

Fwd: Health Check up Booking Re Schedule Request(22E53826), Package Code-, Benefi...



From **Abhas Kumar**
To **fo.apollospectra@sheetlahospitals.com**
Date **Today 09:35 AM**

Regards.....

Abhas Kumar
House No.1867,
Scheme No. 114 Part 1,
Vijay Nagar,
Indore
PIN:452010
Madhya Pradesh
+91 9589405899

"Nothing is impossible, the word itself says 'I'm possible'!" - Audrey Hepburn

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>
Date: Mon, 3 Mar 2025 at 11:40 AM
Subject: Health Check up Booking Re Schedule Request(22E53826), Package Code-, Beneficiary Code-311230
To: <abhaskumar13@gmail.com>
Cc: <customercare@mediwheel.in>



Dear **MR. KUMAR ABHAS,**

Your Health Checkup has been successfully rescheduled with the following details.

Hospital Package Name : Mediwheel Full Body Annual Plus Above 50 Male
Patient Package Name : Mediwheel Full Body Health Checkup Male Above 40
Name of Diagnostic/Hospital : Apollo Spectra - Gurgaon
Address of Diagnostic/Hospital- : New Railway Rd, Near Dronoacharya Govt College
Booking Id : 22E53826
Appointment Date : 10-03-2025
Preferred Time : 08:00 AM - 08:30 AM
Booking Status : Booking ReSchedule

Member Information		
Booked Member Name	Age	Gender
MR. KUMAR ABHAS	52 year	Male

Thanks,
Mediwheel Team
Please Download Mediwheel App



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@ 2025 - 26, Arcofemi Healthcare Pvt Limited.(Mediwheel)



Name : Abhas Kumar

E.C. No. : 99635

जारीकर्ता प्राधिकारी

धारक के हस्ताक्षर

10.03.2025 9:54:04
APOLLO SPECTRA SHEETLA
HOSPITAL RAILWAY ROAD
Gurugram

QRS : 80 ms
QT / QTcBaz : 400 / 389 ms
PR : 164 ms
P : 120 ms
RR / PP : 1050 / 1052 ms
P / QRS / T : 59 / 23 / 28 degrees

