





Patient Name : Mr.VEERESHAM SHAKKARI

Age/Gender : 69 Y 9 M 22 D /M UHID/MR No : APJ1.0029575861

Visit ID : DVRHOPV34075 Ref Doctor : Dr.SELF

IP/OP NO

Collected : 23/Oct/2024 08:53AM

Received : 23/Oct/2024 03:47PM Reported : 23/Oct/2024 05:23PM

Status : Final Report

Client Name : PUP 24X7_CREDIT

Center location : Rainbow vistas rock garden, Hyderabad

DEPARTMENT OF BIOCHEMISTRY APOLLO BASIC FULL BODY CHECK

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN), WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	108	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 - 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6-7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 - 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic

Control by American Diabetes Association guidelines 2023.

- 2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- 4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- 5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

- B: Homozygous Hemoglobinopathy.
- (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

Dr.RAJESH BATTINA PhD.(Biochemistry) Consultant Biochemist

Dr.Matta Sujana Reddy M.B.B.S,M.D(Biochemistry) Consultant Biochemist





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Chromatogram Report

ID Sample No. Patient ID V5. 28 1 2024-10-23 16:38:16 B122370317

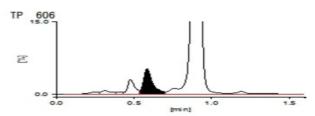
10230201 SL 0006 - 02

Name Comment

CALIB	Y	=1. 1888X	+ 0.5932
Name	%	Time	Area
A1A	0.4	0. 23	8. 30
A1B	0.6	0.31	12.75
F	0.3	0.40	5. 60
LA1C+	1.8	0.48	35. 31
SA1C	5.4	0.58	81.96
AO	93.0	0.90	1836. 76
H-VO			
H-V1			
H-V2			

HbA1c 5.4 %

Total Area 1980.68 IFCC 36 mmol/mo



23-10-2024 16:38:16 APOLLO

APOLLO DIAGNOSTICS GLOBAL

BALNAGAR





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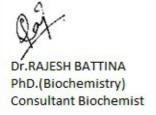
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DEPARTMENT OF BIOCHEMISTRY APOLLO BASIC FULL BODY CHECK





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DEPARTMENT OF BIOCHEMISTRY APOLLO BASIC FULL BODY CHECK

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	1.20	mg/dL	0.3–1.2	DPD

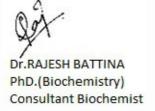
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	1.17	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic

*** End Of Report ***

Result/s to Follow:

HEMOGLOBIN (Hb), GLUCOSE, RANDOM





Dr.Matta Sujana Reddy M.B.B.S,M.D(Biochemistry) Consultant Biochemist





SIN No:BI22370315



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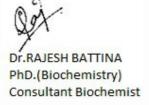
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TERMS AND CONDITIONS GOVERNING THIS REPORT

: DVRHOPV34075

- 1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understandreporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
- 2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of parrticulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
- 3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
- 4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
- 5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
- 6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



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