

TEST REPORT

Reg.No : DIL2727744 : 26-Dec-2024 /22:43 Reg.Date Name Collection : MRS.M UMITHA : 26-Dec-2024 /22:44 Age\Sex Received : 24 Years\Female : 26-Dec-2024 /23:34 **Referred By**: LDSL/MEH-23 Report : 27-Dec-2024 /00:48 **Referral Dr**: C/O PREMIER HOSPITAL Barcode : 000705052300

HORMONES VITAMIN - B12

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
Vitamin B-12	311.00	pg/mL	197-771

Method:ECLIA

INTERPRETATION:

- * Vitamin B-12 is a member of the vitamin B complex. It contains cobalt and is also known as cobalamin.
- * B-12 is necessary for the synthesis of RBCs, maintenance of the nervous system and growth and development in childern.
- * Increased in Myeloproliferative disorders, leukemias, leucocytosis, liver disorders like hepatitis, cirrhosis, hepatic coma.
- * Decreased in individuals with pernicious anemia, individuals with gastrointestinal disorders.vegetarians and older adults.

Sample Type: SERUM

Please Correlate With Clinical Findings If Necessary Discuss * This Is an Electronically Authenticated Report *



Dr.S.APOORVA MD BIOCHEMISTRY **Consultant Biochemist**

**** END OF REPORT ****



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Name	: MRS.M UMITHA	Collection	: 26-Dec-2024/22:44
Age\Sex	: 24 Years\Female	Received	: 26-Dec-2024 /23:29
Referred By	: LDSL/MEH-23	Report	: 27-Dec-2024 /00:19
Referral Dr	: C/O PREMIER HOSPITAL	Barcode	: 000705052400

Clinical Biochemistry GLYCATED HAEMOGLOBIN (HBA1C)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
GLYCATED HAEMOGLOBIN (HBA1C)	5.0	-	Normal : < 5.7
Method:HPLC			Diabetes Mellitus : > 6.5
			Increased Risk of Diabetes/Pre -
			Diabetes : 5.7 - 6.4
AVERAGE BLOOD GLUCOSE	96.48	mg/dL	90 - 120 - Excellent control121 - 150
Method:Calculation			- Good Control151 - 180 - Average
			Control181 - 210 - Action
			Suggested> 211 - Panic Value

Interpretation:

1.HbA1c test is done using HPLC method certified by National Glycohemoglobin Standardization Program(NGSP) and traceable to Diabetes Control and Complications Trial (DCCI) reference assay

2.HbA1c assay is used in the screening diagnosis and management of diabetes Mellitus

- 3. It reflects mean glycemia and level of control for the previous 2-3 months Test can be done any time of the day and in non fasted state
- 4. Measurement of HbA1c is recommended at 3 months intervals if glycemic control is poor or therapy has changed.
- 5. A good control of glycemia may reflect on HbA1c Levels towards normal in -3-5 week
- 6.Hba1c assay may be unreliable in case of altered red cell turnover hemolytic anemia and renal failure may decrease the Hba1c value in such cases Fasting blood glucose or Fructosamine assay are recommended to be used as a measure of glucose control
- 7. Hemoglobinopathies may lead to an artifactual increase in assay value this can be ruled out by Hemoglobin electrophoresis studies Splencectomy and polycythemia raises Hba1c levels
- 8. Pregnancy in the 2nd 3rd-trimester affects Glycemic control Hence Hba1c are not utilized in the diagnosis of gestational diabetes or in the postnatal period Recommended use of GDM GTT during pregnancy Related tests:

fasting Blood glucose, Fructosamine, Glucose tolerance test /OGTT /GCT, Postprandial Blood Glucose microalbumin References:

International expert committee report on the A1c assay in the Diagnosis of diabetes

Sample Type: WB EDTA

Please Correlate With Clinical Findings If Necessary Discuss

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Dr.PAVANI KIRANMAI.T MD BIOCHEMISTRY Consultant Biochemist

**** END OF REPORT ****