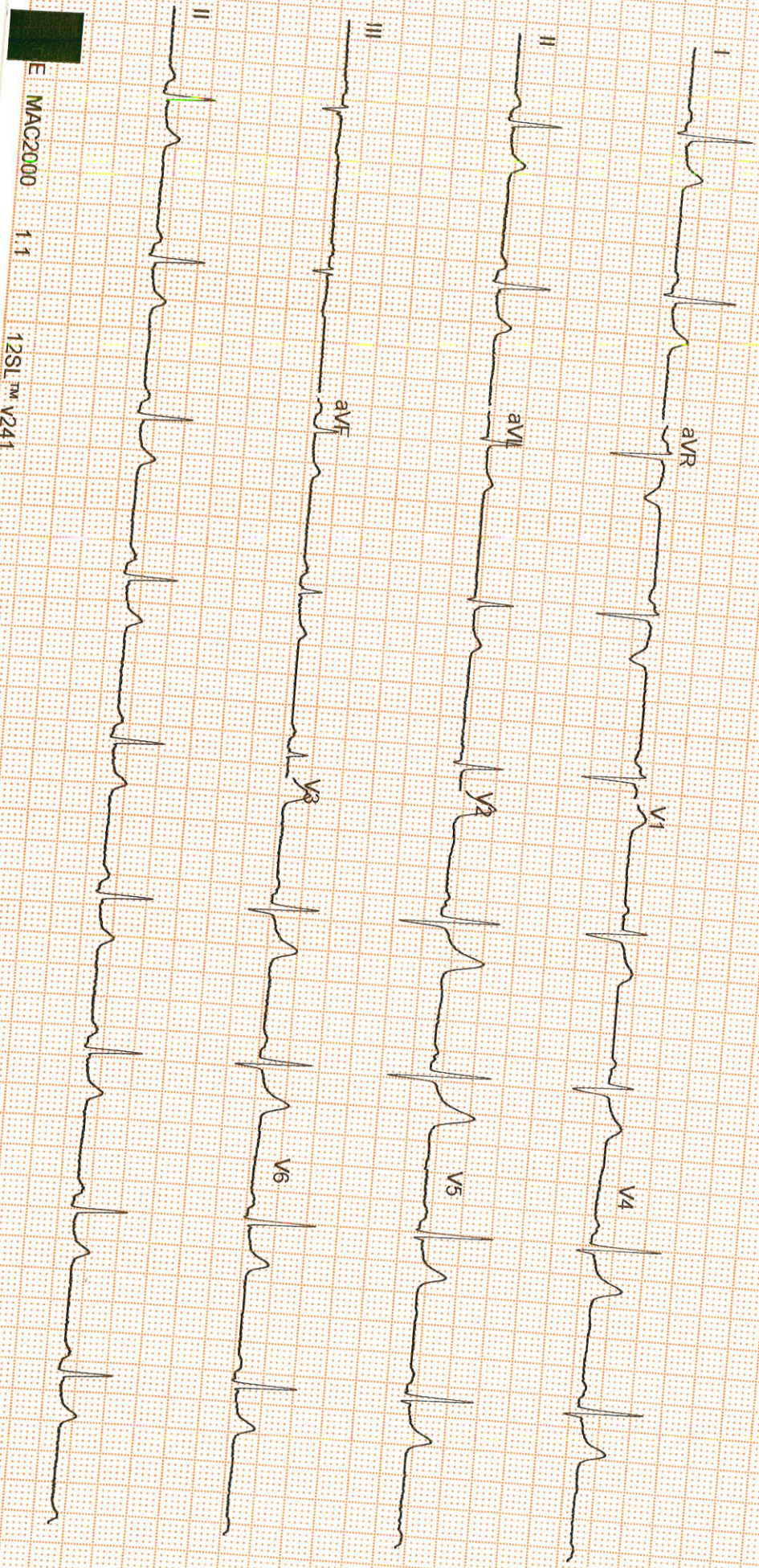
Sinus bradycardia
Otherwise normal ECG

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

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

57 bpm
- / - mmHg

MR. Abhay Kumar



MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-40 Hz 50.11

Unconfirmed

Patient Name : Mr. Abbas Inayat UHID : _____ Date : _____
 Age / Gender : 52/M Appointment . On : 10/8/15
 Doctor : Dr. Rakesh Bhatnagar Doc. Speciality : ENT
 Mobile No. : _____ Panel _____ Visit Type _____

VITAL SIGNS
 Weight : _____
 Temperature : _____
 Pulse : _____
 Resp : _____
 SPO2 : _____
 Drug allergy : _____

Chief Complaint : Pt came for ENT exam

Sign & Symptoms: ear
Blotchy
 Vaccination Status: ADP!
S-shape L DORS E
Blotchy

Provisional Diagnosis:

oral cavity was As
 Doctor Notes: NCEP-PNS (Axial + Coronal)
to ODIMONT fx
Steam Inhalation twice
N/S Cleonox-F
(nasal) 2mg twice
Review after 1 week
NCEP-PNS

10/8/15
 (Doctor Sign & Stamp)

Barcode No.	: SSH025613	Age / Sex	: 52 YRS / Male
Patient Name	: Mr. ABHAS KUMAR	Registration Date	: 10-Mar-2025 09:41 AM
IPD No.	:	Reporting Date	: 10-Mar-2025 01:09 PM
UHID	: SSH.0000025219	Approved Date	: 10-Mar-2025 01:09 PM

X- CHEST PA VIEW (ONE FILM)

Lung fields are normal.

Bilateral hilar shadows and bronchovascular markings are normal.

Trachea is central.

Bilateral cardiophrenic & costophrenic angles appears normal.

Cardiac size and shape is normal.

Both domes of diaphragm are normal.

Soft tissue and bony cage under view normal.

IMPRESSION :- NO SIGNIFICANT ABNORMALITY IS SEEN.
Please correlate clinically

DR. ROHIT AGGARWAL
M.D, RADIO-DIAGNOSIS
CONSULTANT RADIOLOGIST

*** End Of Report ***

Barcode No.	: SSH025613	Age / Sex	: 52 YRS / Male
Patient Name	: Mr. ABHAS KUMAR	Registration Date	: 10-Mar-2025 09:41 AM
IPD No.	:	Reporting Date	: 10-Mar-2025 10:44 AM
UHID	: SSH.0000025219	Approved Date	: 10-Mar-2025 10:44 AM

USG WHOLE ABDOMEN

Excessive bowel gases +

Liver is mildly enlarged in size measuring 16.2 cm and shows diffusely increased hepatic echogenicity obscuring periportal echogenicity but diaphragmatic echogenicity is still appreciable. No focal space occupying lesion is seen within liver parenchyma. Intrahepatic bile ducts not dilated.

Gall bladder is minimally distended. Common bile duct is not dilated.

Head and body of Pancreas is normal in size and contour. Echo-pattern is normal. No focal lesion is seen within the visualized pancreas. Tail of pancreas is obscured by the overlying bowel gases.

Spleen is normal size and shape. Echo-texture is normal. No focal lesion is seen.

Both Kidneys are normally sited and are of normal size and shape cortico-medullary echoes shows are normal differentiation. Renal parenchymal thickness is normal. No focal lesion is seen and Collecting system does not shows any dilatation or calculus.

Urinary Bladder does not show any calculus or mass lesion.

Prostate appears normal in size (24.3 cc) and shape.

No evidence of any free fluid seen in abdomen.

