

Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 01:57PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 03:08PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

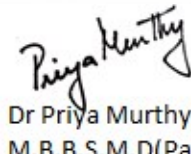
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.9	g/dL	13-17	Spectrophotometer
PCV	46.90	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.99	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	94	fL	83-101	Calculated
MCH	31.8	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	14.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,420	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	61	%	40-80	Electrical Impedence
LYMPHOCYTES	27.6	%	20-40	Electrical Impedence
EOSINOPHILS	3.1	%	1-6	Electrical Impedence
MONOCYTES	8.1	%	2-10	Electrical Impedence
BASOPHILS	0.2	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5136.2	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2323.92	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	261.02	Cells/cu.mm	20-500	Calculated
MONOCYTES	682.02	Cells/cu.mm	200-1000	Calculated
BASOPHILS	16.84	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.21		0.78- 3.53	Calculated
PLATELET COUNT	383000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	28	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



Dr Priya Murthy
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AND LIFESTYLE LIMITED- RRL BANGALORE



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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

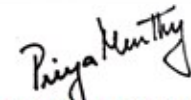
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



Dr. Vidya Aniket Gore
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH

Apollo Health and Lifestyle Limited (CIN - 063110132000PLC115017)
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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 01:12PM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 02:10PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 02:48PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	87	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

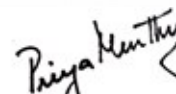
Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	150	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other. Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.


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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 02:43PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 03:33PM
Visit ID : CINDOPV244856	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. Low HbA1c in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.


4. 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.

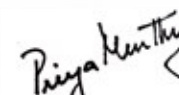
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: IRA241101051

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115849)

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory,
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APOLLO CLINICS NETWORK

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Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF BIOCHEMISTRY


ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

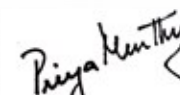
Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	200	mg/dL	<200	CHO-POD
TRIGLYCERIDES	148	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	34	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	166	mg/dL	<130	Calculated
LDL CHOLESTEROL	136.9	mg/dL	<100	Calculated
VLDL CHOLESTEROL	29.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.90		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.28		<0.11	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: IRA241101046

Apollo Health and Lifestyle Limited

(CIN - U061107C2800PH6115819)
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.88	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.74	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.3		<1.15	Calculated
ALKALINE PHOSPHATASE	82.00	U/L	30-120	IFCC
PROTEIN, TOTAL	8.73	g/dL	6.6-8.3	Biuret
ALBUMIN	4.77	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.96	g/dL	2.0-3.5	Calculated
A/G RATIO	1.2		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:

1. Hepatocellular Injury:

*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons’s diseases, Cirrhosis, but the increase is usually not >2.

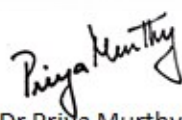
2. Cholestatic Patten:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No:IRA241101046

Apollo Health and Lifestyle Limited

(CIN - U06110TC2800PH6115839)
This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
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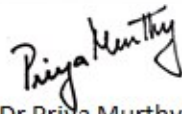
DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.92	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	14.60	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	9.10	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	10.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.16	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	134	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.0	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	8.73	g/dL	6.6-8.3	Biuret
ALBUMIN	4.77	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.96	g/dL	2.0-3.5	Calculated
A/G RATIO	1.2		0.9-2.0	Calculated



Dr. Govinda Raju N L
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Consultant Biochemistry



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	23.00	U/L	<55	IFCC

Priya Murthy

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Consultant Pathologist



Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 03:32PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 04:30PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324


Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.6	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.786	µIU/mL	0.34-5.60	CLIA

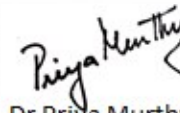
Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes


Dr. Govinda Raju N L
 MSc, PhD (Biochemistry)
 Consultant Biochemistry


Dr Priya Murthy
 M.B.B.S, M.D (Pathology)
 Consultant Pathologist



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 SIN No: IRA241101045

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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 03:32PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 04:30PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--

Govinda Raju
Dr.Govinda Raju N L
 MSc,PhD(Biochemistry)
 Consultant Biochemistry

Priya Murthy
Dr Priya Murthy
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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 SIN No:IRA241101045

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(CIN - U06110TC2000PHG115819)
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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 02:18PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 02:39PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	


DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	Clear		CLEAR	Scattering of light
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NORMAL		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	0	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0	/hpf	< 10	Automated Image based microscopy
RBC	1	/hpf	0-2	Automated Image based microscopy
CASTS	NEGATIVE	/lpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	NEGATIVE	/hpf	Occasional-Few	Automated Image based microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.


