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PATIENT REPORT

Patient Age/Sex: 7 months 3 weeks Male

Specimen Collected: 5/7/2026 13:13 MDT

Hemoglobin HPLC Evaluation with Reflex | **Received: 5/7/2026 13:14 MDT** | **Report/Verified: 5/7/2026 13:28 MDT**

Procedure	Result	Units	Reference Interval
Hemoglobin A	See CE Report	%	[78.2-96.6]
Hemoglobin A2	See CE Report	%	[1.8-3.5]
Hemoglobin F	See CE Report	%	[0.9-19.4]
Hemoglobin S	See CE Report	%	[0.0-0.0]
Hemoglobin C	See CE Report	%	[0.0-0.0]
Hemoglobin E	See CE Report	%	[0.0-0.0]
Hemoglobin Other	See CE Report	%	[0.0-0.0]
Hemoglobin Evaluation	See CE Report i1		
Sickle Cell Solubility Reflex	Not Performed i2		
Hgb Capillary Electrophoresis Reflex	Performed i3		

Hemoglobin Evaluation by CE | **Received: 5/7/2026 13:14 MDT** | **Report/Verified: 5/7/2026 13:40 MDT**

Procedure	Result	Units	Reference Interval
Hemoglobin A	90.8	%	[83.5-95.8]
Hemoglobin A2	**1.3** L	%	[1.9-3.5]
Hemoglobin F	3.1	%	[2.3-13.0]
Hemoglobin S	0.0	%	[0.0-0.0]
Hemoglobin C	0.0	%	[0.0-0.0]
Hemoglobin E	0.0	%	[0.0-0.0]
Hemoglobin Other	**4.8** H	%	[0.0-0.0]
Hemoglobin Evaluation	See Note f1 i4		

Result Footnote

f1: Hemoglobin Evaluation
Small peaks were detected, which may be Hb H at 1.5% or Hb Barts at 3.3%.

The Barts or Hb H variants predict the presence of alpha thalassemia. Alpha thalassemia carrier states include silent carrier (one non-functional alpha globin gene; seen in approximately one third of African Americans) and alpha thalassemia trait (two non-functional alpha globin genes). Alpha thalassemia disease states include Hb H disease associated with the chronic hemolytic anemia (3 non-functional alpha globin genes) and Hb Barts hydrops fetalis syndrome (4 non-functional alpha globin genes).

If clinically indicated, molecular confirmation by Alpha Globin (HBA1 and HBA2) Deletion/Duplication (ARUP test #2011622) should be considered.

Please correlate clinically and in the context of recent transfusion history.

Low Hb A2 is commonly seen with delta-globin variants. Low Hb A2 can also be seen in association with alpha thalassemia and rarely with iron deficiency anemia. The clinical significance is not well established. Please correlate clinically.

Test Information

i1: Hemoglobin Evaluation
INTERPRETIVE INFORMATION: Hemoglobin Evaluation, with Reflex to Electrophoresis and/or RBC

*=Abnormal, #=Corrected, C=Critical, f=Result Footnote, H-High, i-Test Information, L-Low, t-Interpretive Text, @=Performing lab

Test Information

i1: Hemoglobin Evaluation

Solubility

HPLC Report: Results from HPLC are reported.
See CE Report: Results from capillary electrophoresis are reported under Hemoglobin Evaluation by Capillary Electrophoresis (3017102). Results were confirmed by HPLC.

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.

i2: Sickle Cell Solubility Reflex

INTERPRETIVE INFORMATION: Sickle Cell Solubility Reflex

Not Performed: Solubility testing for Hemoglobin S not indicated.
Positive: Positive for Hemoglobin S by HPLC and confirmed by solubility testing. Additional charges apply.
Conf Previous: Positive for Hemoglobin S by HPLC. Solubility testing performed previously and not repeated with this submission.

i3: Hgb Capillary Electrophoresis Reflex

INTERPRETIVE INFORMATION: Hgb Capillary Electrophoresis Reflex

Not Performed: Confirmation by Capillary Electrophoresis not indicated.
Performed: Results confirmed by Capillary Electrophoresis. Additional charges apply.
Conf Previous: Capillary Electrophoresis confirmation performed as part of a previous submission. Confirmation not repeated with this submission.

i4: Hemoglobin Evaluation

INTERPRETIVE INFORMATION: Hemoglobin Evaluation by Capillary Electrophoresis

This test was developed and its performance characteristics determined by ARUP Laboratories. It has not been cleared or approved by the U.S. Food and Drug Administration. This test was performed in a CLIA-certified laboratory and is intended for clinical purposes.