IMPRESSION :- Mild hepatomegaly with grade II fatty infiltration.
Please correlate clinically


DR. ROHIT AGGARWAL
M.D, RADIO-DIAGNOSIS
CONSULTANT RADIOLOGIST

*** End Of Report ***

ID : 9589405899

NAME : MR ABHAS KUMAR

AGE : 52

NIBP : ---/---(---)

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

Stage : Supine

Pre Test Time : 00:24

Stage Time : 00:24

HR : 72 (42%)

Protocol : BRUCE

Speed(Km/h) : 0.0

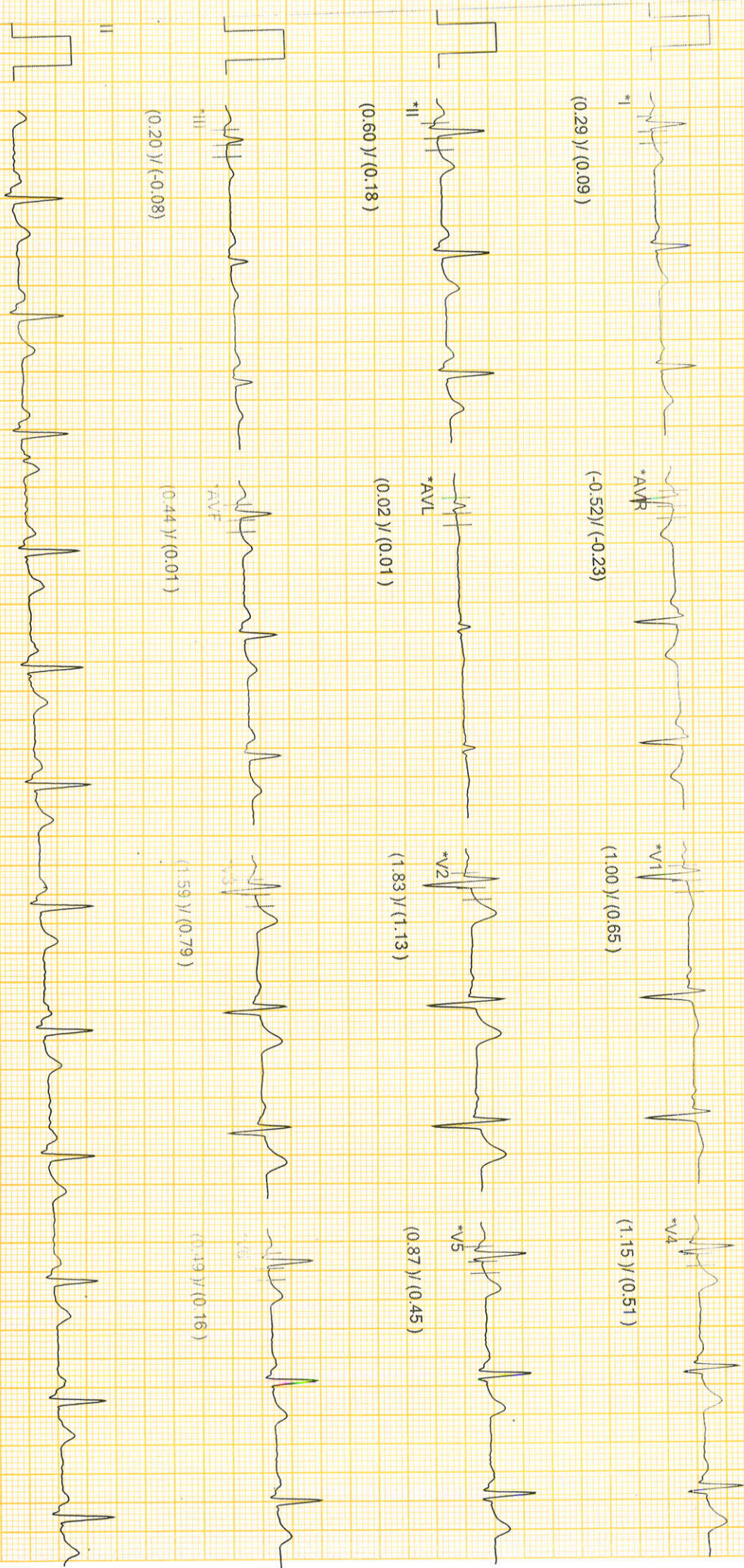
Grade(%) : 0.00

METS : 0.00

Doctor : Dr. ANURAG PASSI

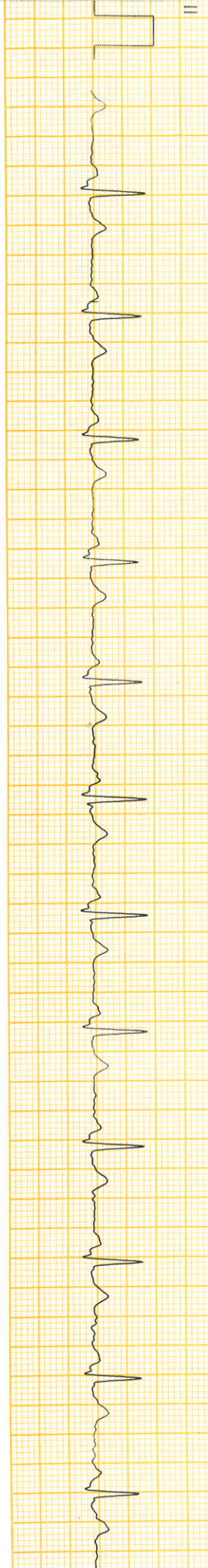
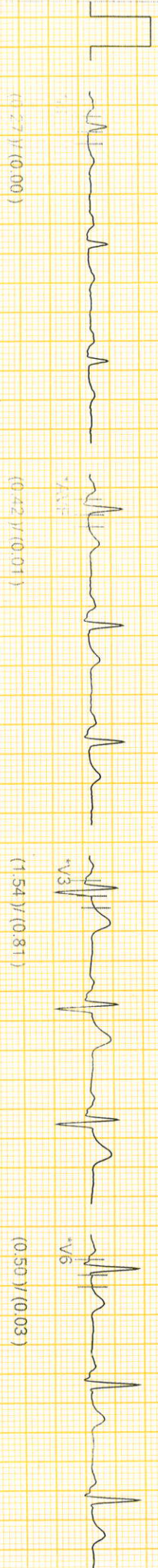
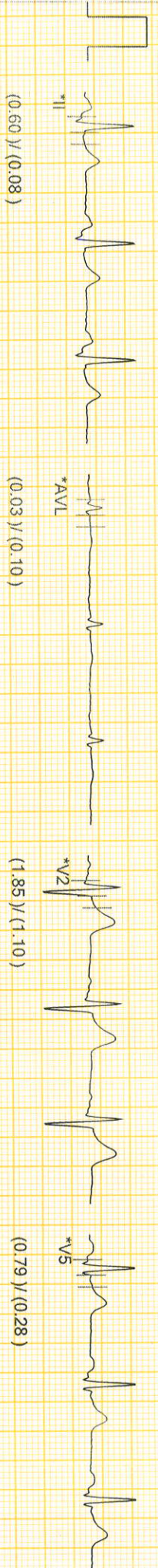
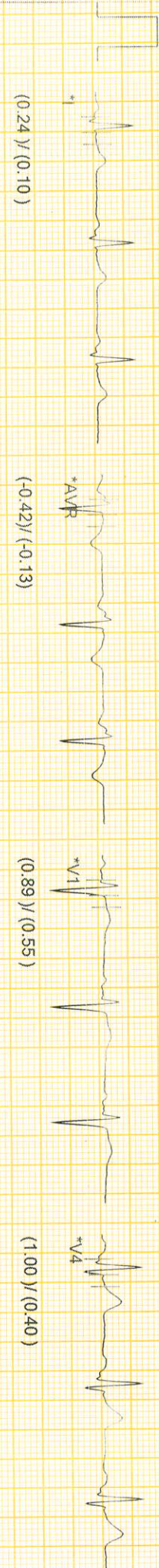
Tested on : 10/03/2025,12:27 PM