Dr. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist


Dr. Vidya Aniket Gore
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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 Karnataka - 560 034


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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 02:18PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 02:39PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324


Dr. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist


Dr. Vidya Aniket Gore
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 05:50PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 06:56PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD


Dr. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist


Dr. Vidya Aniket Gore
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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Patient Name : Mr.OBULESU SAKE	Collected : 09/Nov/2024 10:10AM
Age/Gender : 34 Y 3 M 25 D/M	Received : 09/Nov/2024 03:16PM
UHID/MR No : CIND.0000173166	Reported : 09/Nov/2024 03:41PM
Visit ID : CINDOPV244856	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36560	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

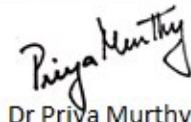
Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



Dr Priya Murthy
M.B.B.S,M.D(Pathology)
Consultant Pathologist

AND LIFESTYLE LIMITED- RRL BANGALORE



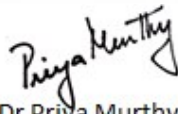
Patient Name	: Mr.OBULESU SAKE	Collected	: 09/Nov/2024 10:10AM
Age/Gender	: 34 Y 3 M 25 D/M	Received	: 09/Nov/2024 03:16PM
UHID/MR No	: CIND.0000173166	Reported	: 09/Nov/2024 03:41PM
Visit ID	: CINDOPV244856	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S36560		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



Dr Priya Murthy
M.B.B.S,M.D(Pathology)
Consultant Pathologist

AND LIFESTYLE LIMITED- RRL BANGALORE



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Patient Name	: Mr. Obulesu Sake	Age	: 34Yrs 3Mths 26Days
UHID	: CIND.0000173166	OP Visit No.	: CINDOPV244856
Printed On	: 09-11-2024 11:58 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36560		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

For clinical correlation.

---End Of The Report---



Dr.DHANALAKSHMI B
MBBS, DMRD
29543
Radiology

Patient Name	: Mr. Obulesu Sake	Age	: 34Yrs 3Mths 28Days
UHID	: CIND.0000173166	OP Visit No.	: CINDOPV244856
Printed On	: 11-11-2024 11:42 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36560		

DEPARTMENT OF CARDIOLOGY

M mode and doppler measurements:

CM CM M/sec

AO: 2.5 IVS(D): 1.1 MV: E Vel: 0.8 A Vel : 0.4

LA: 3.4 LVIDD(D): 3.8 AV Peak: 0.9

 LVPW(D): 1.1 PV peak: 0.6

 IVS(S): 1.2

 LVID(S): 2.6

 LVPW(S): 1.3

 LVEF: 60%

Descriptive findings:

Left Ventricle Normal
Right Ventricle: Normal
Left Atrium: Normal
Right Atrium: Normal
Mitral Valve: Normal
Aortic Valve: Normal
Tricuspid Valve: Normal
IAS: Normal

IVS:	Normal
Pericardium:	Normal
IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chamber and valves
No Regional wall motion abnormality
Normal PA pressure
No clot/vegetation/pericardial effusion
Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM
CONSULTANT CARDIOLOGIST

---End Of The Report---



Dr.JAGADEESH H V

MBBS, MD, DM

86848

Cardiology

Patient Name	: Mr. Obulesu Sake	Age	: 34Yrs 3Mths 29Days
UHID	: CIND.0000173166	OP Visit No.	: CINDOPV244856
Printed On	: 12-11-2024 09:43 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36560		

DEPARTMENT OF CARDIOLOGY

ECG

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:-

NORMAL RESTING ECG.

NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED

---End Of The Report---

Mr S Rao

Dr.M SUDHAKAR RAO
MBBS, MD, DM (Cardio)
000018
Cardiology

Name : Mr. Obulesu Sake

Age : 34Y 3M 25D

UHID : CIND.0000173166

Address : Krishnarajapuram R S Bangalore Karnataka INDIA 560016

sex : Male



CIND.0000173166

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
PAN INDIA OP AGREEMENT

OP No: CINDOPV244856

Bill No: CIND-OCR-103626

Date: Nov 9th, 2024, 9:36 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324		
1	DENTAL CONSULTATION - 1 <i>after 10 am</i>	Consultation	<input type="checkbox"/>
2	ENT CONSULTATION	Consultation	<input type="checkbox"/>
3	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
4	OPHTHAL BY GENERAL PHYSICIAN - 5 <i>after 10 am</i>	Consultation	<input type="checkbox"/>
5	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
6	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
7	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
8	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry	<input type="checkbox"/>
9	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>
10	PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
11	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
13	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
14	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
15	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
16	ULTRASOUND - WHOLE ABDOMEN - 9 <i>after 11:30 am</i>	Ultrasound Radiology	<input type="checkbox"/>
17	X-RAY CHEST PA - 10	X Ray Radiology	<input type="checkbox"/>
18	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
19	URINE GLUCOSE(FASTING)	Clinical Pathology	<input type="checkbox"/>
20	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>
21	2 D ECHO - 9 <i>after 9:30 am</i>	Cardiology	<input type="checkbox"/>
22	ECG - 6	Cardiology	<input type="checkbox"/>
23	BODY MASS INDEX (BMI) - 6	General	<input type="checkbox"/>
24	DIET CONSULTATION - 1	General	<input type="checkbox"/>

Apollo Health and Lifestyle Limited

(CIN - U85110TG2009PLC1158119)
Regd. Office: #F-1-617A, 615 & 616, Imperial Towers, 7th Floor, Ammanpet, Hyderabad-500038, Telangana |
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Kerala: Kottayam | Karnataka: Bangalore | Andhra Pradesh: Ammanpet | Karnataka: Bangalore | Andhra Pradesh: Ammanpet | Karnataka: Bangalore | Andhra Pradesh: Ammanpet

GSTIN: 29AA0CA0736123

Address:
2012, 1st Floor, 100 Feet Road, HSR Layout,
Bangalore-560034



Mr. ¹⁷³¹⁶⁶ ~~Oblesu~~ Sate

34y/M

09.11.2024

Height : 166 cm	Weight : 78.2 kg	BMI :	Waist Circum : 34 ⁴
Temp : 98.6 ⁺	Pulse : 89 bpm	Resp : 18cpm	B.P : 100/80 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Arcophani - All


Ears: MD

Nose: MD

Throat: MD

Follow up date:

Dr. RAVINDRANATH KUDVA
M.B.B.S., D.L.O.



E.N.T. SURGEON

KMC REG. No: 18154

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PATIENT CASE SHEET



Name: Abhishek Age: 34 Gender: M

Address: _____

UHID / Emp Id: _____

Ref. by Doctor

Treating Doctor
Dr. Suetter

Past Dental History:

—

Past Medical History:

—

Chief Complaint(s):

—

Investigation: RVG OPG CBCT

Male

09.11.2024 12:45:11
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BANGALORE

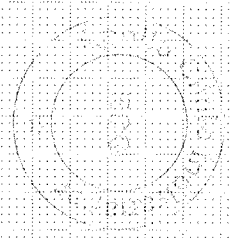
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CE

Location:
Room:

Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

89 bpm
- / - mmHg

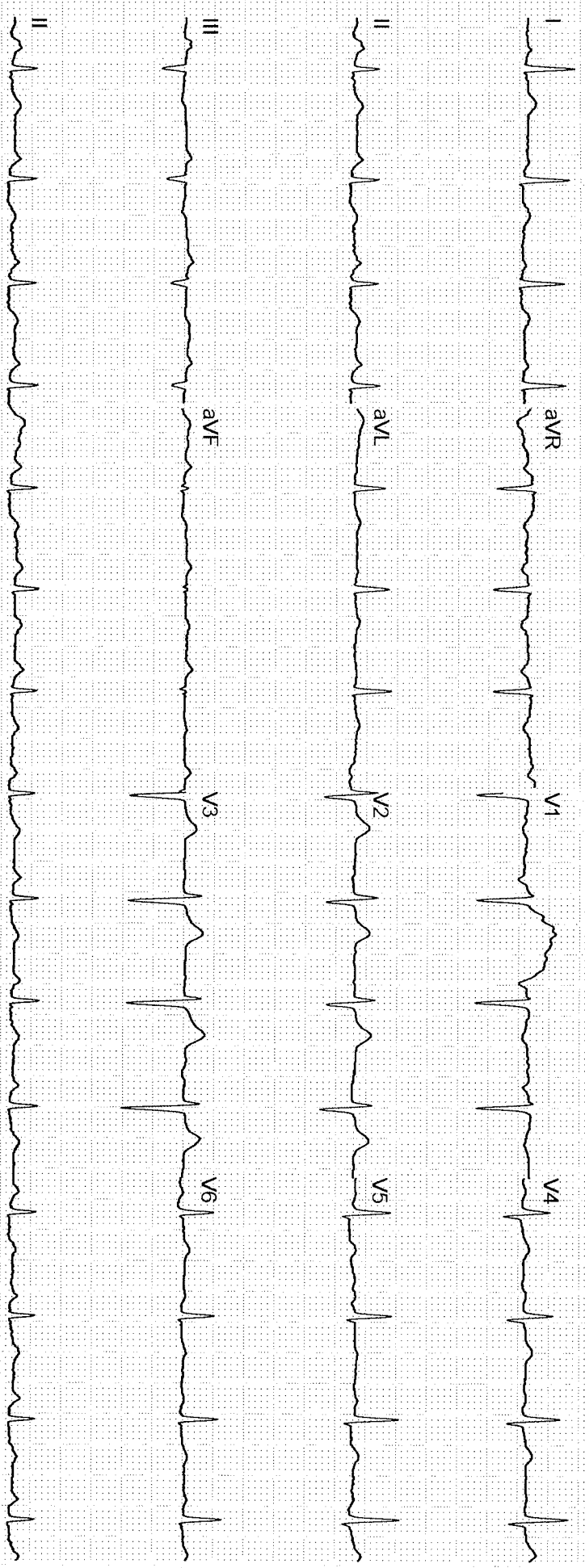
QRS : 70 ms
QT / QTcBaz : 350 / 425 ms
PR : 154 ms
P : 98 ms
RR / PP : 670 / 674 ms
P / QRS / T : 59 / 10 / 15 degrees



Handwritten signature

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

Handwritten signature



Unconfirmed

NAME: Mr. Obulesu Sake	AGE/SEX: 34Y/M	OP NUMBER: 17366
Ref By : SELF	DATE: 09-11-2024	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.5	IVS(D): 1.1	MV: E Vel: 0.8	A Vel : 0.4
LA: 3.4	LVIDD(D): 3.8	AV Peak: 0.9	
	LVPW(D): 1.1	PV peak: 0.6	
	IVS(S): 1.2		
	LVID(S): 2.6		
	LVPW(S): 1.3		
	LVEF: 60%		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal
IVC:	Normal
Others	---

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph: No. 010 4004 3777 Fax: No. 4004 3744

IMPRESSION :

