

Name : Ms. ANITA SINGH	Age : 54 Years
Lab No. : 458830584	Gender : Female
Ref By : DR BHARAT SINGH	Reported : 11/3/2024 5:47:10PM
Collected : 11/3/2024 11:06:00AM	Report Status : Final
A/c Status : P	Processed at : Patna Lab II
Collected at : VERMA DIAGNOSTIC	R K ESTATE opposite IGIMS Raja Bazar
B-24, MITRA MANDAL COLONY, SAKET VIHAR,	Bailey Road Patna-800014
M no -7050483752	



Test Report

Test Name	Results	Units	Bio. Ref. Interval
HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD (HPLC, NGSP certified)			
HbA1c	6.2	%	4.00 - 5.60
Estimated average glucose (eAG)	131	mg/dL	

Interpretation

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic

Interpretation as per American Diabetes Association (ADA) Guidelines

Reference Group	Non diabetic adults >=18 years	At risk (Prediabetes)	Diagnosing Diabetes	Therapeutic goals for glycemic control
HbA1c in %	4.0-5.6	5.7-6.4	>= 6.5	<7.0

Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C MEASUREMENT	FACTORS THAT AFFECT INTERPRETATION OF HbA1C RESULTS
Hemoglobin variants, elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements	Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g., recovery from acute blood loss, hemolytic anemia, HbSS, HbCC, and HbSC) will falsely lower HbA1c test results regardless of the assay method used. Iron deficiency anemia is associated with higher HbA1c



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Test Name	Results	Units	Bio. Ref. Interval
GLUCOSE, FASTING (F), PLASMA (Hexokinase)	84.00	mg/dL	70.00 - 100.00
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, PLASMA (Hexokinase)	179.00	mg/dL	70.00 - 140.00
CREATININE, SERUM (Jaffe method)			
Creatinine	0.87	mg/dL	<0.90
GFR Estimated	79	mL/min/1.73m2	>59
GFR Category	G2		

Advise: CKD Risk Map (Z1014)

Note

- GFR, estimated (eGFR) calculated using the 2021 CKD-EPI creatinine equation and GFR Category reported as per KDIGO guideline 2012.
- eGFR category G1 or G2 does not fulfil the criteria for CKD, in the absence of evidence of kidney damage



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Test Report

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE,TOTAL, SERUM (ECLIA)			
T3, Total	0.81	ng/mL	0.80 - 2.00
T4, Total	13.70	µg/dL	5.10 - 14.10
TSH	5.57	µIU/mL	0.27 - 4.20

Interpretation

PREGNANCY	REFERENCE RANGE FOR TSH IN µIU/mL (As per American Thyroid Association)
1st Trimester	0.100 - 2.500
2nd Trimester	0.200 - 3.000
3rd Trimester	0.300 - 3.000

Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals



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Test Report

Test Name

BK

Dr Binay kumar.
MD, Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

Results

Manju Sharma

Dr Manju Sharma
DCP, Pathology
Consultant Pathologist

Units

Surya Kant Nirala

Dr Suryakant Nirala
MD, Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

Bio. Ref. Interval

Poonam Sinha

Dr. Poonam Sinha
MD Biochemistry
Consultant Biochemist
Dr Lal PathLabs Ltd

Sinha

Dr. Shalini Sinha
MBBS, DCP
Chief of Laboratory
Dr Lal PathLabs Ltd

-----End of report-----



IMPORTANT INSTRUCTIONS

•Test results released pertain to the specimen submitted. •All test results are dependent on the quality of the sample received by the Laboratory. •Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician. •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. •Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting. •Test results may show interlaboratory variations. •The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s). •Test results are not valid for medico legal purposes. •This is computer generated medical diagnostic report that has been validated by Authorized Medical Practitioner/Doctor. •The report does not need physical signature.

(#) Sample drawn from outside source.

If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-49885050, Fax: - +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com

