AVINI LABS®
ACCURATE - RELIABLE - ADVANCED

Patient	: **Mr. PRABHAKARAN**	SID No.	: **01003515**
Age / Sex	: 47 Y / Male	Reg Date & Time	: 28/05/2025 14:52:33
Referrer	: Self	Coll Date & Time	: 28/05/2025 14:52:33
Branch	: MAYILADUTHURAI	Report Date & Time	: 28/05/2025 16:39:48

Partial Test Report

INVESTIGATION / METHOD	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
BIOCHEMISTRY			
HbA1c (NEPHELOMETRY)			
Glycosylated Haemoglobin (HbA1c) (Specimen: EDTA BLOOD)	5.4	%	4.0 - 6.0 : Non Diabetic 6.1 - 7.0 : Good control 7.1 - 8.0 : Fair control 8.1 - 10.0 : Unsatisfactory > 10.0 : Poor control
Estimated Average Glucose (eAG) (Specimen: EDTA BLOOD)	108.3	mg/dL	

Notes : HbA1c level reflects the mean glucose concentration over the previous period (approximately 6-8 weeks) and provides a much better indication of long term glycemic control than blood and urine glucose determinations. The American Diabetes Association recommends measurement of HbA1c every 3 months to determine whether a patient's metabolic control has remained continuously within the target range.A1C test should be performed at least 2 times a year in patients who are meeting treatment goals (and who have stable glycemic control). A1C test should be performed quarterly in patients whose therapy has changed or who are not meeting glycemic goals. Predicting development and progression of diabetic microvascular complications. This assay is not useful in determining day to day glucose control and should not be used to replace routine blood glucose testing.

IMMUNOLOGY			
25 Hydroxy Vitamin D3 (Method : NEPHELOMETRY) (Specimen: Serum)	15.7	ng/ml	< 20 : Deficiency 20-29 : Insufficiency 30-100 : Sufficiency > 100 : Toxicity

Notes : Comments : Vitamin D is a fat-soluble steroid hormone precursor that is mainly produced in the skin by exposure to sunlight. Vitamin D is biologically inert and must undergo two successive hydroxylations in the liver and kidney to become the biologically active 1,25 - dihydroxyvitamin D. It is commonly agreed that 25-hydroxyvitamin D is the metabolite to determine the overall vitamin D status as it is the major storage form of vitamin D in the human body. This primary circulating form of vitamin D is present human body with levels approximately 1000 fold greater than the circulating 1,25-dihydroxyvitamin D. The half-life of circulating 25-hydroxyvitamin D is 2-3 weeks. Vitamin D is essential for : Bone health. In children, severe deficiency leads to bone-malformation, known as rickets. Milder degrees of insufficiency are believed to cause reduced efficiency in the utilization of dietary calcium. Vitamin D deficiency causes : Muscle weakness in elderly, the risk of falling has been attributed to the effect of vitamin D on muscle function. Vitamin D deficiency is a common cause of secondary hyperparathyroidism. Elevations of PTH levels, especially in elderly vitamin D deficient adults can result in osteomalacia, increased bone turnover, reduced bone mass and risk of bone fractures. Low vitamin D (25-OH) concentrations are also associated with lower bone mineral density. The results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

End of the Report

HEAD OFFICE:
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Verified By
V. Jothi Lakshmi
Lab Technician

Dr. S.Asokkumar, PhD.,
Clinical Biochemist & Q M

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