

## PKR JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

### A PIONEER DIAGNOSTIC CENTRE

**NAME** : Mr. PREM SINGH

AGE/ GENDER : 58 YRS/MALE **PATIENT ID** : 1769594

**COLLECTED BY** : 122503150013 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 15/Mar/2025 11:14 AM BARCODE NO. : 12507512 **COLLECTION DATE** : 15/Mar/2025 11:31AM CLIENT CODE. : P.K.R JAIN HEALTHCARE INSTITUTE REPORTING DATE : 15/Mar/2025 04:42PM

**CLIENT ADDRESS** : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

**Value** Unit **Biological Reference interval Test Name** 

#### HAEMATOLOGY **GLYCOSYLATED HAEMOGLOBIN (HBA1C)**

GLYCOSYLATED HAEMOGLOBIN (HbA1c): 5.1 4.0 - 6.4%

WHOLE BLOOD by HPLC (HIGH PERFORMANCE LIQUID CHROMATOGRAPHY)

ESTIMATED AVERAGE PLASMA GLUCOSE 99.67 mg/dL 60.00 - 140.00

by HPLC (HIGH PERFORMANCE LIQUID CHROMATOGRAPHY)

#### INTERPRETATION:

AS PER AMERICAN DI	ABETES ASSOCIATION (ADA):		
REFERENCE GROUP	GLYCOSYLATED HEMOGL	OGIB (HBAIC) in %	
Non diabetic Adults >= 18 years	<5.7		
At Risk (Prediabetes)	5.7 – 6.4		
Diagnosing Diabetes	>= 6.5		
	Age > 19 Y	Age > 19 Years	
Therapeutic goals for glycemic control	Goals of Therapy:	< 7.0	
	Actions Suggested:	>8.0	
	Age < 19 Y	ears	
	Goal of therapy:	<7.5	

#### COMMENTS:

- 1. Glycosylated hemoglobin (HbA1c) test is three monthly monitoring done to assess compliace with therapeutic regimen in diabetic patients.
- 2. Since Hb1c reflects long term fluctuations in blood glucose concentration, a diabetic patient who has recently under good control may still have high 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.



DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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**■** 0171-2532620, 8222896961 ■ pkrjainhealthcare@gmail.com

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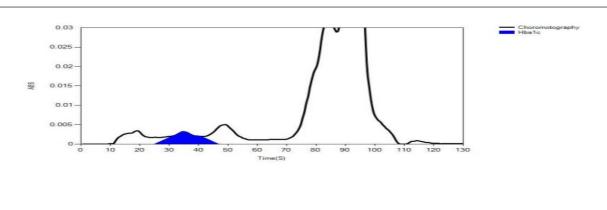
**CLIENT ADDRESS** : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

**Test Name Value** Unit **Biological Reference interval** 

#### LIFOTRONIC Graph Report

Name :	Case:	Patient Type :	Test Date: 15/03/2025 16:39:51
Age:	Department:	Sample Type: Whole Blood EDTA	Sample ld: 12507512
Gender:			Total Area: 11082

Peak Name	Retention Time(s)	Absorbance	Area	Result (Area %)
HbA0	68	2318	9988	84.1
HbA1c	36	50	610	5.1
La1c	25	32	225	1.9
HbF	22	20	20	0.2
Hba1b	14	35	186	1.6
Hba1a	10	24	53	0.4



\*\*\* End Of Report \*\*\*

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