

C. NO. 3050230717050

Name : Mrs. UNNATI MISHRA Patient UID. : 9160634

Age/Gender : 30 Yrs/Female Visit No. : 0484025062400004

Referred Client : CENTRAL DIAGNOSTICS Collected on : 24-Jun-2025 10:00AM
Referred By : NA Received on : 24-Jun-2025 12:26PM

Doctor Name : Reported on : 24-Jun-2025 05:51PM

Sample Type : Serum - 18469552, Whole Blood EDTA - 18469553

HAEMATOLOGY

Test Name	Results	Unit	Bio. Ref. Interval				
HAEMOGLOBIN HPLC(HIGH PERFORMANCE LIQUID CHROMATOGRAPHY)							
HAEMATOLOGICAL INDICES							
HAEMOGLOBIN (Hb)	12.2	g/dL	12.0-15.0				
Methodology: colorimetric method							
RED BLOOD CELLS- RBC COUNT	4.52	millions/mm³	3.8 - 4.8				
Methodology: electric impedance	•••	0.4	10.0.70.0				
PACKED CELL VOLUME (PCV) -HEMATOCRIT Methodology: Pulse Height detection method	38.0	%	40.0-50.0				
MCV	84.1	fL	83-101				
Methodology: Automated/Calculated							
MCH	27.1	pg	27.0-32.0				
Methodology: by Automated/Calculated							
RED CELL DISTRIBUTION WIDTH (RDW-CV)	15.1	%	11.6-14.0				
Methodology: Automated/Calculated							
CHROMATOGRAM AREA%							
Hb F(Foetal Hb) Level	0.10	%	0 - 2 %				
Methodology: HPLC	1.07	0.7	0.00				
Peak 3	1.97	%	0.00 - 8.00				
Methodology: HPLC HbA Level	94.83	%	83.0 - 95.0				
Methodology: HPLC	94.03	/0	83.0 - 93.0				
HbA2	3.10	%	2.0 - 3.5 %				
Methodology: HPLC	2.10	, 0	2.0 2.0 70				

IMPRESSION

Suggestive Interpretation: Normal Hb Chromatographic Pattern.

Absence of beta thalassemia trait & absence of common abnormal hemoglobin.

NOTE: Hb A2 may be suppressed in concomitant Iron Deficiency, suggested CBC and Iron studies

Advised

- 1. Kindly correlate clinically.
- 2. Some hemoglobin variants are clinically silent. In case of normal interpretation silent carrier testing was not included.

CLINCAL NOTES

- 1. All results have to be correlated with age and history of blood transfusion If there is history of blood transfusion in last 3 months, repeat testing after 3 months from last date of transfusion is recommended.
- 2. In case of haemoglobinopathy, parents or family studies and counseling is advised.
- 3. This test detects Beta thalassaemia and haemoglobinopathies. DNA analysis is recommended to rule out alpha thalassaemia and silent carriers.
- 4. Mild to moderate increase in fetal heamoglobin can be seen in some acquired conditions like Pregnancy, Megaloblastic anaemia, Thyrotoxicosis, Hypoxia, Chronic kidney disease, Recovering marrow, MDS, Aplastic anaemia, PNH, Medications (Hydroxyurea, Erythropoietin) etc.
- 5. P3 window- Above 10% is often indicative of either denatured forms of hemoglobins or may suggest a possibility of abnormal haemoglobin variant. Hence, repeat analysis







C. NO. 305023071705Q

Name : Mrs. UNNATI MISHRA Patient UID. : 9160634

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with fresh sample or DNA studies is advised

6. P2 window- Above 10% is indicative of either glycated haemoglobin requiring correlation with diabetic status or may suggest a possibility of abnormal haemoglobin variant requiring further DNA studies for confirmation.

7. Clinical interpretation of Hb HPLC should consider the effects of blood transfusion, pregnancy, ethnic background, family history,age,RBC indices and nutritional anaemia. Silent carrier & mild mutation of \(\mathbb{S} \) thalassemia trait may give normal HbA2 levels. DNA mutation analysis for thalassemia is suggested.

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

Borderline high hemoglobin F levels are seen in:

- -Children below 2 years of age often have raised fetal hemoglobin levels.
- -Second trimester of pregnancy &
- -Heriditary persistance of fetal Haemoglobin (HPFH)
- -Some individuals with hematological disorders (aplastic anemia, MDS, JMML)
- -In some cases of Beta thalaseemia trait

*** End Of Report ***





LABORATORY

THALASSEMIA REPORT

LIFOTRONIC H100 Thalassemia Report

Name: Case: Patient Type: Test Date: 24/06/2025 \ 16:05

Gender: Department: Sample Type: Whole Blood EDTA **Sample Id:** 18469553

Age: Total Area: 155047

Peak Name	Retention Time(s)	Absorbance	Area	Result (Area %)
HbA1b	14.8	34	1322	0.85
HbF	20.6	13	1377	0.10
LA1c	29.0	35	2560	1.65
HbA1c	41.0	54	5194	4.51
P3	80.4	40	3061	1.97
P4	93.6	58	5929	3.82
UnKnown_Peak	114.7	49	3965	2.56
HbA0	162.0	396	127681	81.44
HbA2	210.4	32	3957	3.10



