



	Dr. Vinay Che MD (Pathology & Chairman & Cons	Microbiology)		Yugam Cho MD (Pathol onsultant Pathol	ogy)
IAME	: Mrs. DARSHNA RANI				
AGE/ GENDER	: 70 YRS/FEMALE		PATIENT ID	: 16	28189
COLLECTED BY	: SURJESH		REG. NO./LAB N	D. :01	2409280047
REFERRED BY	·				
	:		REGISTRATION		/Sep/2024 02:03 PM
BARCODE NO.	: 01517891		COLLECTION DA		/Sep/2024 02:04PM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		REPORTING DAT	FE : 28,	/Sep/2024 02:44PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, A	AMBALA CANTT			
Test Name		Value		nit	Biological Reference interval
		Value		III	biological Reference interval
GI VCOSVI ATED HAF			ATOLOGY NEMOGLOBIN (H %		4.0 - 6.4
by HPLC (HIGH PERFORMANCE LIQUID CHROMATOGRAPHY) ESTIMATED AVERAGE PLASMA GLUCOSE by HPLC (HIGH PERFORMANCE LIQUID CHROMATOGRAPHY)		0.5	7		T.0 - 0.T
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO	E PLASMA GLUCOSE	139.85	m	ng/dL	60.00 - 140.00
NHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY)	139.85		ng/dL	60.00 - 140.00
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION:	E PLASMA GLUCOSE	139.85 DIABETES ASSOCI			
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: NOT di	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP abetic Adults >= 18 years	139.85 DIABETES ASSOCI	ATION (ADA):	OGLOGIB (HBAIC)	
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: NOT di A	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP labetic Adults >= 18 years At Risk (Prediabetes)	139.85 DIABETES ASSOCI	ATION (ADA): YCOSYLATED HEM(<5.7 ·	DGLOGIB (HBAIC) 5.7 - 6.4	
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: Non di	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP abetic Adults >= 18 years	139.85 DIABETES ASSOCI	ATION (ADA): YCOSYLATED HEM(<5.7 - >=	DGLOGIB (HBAIC) 5.7 - 6.4 6.5	
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: Non di	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP labetic Adults >= 18 years At Risk (Prediabetes)	139.85 DIABETES ASSOCI GI	ATION (ADA): YCOSYLATED HEM(5.7 - >= Age > 1	DGLOGIB (HBAIC) 5.7 - 6.4 6.5 9 Years) in %
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: Non di A	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP Tabetic Adults >= 18 years At Risk (Prediabetes) Diagnosing Diabetes	139.85 DIABETES ASSOCI GI Goals	ATION (ADA): YCOSYLATED HEM(5.7 - >= Age > 1 of Therapy:	DGLOGIB (HBAIC) 5.7 - 6.4 6.5 9 Years < 7	1 in %
WHOLE BLOOD by HPLC (HIGH PERFO ESTIMATED AVERAG by HPLC (HIGH PERFO INTERPRETATION: Non di A	E PLASMA GLUCOSE DRMANCE LIQUID CHROMATOGRAPHY) AS PER AMERICAN REFERENCE GROUP labetic Adults >= 18 years At Risk (Prediabetes)	139.85 DIABETES ASSOCI GI Goals	ATION (ADA): YCOSYLATED HEM(5.7 - >= Age > 1 of Therapy: s Suggested:	DGLOGIB (HBAIC) 5.7 - 6.4 6.5 9 Years	1 in %

KOS Diagnostic Lab

(A Unit of KOS Healthcare)

atient who has recently ur concentration of HbAlc. Converse is true for a diabetic previously under good control but now poorly controlled.

3. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targetting a goal of < 7.0% may not be appropiate.

4.High HbA1c (>9.0 -9.5 %) is strongly associated with risk of development and rapid progression of microvascular and nerve complications 5. Any condition that shorten RBC life span like acute blood loss, hemolytic anemia falsely lower HbA1c results.

6.HbA1c results from patients with HbSS,HbSC and HbD must be interpreted with caution, given the pathological processes including anemia, increased red cell turnover, and transfusion requirement that adversely impact HbA1c as a marker of long-term gycemic control.

7.Specimens from patients with polycythemia or post-splenctomy may exhibit increse in HbA1c values due to a somewhat longer life span of the red cells.

*** End Of Report ***



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TEST PERFORMED AT KOS DIAGNOSTIC LAB. AMBALA CANTT