BPL DYNATRAC NEO



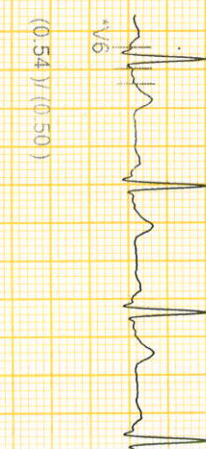
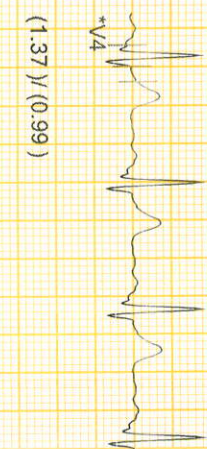
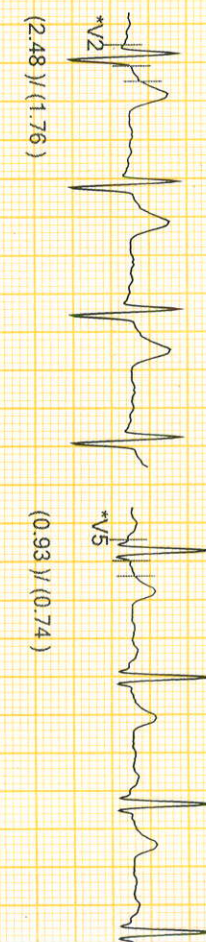
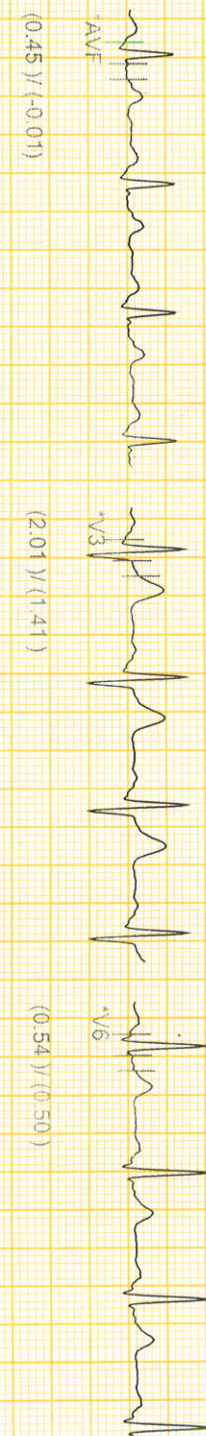
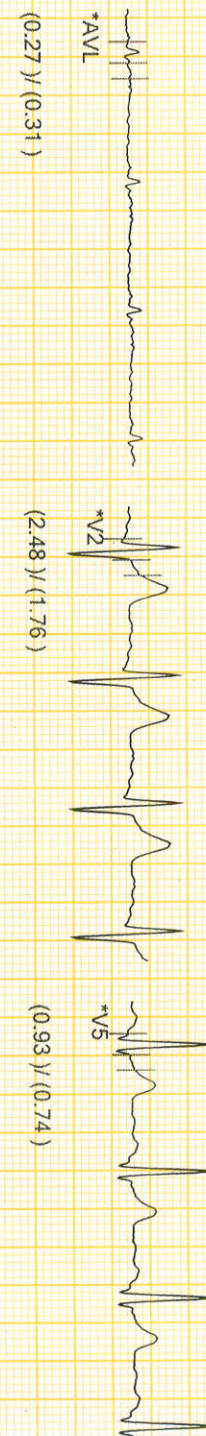
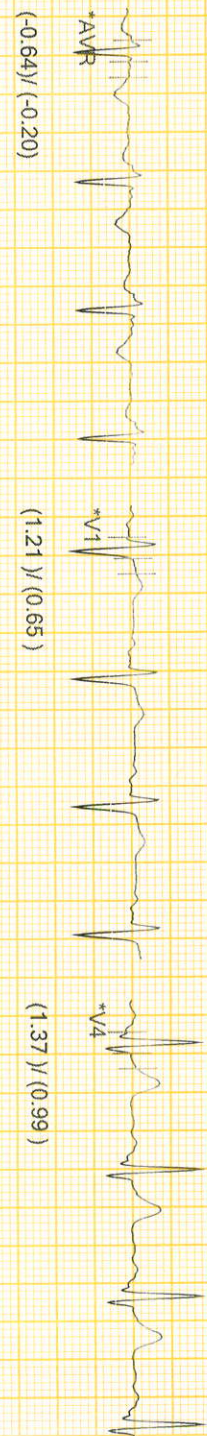
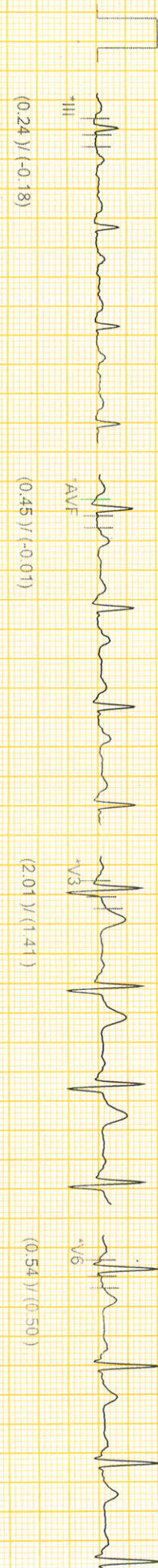
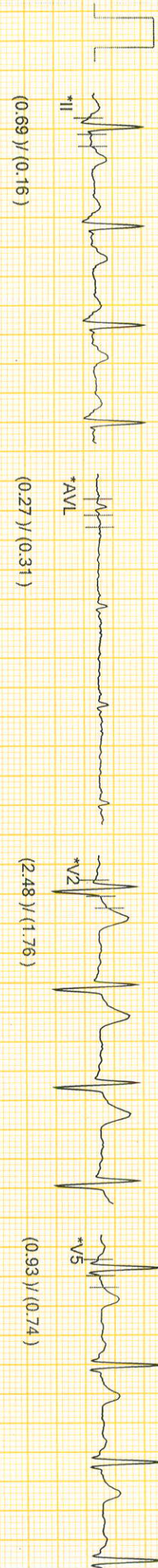
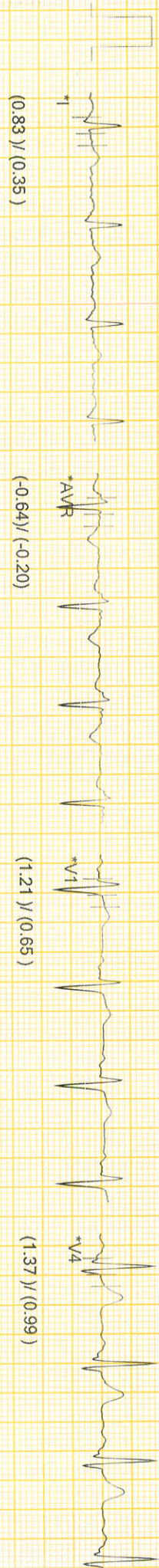
Phone: 01242875801,802

ID : 9589405899	Stage : Standing	Protocol : BRUCE
NAME : MR ABHAS KUMAR	Pre Test Time : 00:48	Speed(Km/h) : 0.0
AGE : 52	Stage Time : 00:24	Grade(%) : 0.00
NIBP : ---/---(---)	HR : 76 (45%)	METS : 0.00
ST Level(mm), ST Slope (mV/sec) at 80ms Pj		Doctor : Dr. ANURAG PASSI
		Tested on : 10/03/2025,12:27 PM
		BPL DYNATRAC NEO



