020 02:22 AM
Client Code/Name	AP010006 U FIRST LUDHIANA		
Ref. Lab/Hosp		Report Date	10/Mar/2020 04:20AM
Barcode No	11371866		

Test Name With Methodology	Result	Unit	Biological Ref.Interval
	HAEMATOLOGY		
HbA1c (Glycated hemoglobin)			
Glycosylated Hb (HbA1c)	5.7	%	4.2-6.5
EDTA BLOOD, HPLC Assay			
Average Glucose	117	mg/dl	73-140
Calculated.			

Ref Range for HBA1c

Non Diabetic: < 5.7 %
Pre-Diabetic: 5.7 - 6.5 %
Diabetic: > 6.5 %

Remark: Hemoglobin A1c criteria for diagnosing diabetes have not been established for patients who are <18 years of age.

HbA1c goals in treatment of diabetes:

Ages 0-6 years: 7.6% - 8.4%
Ages 6-12 years: <8%
Ages 13-19 years: <7.5%
Adults: <7%

COMMENT:

The Glycosylated Hemoglobin (HbA1c or A1c) test evaluates the average amount of glucose in the blood over the last 2 to 3 months. This test is used to monitor treatment in someone who has been diagnosed with diabetes. It helps to evaluate how well the person's glucose levels have been controlled by treatment over time. This test may be used to screen for and diagnose diabetes or risk of developing diabetes. Depending on the type of diabetes that a person has, how well their diabetes is controlled, and on doctor recommendations, the HbA1c test may be measured 2 to 4 times each year. The American Diabetes Association recommends HbA1c testing in diabetics at least twice a year. When someone is first diagnosed with diabetes or if control is not good, HbA1c may be ordered more frequently.

Note: If a person has anemia, hemolysis, or heavy bleeding, HbA1c test results may be falsely low. If someone is iron-deficient, the HbA1c level may be increased. If a person has had a recent blood transfusion, the HbA1c may be inaccurate and may not accurately reflect glucose control for 2 to 3 months.

The tests marked with an * are not accredited by NABL.

*** End Of Report ***

Dr Mukta, MD
(Consultant Microbiologist)

Dr Anupama Jha
(Consultant Pathologist)

Dr Prashant Goyal
(Chief Pathologist)