

## ANANDITA

	BEFORE	AFTER DIP DIET
<b>Hospital Name</b>	Shishu hospital, Kolkata	HIIMS Dera Bassi
<b>Medical Condition</b>	Insulin dependent Diabetes Type 1	Advised Insulin in October 2022 but Never Started
<b>Medications Taken</b>	Doctors advised Insulin in oct 2022 but she never started and directly contacted us.	DIP Diet - 100%
<b>Physical Discomforts / Symptoms</b>	Severe Urine infection	Nil
<b>Investigation</b>	Reports available C-peptide-0.88, HbA1c: 6.3 (14-10-22), Ketone bodies-44.98)	Reports available HbA1c -5.5

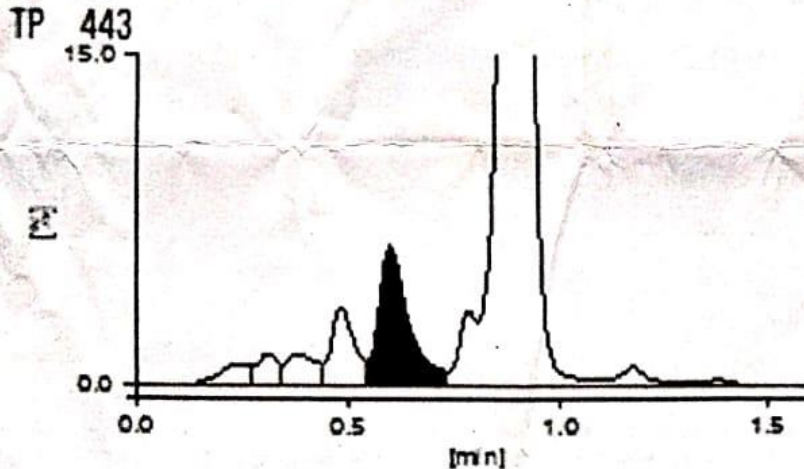
Name : ANANDITA MAHATA  
 Lab No. : 308423503  
 Ref By : Dr HOSPITAL  
 Collected : 14/10/2022 1:29:00PM  
 A/c Status : P  
 Collected at : FPSC KONAR\_S  
 68 HEMCHANDRA BANERJEE LANE  
 BELEGHATA KOLKATA - 70010

Age : 4 Years  
 Gender : Female  
 Reported : 14/10/2022 8:05:16PM  
 Report Status : Final  
 Processed at : LPL-KOLKATA REFERENCE LAB  
 DR LAL PATH LABS LTD  
 Premises No-031-0199 Plot No-CB 31/1 Street  
 199 Action Area 1C, Newtown Kolkata-70015  
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Test Report

Test Name	Results	Units	Bio. Ref. Interval
HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD (HPLC, NGSP certified)			
HbA1c	6.3	%	4.00 - 5.60
Estimated average glucose (eAG)	134	mg/dL	



Interpretation

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

**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



Name : ANANDITA MAHATO Yrs. 15 Months Days [17445] Day : Wednesday  
 Sex : Female Ref. From : 4 0 0 Reg. No.: RGZ201927342  
 Card No.: 19-10-2022 SSKM/082201517445  
 Visit No. : 1 Department : DIABETES Visit Date : 19-10-2022  
 Doctor/Unit Name (DOW) : Prof. Subhankar Chowdhury/Dr. Prof. Pranab Kumar Sahana/Dr. Dr. Rana  
 Room No. : Bhattacharjee/Dr. Dr. Subir Swar

Visit No. : 2	Visit No. : 3	Visit No. : 4
Visit Date : Tm.	Visit Date : Tm.	Visit Date : Tm.
Department :	Department :	Department :
Doctor/Unit :	Doctor/Unit :	Doctor/Unit :
Entry No. :	Entry No. :	Entry No. :

Clinical Notes	ADVICE								
<p>Professor Subhankar Chowdhury (HOD)                      Professor Pranab Kumar Sahana                      Dr. Subir Swar (Assistant Professor)</p> <p>19 OCT 2022</p> <p>At admitted in BC Roy PGIIPS                      UTI → detected to have high random blood sugars. &gt; 300 mg/dl                      but today's CBG is (N) checked randomly                      C peptide 0.88                      ketones 4+ during admission                      HbA1c - 6.3%</p>	<p>? Smoldering T1DM</p> <p>Adv</p> <p>① Check SMBG chart as follows for 48 hours</p> <table border="1"> <tr> <td>Before Breakfast</td> <td>2hr After Breakfast</td> <td>2hr After Lunch</td> <td>Before Dinner</td> </tr> <tr> <td></td> <td>2hrs After Dinner</td> <td></td> <td></td> </tr> </table> <p>② Blood for GAD 65, IA-2</p> <p>③ R/W Reports</p> <p>DR. DEBADIPTA DAS                      10/19/2022 01:09 PM                      MBBS, DNB (PAED), DM (EN)                      FOST DM SR                      IPGMR</p>	Before Breakfast	2hr After Breakfast	2hr After Lunch	Before Dinner		2hrs After Dinner		
Before Breakfast	2hr After Breakfast	2hr After Lunch	Before Dinner						
	2hrs After Dinner								