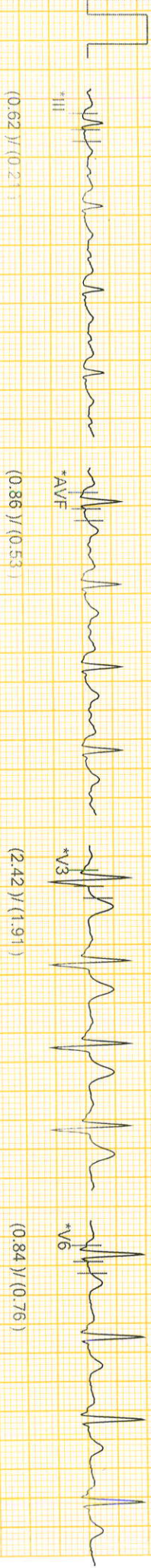
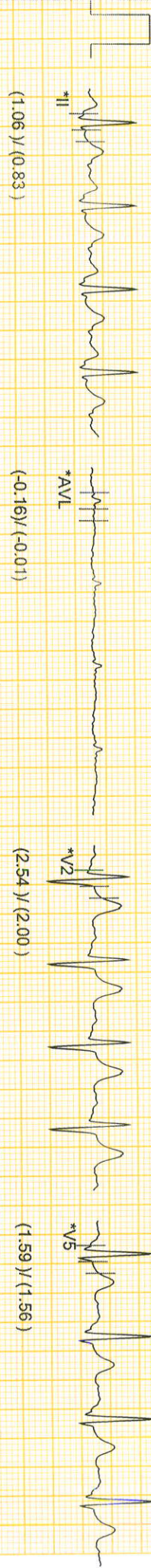
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ID : 9589405899	Stage : Exercise 1	Protocol : BRUCE	Doctor : Dr. ANURAG PASSI
NAME : MR ABHAS KUMAR	Exercise Time : 03:00	Speed(Km/h) : 2.7	Tested on : 10/03/2025,12:27 PM
AGE : 52	Stage Time : 03:00	Grade(%) : 10.00	BPL DYNATRAC NEO
NIBP : 120/80(93)	HR : 91 (54%)	METS : 5.10	
ST Level(mm), ST Slope (mV/sec) at 80ms PJ			



Phone: 01242875801,802

ID : 9589405899	Stage : Exercise 2	Protocol : BRUCE
NAME : MR ABHAS KUMAR	Exercise Time : 06:00	Speed(Km/h) : 4.0
AGE : 52	Stage Time : 03:00	Grade(%) : 12.00
NIBP : 130/90(103)	HR : 102 (60%)	METS : 7.10
ST Level(mm), ST Slope (mv/sec) at 80ms PJ		Doctor : Dr. ANURAG PASSI
		Tested on : 10/03/2025,12:27 PM
		BPL DYNATRAC NEO



*aVR

*V1

*V4

*aVL

*V2

*V5

*aVF

*V3

*V6

ID : 9589405899 Stage : **Exercise 3** Protocol : **BRUCE**
NAME : MR ABHAS KUMAR Exercise Time : **09:00** Speed(Km/h) : **5.5** Doctor : **DR. ANURAG PASSI**
AGE : 52 Stage Time : **03:00** Grade(%) : **14.00** Tested on : **10/03/2025,12:27 PM**
NIBP : 140/100(113) HR : **120 (71%)** METS : **10.00** **BPL DYNATRAC NEO**
 ST Level(mm), ST Slope (mV/sec) at 60ms PJ



* Waveforms are computer synthesized. Technician: 20Hz Filter Gain: 10mm/mV Speed: 25mm/sec

Phone: 01242875801,802

ID : 9589405899	Stage : Peak Exercise 4	Protocol : BRUCE
NAME : MR ABHAS KUMAR	Exercise Time : 09:11	Speed (Km/h) : 6.8
AGE : 52	Stage Time : 00:11	Grade(%) : 16.00
NIBP : ---/---(---)	HR : 127 (75%)	METS : 10.60
ST Level(mm), ST Slope (mV/sec) at 60ms PJ		Tested on : 10/03/2025,12:27 PM
		BPL DYNATRAC NEO



