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TRUST MEDICAL LABORATORY

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Organization Accredited

LABORATORY INVESTIGATION REPORT

Name : RIHAB REBAN Referral Clinic : PESHAWAR MEDICAL CENTER (

D.O.B / Sex : 21-Apr-1989 (32 Years) / Referral Doctor : PESHAWAR MEDICAL

FEMALE CENTER(A

PatientID/Nationality: 154601 / TUNISIA LabID / Clinic : 100038 / 29703

Test Name Result Unit No. Ref. Range Methodology

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HAEMATOLOGY				
HAEMOGLOBIN VARIANT STUDIES	BY HPLC			
HAEMOGLOBIN A0(HBAO)	96.9	%	Above 1 Year :95.5 - 98.5	HPLC
HAEMOGLOBIN A2(HBA2)	2.3	%	2.3 - 3.5	HPLC
FOETAL HAEMOGLOBIN(HBF)	0.8	%	Above 1 Year: 0 - 2	HPLC
IMPRESSION	: Normal Haemoglobin Chromatographic Pattern.			
Haemoglobin ElectroPhoresis				
Haemoglobin S	NOT DETECTED	%	0.0-0.0	
Haemoglobin D	NOT DETECTED	%	0.0-0.0	
Haemoglobin C	NOT DETECTED	%	0.0-0.0	
Haemoglobin E	NOT DETECTED	%	0.0-0.0	
Haemoglobin Other	NOT DETECTED		0.0-0.0	
Comments				

Comments

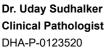
The Normal Haemoglobin HPLC result does not rule out the possibility of Alpha globin gene deletions associated with silent carrier status or Alpha Thalassemia trait. Individuals who carry a rare Greek Beta Thalassemia variant often have a normal HbA2 and may not be identified by this assay. Please correlate with clinical and laboratory findings.

Interpretation(s)

The assay is based on chromatographic separation of the analytes by ion exchange high performance liquid chromatography (HPLC). And it is used for Beta-thalassemia screening by quantitation of HbA2 and HbF Adult blood contains primarily haemoglobin A (HbA) and a small percentage of haemoglobin A2 (HbA2) and trace amounts of fetal haemoglobin (HbF). Carriers of beta-thalassemia typically have HbA2 levels >3.5% (usually 4-9%) and HbF levels of 1-5% Iron Deficiency Anaemia can mask A2 levels. It is recommended to repeat thalassemia screening after the treatment in case of iron deficiency anaemia. The most commonly occurring haemoglobin variants include hemoglobins S, E, C and D. This result does not rule out all hemoglobinopathies. Test result to be interpreted in the light of clinical history and family background plus laboratory data including serum iron and iron binding capacity, red cell morphology, haemoglobin, hematocrit and mean corpuscular volume (MCV).

**** End of Report *****









: 05/Feb/22 04:07 PM : 05/Feb/22 04:07 PM : 05/Feb/22 02:03 PM



SHEEBA BALAKRISHNAN Laboratory Technologist DHA-P-0219101