Discharge Certificate/Left Against Medical Advice

Discharge No. : Date of Discharge : 22/10/2022 Time : Patient Category : Free / Paying / ...  
Dr. B.C Roy Post Graduate Institute of Paediatric Sciences  
111, Narkeldanga Main Road (PH.O)

Patient Name : Patient Registration No. Admission Date

Address : Municipality / Village : Post Office :  
Police Station : District :  
State : ANANDITA MAHATO Nationality : Religion :  
Father's Name : Husband's Name : Female 4 0 0  
Doctor/Unit : PA2200012204 Bed Type : BCRC/RG2200 Phone/Mobile No. : [10-10-2022] [1:52 PM]  
Ward Name :

Final Diagnosis : ROOM NO. 82, K.B.LIN NO.4, JAGATDOL BHATPARA  
Jagatdal UTI & Swollen T<sub>1</sub> DM (prediabetic)

Referred From : ANANDITA KUMAR MAHATO (ICD - 599.0) Referred Out Case Date 10-10-2022 Time 7:30 Reason :  
UNIT A1 / DR. SOME SUVRA BOSE/Dr.DR KAUSHANI 7042311915

A. CHATTERJEE In case of Confinement  
Delivery Date & Time : Free Mode Of Delivery : ND/ECL/LUCS/With Forceps/Without Forceps  
Delivery Status : No. Of Child : Antenatal Care Taken : Yes / No.

B. In case of Surgery  
Surgery Date & Time : Type of Surgery :  
Surgery Status : UTI Treatment Completed. Conservatively.

Anesthesia Details :  
(inj. Meperan + Amikacin) - 10 days Given

D. Investigation Done  
Test Name : Comments :  
Feb, 1 - G.3.  
FBS - 65

E. Medicine Details  
Medicine Name : No. of Days : Comments :  
c-peptide - 0.88.  
Adv.  
Tab. Multivitamin - 1 tab OD x cont.

ADVICE :  
1) Clotrimazole ointment -  
2) To apply locally BD x cont. (over dorsum of hand)  
3) SMBG (mother has been explained regarding monitoring)

4) Refer to Endocrinology dept. of SKM as advised.

Signature of the Visiting Staff : Signature of the Medical Officer :  
Date : Time :

19th night → 21st night

Before breakfast	Aft. Breakfast	B.L	A.L	B.D	A.D
19/10/22				9.30 hrs 107 with	11.30 hrs
20/10/22	100 mg/dl	74 mg/dl	148	352	352 mg/dl
90 mg/dl					116
10 → 96	322 mg/dl	372 mg/dl	356 mg/dl	105 mg/dl	131 mg/dl
1/10 → 96		80 mg/dl			

B.C.H.)



# WELLCARE CLINICAL LAB

Fully Computerized Lab  
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AN ISO 9001:2015 CERTIFIED CLINICAL LAB



CERTIFICATE No:- QMS-WCL-220915

**Dr. Ankit Aggarwal** (Consultant Pathologist) MBBS, DCP

Patient Name : BABY ANANDHRA MARIATO	Reference : INDIRECT FAT - C/L, OUTSIDE	Registered On : 12/11/2022, 10:09 AM
Age / Sex : 4 years / Female	Organization : Hiims Hospital	Collected On : 12/11/2022
LCID No : 223160055	Org ID : NA	Reported On : 12/11/2022, 03:13 PM
UID No : 273371		

### Glycosylated Hb (Hemoglobin A1c)

Specimen Type : EDTA WB

Test Description	Observed Values	Units	Reference Range
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#### PATHOLOGY

Glycosylated Hb (Hemoglobin A1c) HPLC	5.5	%	< 6.50
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Method : Fully Automated H.P.L.C. using Bio-Rad D-10

Result Interpretation:

Reference Range: As per ADA Guidelines:

Normal Below : 5.7%  
 Prediabetic : 5.7% - 6.4%  
 Diabetic : >=6.5%

#### Therapeutic goals for glyceimic Control:

<u>Age &gt; 19 years</u>	<u>Age &lt; 19 years</u>
Goal of therapy : < 7.0	Goal of therapy : < 7.5
Action suggested : > 8.0	

#### Guidance For Known Diabetics:

Good Control Below : 6.5%  
 Fair Control : 6.5% - 7%  
 Unsatisfactory Control : 7.0% - 8%  
 Poor Control : >8%

Estimated Average Glucose:	111.15	mg/dL	-
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Method : Derived from HBA1c values  
 Reference Range :  
 Good Control : 90 - 120 mg/dl  
 Fair Control : 121 - 150 mg/dl  
 Unsatisfactory Control : 151 - 180 mg/dl  
 Poor Control : > 180 mg/dl

<<< End of the report >>>

Completed by : shalini

  
**Vivek Chakravarty**  
 B.Sc. MLT  
 Sr. Lab Technician

  
**Dr. Harvinder Singh**  
 MBBS, MD Pathology  
 Consultant Pathologist

