

Apollo Medical Centre

(Promoters : Kurnool Hospital Enterprises Ltd.)

43-67/A,N.R. Peta, Kurnool - 518 004, Phone : (08518) 225888, 225889

Name : CHENNAIAH	Bill Date : 03-Dec-2025 3:20 pm	
Age : 62	Sample No : 56	
Gender : Male	Smpl.Time : 03-Dec-2025 03:38 PM	
Bill No : CB23632	Report Date : 03-Dec-2025 4:48 pm	
Ref.Dr. : Self	CB23632 2847 	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C				
HBA1C , GLYCATED HEMOGLOBIN	6.4	%	-	Turbilatex

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control.

Reference:	
Non Diabetic Level	< 5.7 %
Pre diabetic range	5.7 % to 6.4 %
Diabetic Range	> 6.5 %
Diabetic Level	
Excellent control	6 % - 7 %
Fair to good control	7 % - 8 %
Poor control	8 % - 10 %
Unsatisfactory control	> 10 %

*** END OF REPORT ***

Printed On : 03-Dec-2025 4:48 pm

Checked By : SAI

CB23632 2847



KINDLY CORRELATE RESULTS WITH CLINICAL FINDINGS & DISCUSS IF NECESSARY.

Page 1 of 1

Sreelatha

Dr. SREELATHA. D
M.B.B.S, M.D

Consultant Biochemist

