

Client
Gurugram
Pathkind Diagnostics Pvt. Ltd.
Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Processed By
Pathkind Diagnostics Pvt. Ltd.
Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Name	: Mr. BC30	Billing Date	: 07/07/2023 12:12:48
Age	: 35 Yrs	Sample Collected on	: 10/07/2023 10:01:31
Sex	: Male	Sample Received on	: 10/07/2023 11:02:13
P. ID No.	: P1000100012414	Report Released on	: 14/07/2023 18:23:53
Accession No	: 10002304470	Barcode No.	: 10002304470-01
Referring Doctor	: Self	Ref no.	:
Referred By	:		

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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BIOCHEMISTRY

HbA1C (Glycosylated Hemoglobin)

HbA1c

Sample: Whole Blood EDTA

Method: High Performance Liquid Chromatography (HPLC)

2.3

Non Diabetic : < 5.7 %
Prediabetic Range : 5.7 - 6.4 %
Diabetic Range : >= 6.5 %
Goal of Therapy : <7.0 %
Action suggested : >8.0 %

%

Mean Plasma Glucose

Sample: Whole Blood EDTA

Method: Calculated

19.3

<116.0

mg/dL

HbA1C (Glycosylated Hemoglobin)

Clinical Significance :

Hemoglobin A1c (HbA1c) level reflects the mean glucose concentration over the previous period (approximately 8-12 weeks) and provides a much better indication of long-term glycemic control than blood and urinary glucose determinations. American Diabetes Association (ADA) include the use of HbA1c to diagnose diabetes, using a cutpoint of 6.5%. The ADA recommends measurement of HbA1c 3-4 times per year for type 1 and poorly controlled type 2 diabetic patients, and 2 times per year for well-controlled type 2 diabetic patients) to assess whether a patient's metabolic control has remained continuously within the target range. Falsely low HbA1c results may be seen in conditions that shorten erythrocyte life span. and may not reflect glycemic control in these cases accurately.

** End of Report**



Dr. Aarti Khanna Nagpal

DNB (Pathology)
Senior Consultant

10002304470 Mr. BC30

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