Reference No.	**: - 2006220149**	Age/Gender	: **36 Yrs/Female**
Pt's Name	**: Mrs. MANDEEP KAUR**		**AMB-KOS**
Referred By	**: NA**		
Sample Collection Date/Time	**: 06-Jun-2020**	Date	**:06-Jun-2020**
Sample Receiving Date/Time	**: 06-Jun-2020 12:30PM**	Approvel Date	**:06-Jun-2020 04:55PM**
Sample From	**: KOS DIAG LAB**	Report Print Time	**:06-Jun-2020 06:32PM**

HAEMATOLOGY

Test Description	Observed Value	Biological Reference Interval
Haemoglobin Electrophoresis (HPLC)*		
Peak		
HbF	**2.30**	0-2.0
A1c	5.70	(< 9.60) %
P3	4.50	%
A0	81.30	%
A2	5.80	(1.50-3.70) %
Hb D (Punjab)	0.00	%
S-Window	0.00	(< 0.02) %
C-Window	0.00	(< 0.02) %
E-Window	0.00	(< 0.02) %
Unknown (Unidentified)	0.00	(<0.02) %
Others (Non specific)	0.00	(<10.00) %

Comments HPLC

Impression: HPLC findings are consistent with a Thalassemia trait/ minor. Appropriate counselling and further management including screening of the spouse are strongly recommended.

Low Hb A2 levels are seen in:

- Iron-deficiency anemia
- Delta-beta Thalassemia (HbF is also elevated)
- Alpha Thalassemia trait
- Hb H disease
- Delta Thalassemia
- Additional delta chain variant

Borderine high hemoglobin F levels are seen in:

Reference No.	**: - 2006220149**	Age/Gender	: **36 Yrs/Female**
Pt's Name	**: Mrs. MANDEEP KAUR**		**AMB-KOS**
Referred By	**: NA**		
Sample Collection Date/Time	**: 06-Jun-2020**	Date	:**06-Jun-2020**
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- Children below 2 years of age often have raised fetal hemoglobin levels.
- Second trimester of pregnancy.
- Hereditary persistence of fetal hemoglobin (HPFH). This condition does not have any significant clinical implications.
- Some individuals with hematological disorders (aplastic anemia, MDS, JMML)
- In approximately 30% of Beta Thalassemia trait patients.

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*** End Of Report ***