

LAB90 Hemoglobin A1C (GHGB)

BMC



Important Note

This test can NOT be added on to an aliquoted BNP sample. .

LIS Code

GHGB

Preferred Container

Lavender Top

Volume Required

1 mL

Minimum Volume

500 uL

Transportation Needs

Deliver specimens to the laboratory within 24 hours of collection.

Storage Requirements

Specimens not delivered to laboratory within 24 hours should be refrigerated

Whole Blood specimens are stable refrigerated at 2-8°C for up to 14 days

Lavender top tubes are routinely stored at the lab for only 3 days therefore, an add-on may not be possible after 3 days.

For HBA1c (GHGB) whole blood specimens may be refrigerated at 2-8°C for up to 14 days.

Causes for Rejection

Mislabeled or unlabeled specimen

Less than 50% draw for vacutainer tubes

Collection in any anticoagulant other than K2 EDTA

> 24 hours at room temperature

> 14 days refrigerated

Frozen Specimen

Reference Values

Pursuant to the 2016 American Diabetes Association recommendations for using HBA1c to diagnose and monitor diabetes using a NGSP certified method and standardized to the DCCT assay, the Clinical Laboratory use this reference range for HBA1c.

% HBA1c	Interpretation
4.0 - 5.6	Non-diabetic

5.7 - 6.4	Pre-diabetes
6.5 - 7.0	Diabetes, Good control
7.1 - 7.5	Fair control
7.6 - 8.5	Poor control
8.6 - 9.5	Very poor control
>9.5	Extremely poor control

Notes:

Current recommendations do not apply to pregnant women or children.

To confirm a positive result, the test must be repeated on a different day.

For diagnosis, A1c test should be performed in a laboratory not a point of care device.

The A1c test should be performed in a laboratory using a NGSP certified method and standardized to the DCCT assay. Bassett Medical Center laboratory meets this recommendation.

More information can be found at

<http://professional.diabetes.org/ResourcesForProfessionals.aspx?cid=84160>

In 2016 the ADA adopted the criterion of $\geq 6.5\%$ to diagnose diabetes.

An A1C $\geq 6.5\%$ In the absence of hyperglycemia, results should be confirmed by repeat testing.

Testing is performed in a laboratory using a NGSP certified method and standardized to the DCCT.

Keep in mind that while the ADA recommends HBA1c can be used for diagnosis, Medicare is currently only reimbursing for HBA1c used to monitor diabetes. Medicare covers the following for screening for diabetes:

A fasting blood glucose test

AND

A post-glucose challenge test (LAB21112); not limited to an oral glucose tolerance test with a glucose challenge of 75 gm non- pregnant adults **OR**

A 2-hour post-glucose (LAB169) challenge test alone

For those with pre-diabetes, those who are not diabetics or have not previously been diagnosed as pre-diabetics Medicare covers a maximum of two diabetes screening tests within a 12 month period (but not less than 6 months apart)

Available STAT

No

Methodology

Tosoh HPLC

CPT Code

83036