Normal cardiac chamber and valves

No Regional wall motion abnormality

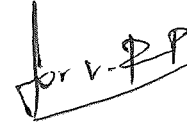
Normal PA pressure

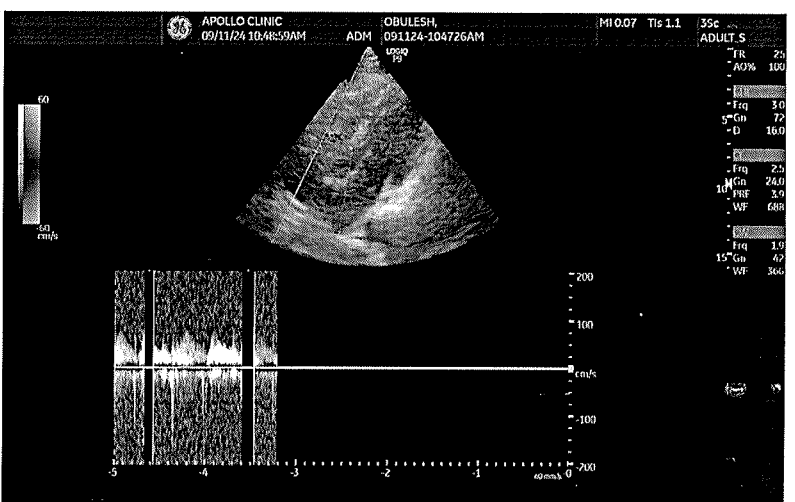
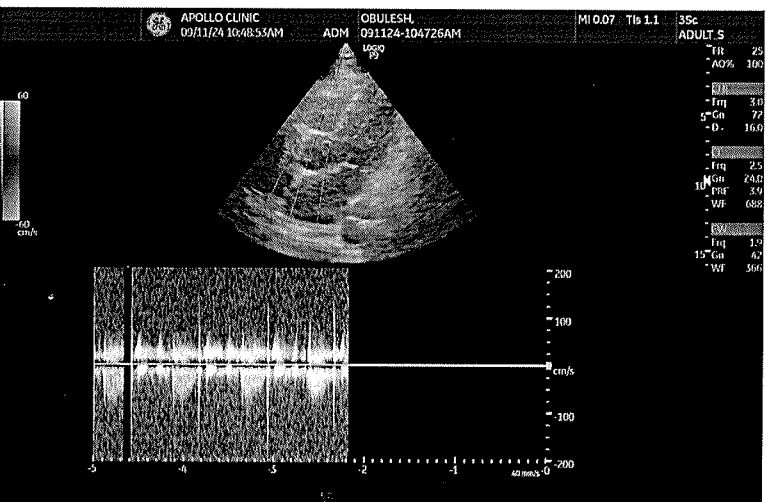
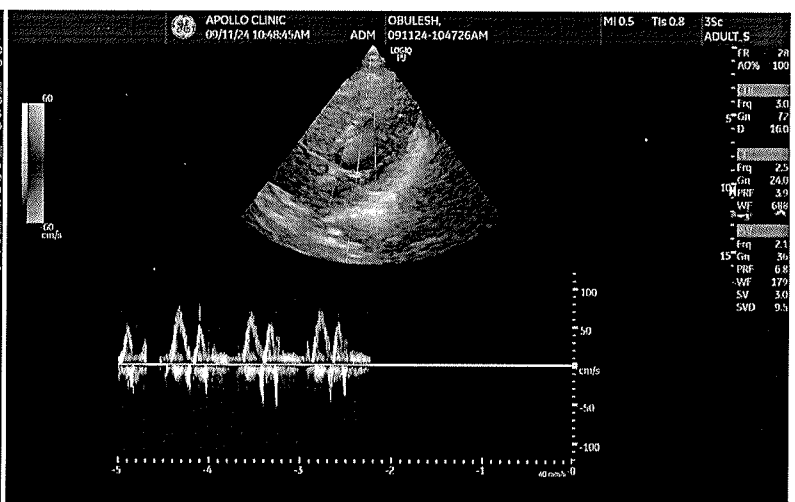
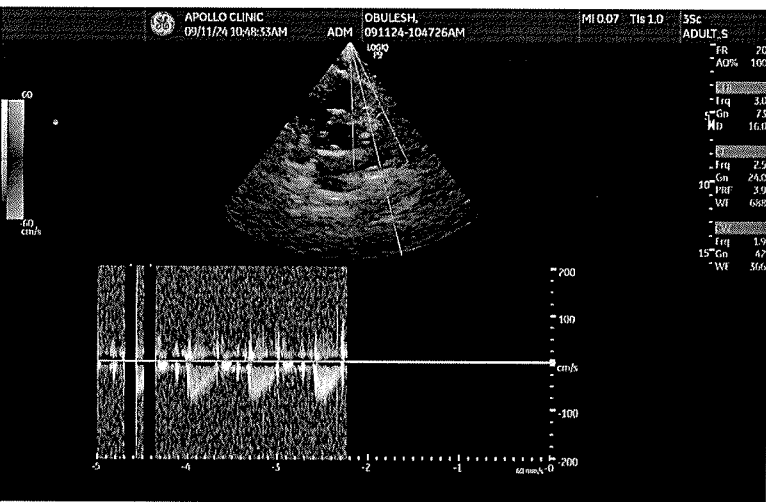
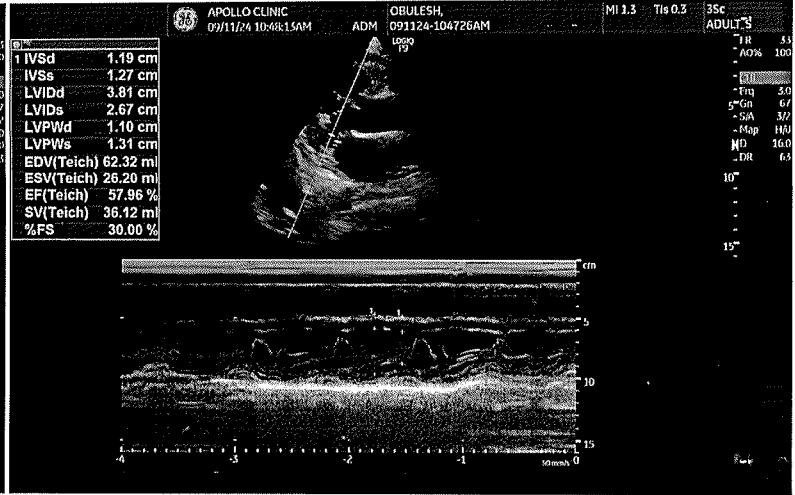
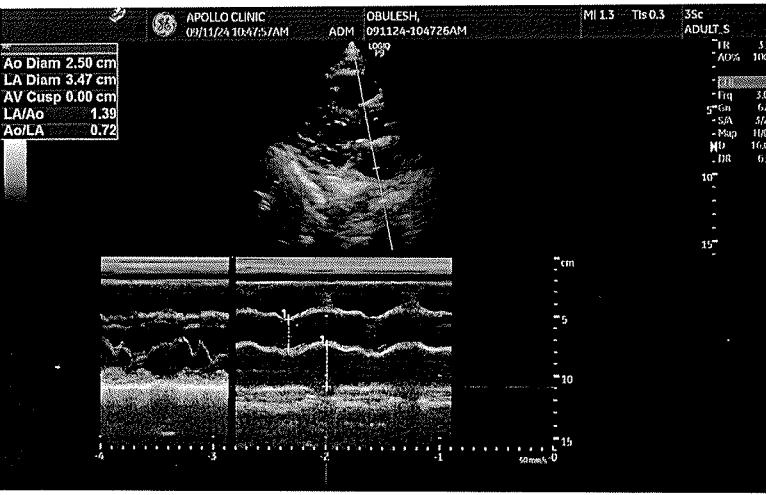
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





Apollo Clinic

CONSENT FORM

Patient Name: OBULESU SAKH Age: 34

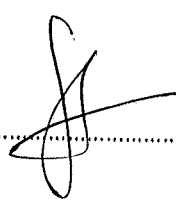
UHID Number: 173166 Company Name: Bank of Baroda

I Mr/Mrs/Ms Obuleen Saxe Employee of BoB

(Company) Want to inform you that I am ~~not~~ interested in getting the consultation on 9/11/24

Tests done which is a part of my routine health check package. f. optical pending

And I claim the above statement in my full consciousness.

Patient Signature:  Date: 9/11/24

Apollo Health and Lifestyle Limited

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Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

TO BOOK AN APPOINTMENT



Dear sake obulesu,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **INDIRANAGAR clinic** on **2024-11-09** at **08:45-09:00**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324]



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಸೇಕ್ ಓಬುಲೆಸು
Sake Obulesu
ಜನ್ಮ ದಿನಾಂಕ/DOB: 15/07/1990
ಪುರುಷ/ MALE

Download Date: 30/07/2021

Issue Date: 13/07/2021

3615 7814 7723

VID : 9156 4510 8195 2676

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು