

## Patient Details

Name : DUMMY REPORT  
UR :  
Ref :

DOB : [REDACTED] Sex : Female  
IC NO. : [REDACTED] Age : [REDACTED]  
Collected : [REDACTED] Ward :  
Referred : [REDACTED] Yr Ref. :

## Doctor Details

GRIBBLES IT DEPARTMENTAAAAA  
14 JALAN 19/1 2ND FLR  
WISMA KT (IF YOU RCV REPT  
PLS GIVE IT TO IT DEPT.)  
PETALING JAYA SEL 46300  
Lab No. : [REDACTED]  
Courier Run : **WKT**  
Report Printed : [REDACTED] 11:41

ANALYTES	RESULTS	UNITS	REF. RANGES
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## GENERAL SCREENING DBTICBM PROFILE

### BIOCHEMISTRY

Sodium	钠	141	mmol/L	(135-145)
Potassium	钾	4.1	mmol/L	(3.5-5.1)
Chloride	氯化物	99	mmol/L	(95-110)
Urea	尿素	7.1	mmol/L	(3.0-10.0)
Creatinine	肌酸酐	88	umol/L	(44-110)
eGFR	估计肾小球滤过率	60	mL/min/1.73m <sup>2</sup>	
Uric Acid	尿酸	0.21	mmol/L	(0.15-0.45)

An eGFR(CKD-EPI)- Normal or Mildly decreased.

(60-89 mL/min/1.73m<sup>2</sup>) NOTE: EGFR is NOT VALID for pregnant women,dialysis patients and/or teenagers [REDACTED]

Result should be interpreted alongside clinical presentation and in reference to KDIGO 2012 CKD Guidelines and the [REDACTED] n Clinical Practice Guidelines for the Management of Chronic Kidney Disease 2nd Edition ([REDACTED]).

AST	谷草转氨酶	33	U/L	(< 41)
ALT	谷丙转氨酶	25	U/L	(< 51)

## SERUM/PLASMA GLUCOSE

Glucose	葡萄糖	5.6	mmol/L	(3.9 - 6.0)
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Specimen collected [REDACTED] h  
Specimen type Fasting

## Interpretation:

Category	Fasting Plasma Glucose (mmol/L)
Normal	3.9 - 6.0
IFG (Prediabetes)	6.1 - 6.9
DM	>= 7.0

IFG = Impaired Fasting Glucose; DM = Diabetes Mellitus  
Recommend Oral Glucose Tolerance Test (OGTT) for fasting plasma glucose levels 6.1 - 6.9 mmol/L.

Source: [REDACTED] Clinical Practice Guidelines for the Management of Type 2 Diabetes Mellitus (6th Edition). [REDACTED] Joint Publication of the Ministry of Health [REDACTED], Academy of Medicine [REDACTED], [REDACTED] n Endocrine & Metabolic Society and Diabetes [REDACTED].

CC Drs: COMPUTER DEPARTMENTS.



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## SPECIAL CHEMISTRY

## SPECIMEN: WHOLE BLOOD

HbA1c 葡萄糖血红蛋白 5.2 % 33 mmol/mol

## Diagnostic Values of HbA1c in [REDACTED] Adults

HbA1c (NGSP) %	HbA1c (IFCC) mmol/mol	
< 5.7	< 39	Normal
5.7 - 6.2	39 - 44	*Prediabetes (IFG or IGT)
>= 6.3	>= 45	T2DM

IFG: Impaired Fasting Glucose; IGT: Impaired Glucose Tolerance; OGTT: Oral Glucose Tolerance Test; T2DM: Type 2 Diabetes Mellitus  
\*Recommend OGTT for HbA1c levels 5.7 - 6.2%

## Individualised HbA1c Target for Known Diabetes

HbA1c (NGSP) %	HbA1c (IFCC) mmol/mol	
<= 6.5	<=48	A: Tight target range for young, newly diagnosed diabetes without hypoglycaemia.
6.6 - 7.0	49 - 53	B: Target range for all other individuals not in category A or C.
7.1 - 8.0	54 - 64	C: Target range for diabetes with comorbidities short life expectancy and/or prone to hypoglycaemia.

Source: [REDACTED] Clinical Practice Guidelines for the Management of Type 2 Diabetes Mellitus (6th Edition). [REDACTED] Joint Publication of of the Ministry of Health [REDACTED], Academy of Medicine [REDACTED], [REDACTED] Endocrine & Metabolic Society and Diabetes [REDACTED].

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ANALYTES	RESULTS	UNITS	REF. RANGES
<u>SPECIAL CHEMISTRY</u>	<u>SPECIMEN: URINE</u>		
RANDOM URINE ALBUMIN			
ALBUMIN AND CREATININE RATIO (ACR)			
Urine Albumin	1.5	mg/L	(< 20.1)
Urine Creatinine		mmol/L	(4.00-25.00)
ACR	< 0.1	mg Alb/mmol	(< 3.5)

## KDIGO 2012 Albuminuria Categories:

- A1 Normal to Mildly Increased: <3
- A2 Moderately Increased: 3 - 30
- A3 Severely Increased: >30

Due to the variability in urinary albumin excretion, at least 2 specimens, preferably first morning void, collected within a 3 to 6 month period should be abnormal before considering a patient to have crossed one of these diagnostic thresholds. Exercise within [REDACTED], infection, fever, congestive heart failure, marked hyperglycaemia, pregnancy, marked hypertension, urinary tract infection and haematuria may increase urinary albumin over baseline values.

**KFRE risk calculation is not applicable if eGFR is >=60.**

## REPORT COMPLETED

## Tests Requested:

ALBUMIN/CREATININE RATIO, MULTIPLE BIOCHEM ANALYSIS, HAEMOGLOBIN A1C (HBA1C), GLUCOSE, SERUM/PLASMA, GLUCOSE, SERUM/PLASMA

CC Drs: COMPUTER DEPARTMENTS.