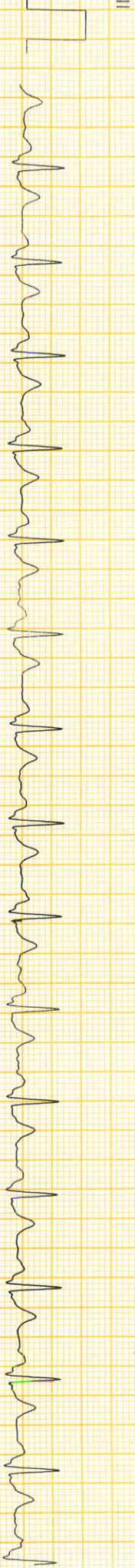
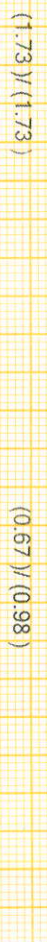
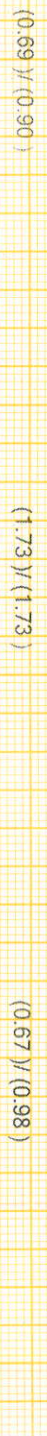
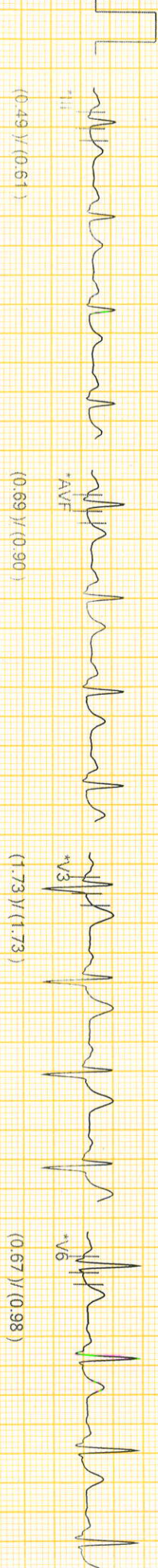
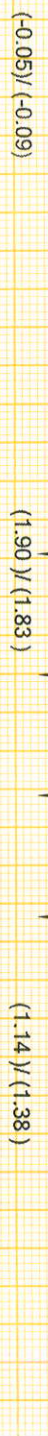
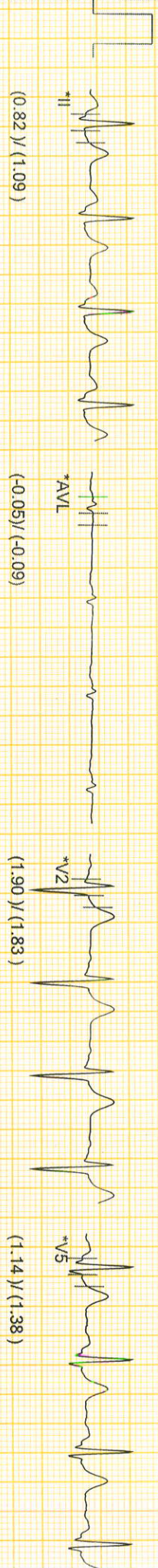
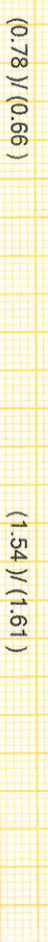
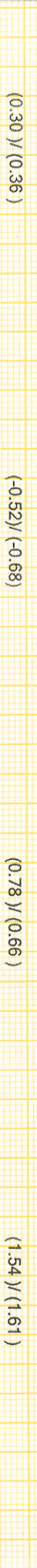
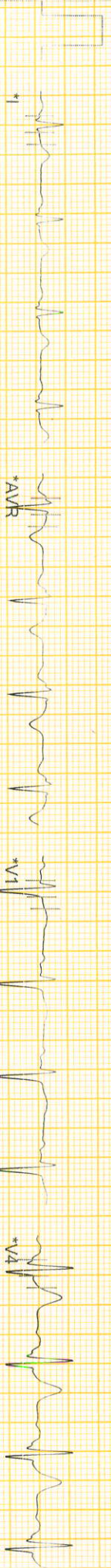
Phone: 01242875801,802

ID : 9589405899	Stage : Recovery 1	Protocol : BRUCE	Doctor : Dr. ANURAG PASSI
NAME : MR ABHAS KUMAR	Recovery Time : 01:00	Speed (Km/h) : 0.0	Tested on : 10/03/2025, 12:27 PM
AGE : 52	Stage Time : 01:00	Grade (%) : 0.00	
NIBP : 130/90(103)	HR : 109 (64%)	METS : 0.00	BPL DYNATRAC NEO
ST Level(mm), ST Slope (mV/sec) at 80ms PJ			



Phone: 01242875801,802

ID : 9589405899	Stage : Recovery 2	Protocol : BRUCE	Doctor : Dr. ANURAG PASSI
NAME : MR ABHAS KUMAR	Recovery Time : 02:00	Speed(Km/h) : 0.0	Tested on : 10/03/2025,12:27 PM
AGE : 52	Stage Time : 01:00	Grade(%) : 0.00	
NIBP : 120/80(93)	HR : 96 (57%)	METS : 0.00	BPL DYNATRAC NEO
ST Level(mm), ST Slope (mV/sec) at 80ms PJ			



Summary Report

APOLLO SPECTRA SHEETLA HOSPITAL

Phone: 01242875801,802

Name : **MR ABHAS KUMAR**

Doctor : **Dr. ANURAG PASSI**

ID : **9589405899**

Tested on : **10/03/2025,12:27 PM**

Age,Wt,Ht : **52years(Male), Kg,167cm**

BPL DYNATRAC NEO

Test Summary Report

Target HR = 168

Total time = 12:25

Protocol - BRUCE

HR achieved = 127 (75%)

Excercise time = 09:11

Max ST(mm)=3.04(Lead V2)

Peak Ex = Exercise 4

Recovery time = 02:02

Min ST(mm)=-1.18(Lead AVR)

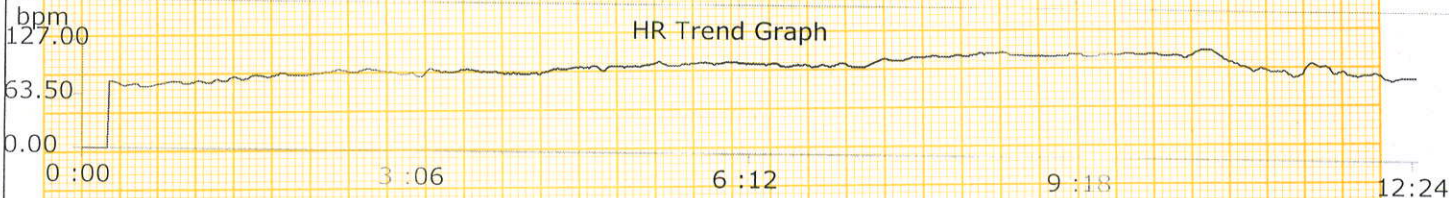
Stagewise Summary

Stage Name	Duration (mm:ss)	Max HR	Max ST (mm)	Min ST (mm)	Speed km/hr	Slope (%)	METS	sys/dia (map)
Supine	00:24	76	3.04(V2)	-1.18(AVR)	0.0	0.0	0.00	---/---(---)
Standing	00:24	76	2.19(V2)	-0.59(AVR)	0.0	0.0	0.00	---/---(---)
Waiting for Exercise	00:24	78	2.17(V2)	-0.62(AVR)	0.0	0.0	0.00	---/---(---)
Exercise 1	03:00	95	2.48(V2)	-1.18(AVR)	2.7	10.0	5.10	120/80(93)
Exercise 2	03:00	106	2.86(V2)	-1.11(AVR)	4.0	12.0	7.10	130/90(103)
Exercise 3	03:00	122	2.82(V2)	-0.97(AVR)	5.5	14.0	10.00	140/100(113)
Peak Exercise 4	00:11	127	2.70(V2)	-0.93(AVR)	6.8	16.0	10.60	---/---(---)
Recovery 1	01:00	127	3.04(V2)	-1.06(AVR)	0.0	0.0	0.00	130/90(103)
Recovery 2	01:00	113	2.25(V2)	-0.68(AVR)	0.0	0.0	0.00	120/80(93)
Recovery 3	00:02	96	1.81(V2)	-0.63(AVR)	0.0	0.0	0.00	---/---(---)

Rpp: 11400(Exercise 1) ,13780(Exercise 2) ,17080(Exercise 3) ,16510(Recovery 1) ,13560(Recovery 2)

Stage comments: none

Object of test : Routine Checkup
 Risk factor : None
 Activity : Inactive
 Other Investigation : X-RAY
 Ex tolerance : Good (> 10 mets)
 Ex Arrhythmia : Yes
 Hemo Response : Normal
 Chrono response : Normal
 Reson for Termination : Maximum HR



Medication:

History:

Observations:

Final Impression: NEGATIVE FOR RMI

Technician: Done By:Dr. ANURAG PASSI Confirmed by -

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:45AM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

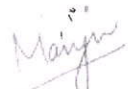
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.4	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	44.20	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.01	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	88.3	fL	83-101	Calculated
MCH	28.8	pg	27-32	Calculated
MCHC	32.6	g/dL	31.5-34.5	Calculated
R.D.W	15.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,160	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	62.1	%	40-80	Electrical Impedance
LYMPHOCYTES	29.7	%	20-40	Electrical Impedance
EOSINOPHILS	2.9	%	1-6	Electrical Impedance
MONOCYTES	4.3	%	2-10	Electrical Impedance
BASOPHILS	1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4446.36	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2126.52	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	207.64	Cells/cu.mm	20-500	Calculated
MONOCYTES	307.88	Cells/cu.mm	200-1000	Calculated
BASOPHILS	71.6	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.09		0.78- 3.53	Calculated
PLATELET COUNT	263000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
MPV	10.2	fL	8.1-13.9	Calculated
ERYTHROCYTE SEDIMENTATION RATE (ESR)	30	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

RBCs: Mild anisocytosis with predominantly normocytic normochromic cells. Rbc count is within normal limits.

WBCs: Total leucocyte count and absolute counts are within normal limits.

Page 1 of 13


Dr. Manju Kumari
M.B.B.S, M.D (Pathology)
Consultant Pathologist.

SIN No: HE00007278



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:45AM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Platelets: Adequate in number and distribution. Morphology is within normal limits.

No atypical cell/hemoparasite seen in the smears examined.

Impression: Essentially normal smear.

Kindly correlate clinically.

Page 2 of 13



Dr.Manju Kumari
M.B.B.S,M.D(Pathology)
Consultant Pathologist.

SIN No:HE00007278



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

Comment:

1. This tests determines ABO & Rh blood groups (testing for other blood group systems not performed) through immunological reaction between RBC antigen & antibody.
2. ABO system also has Subgroups of A, B and rare phenotype as Bombay blood group which requires further testing and required recommendations as per the case will be provided.
3. Rh system in certain individual can have weak or partial Rh D expression which can result in weaker agglutination reactions and hence all Rh D Negative groups need to be further cross verified using Rh Du testing.
4. In case of Newborn - Only forward typing is performed, reverse typing is not performed, since the antibodies are not fully formed. Hence it is recommended to re-test blood grouping after 6 months.
5. In certain cases History of Recent blood transfusion (within 3-4mths), of bone marrow transplantation, certain drugs (especially monoclonal antibody) & certain malignancies may interfere with interpretation of blood grouping.
6. It is always recommended for reconfirmation of the Blood Group along with cross matching before blood transfusion.

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Dr. Manju Kumari
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SIN No: HE00007278



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 02:05PM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 02:54PM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 03:32PM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	111	mg/dL	70-100	GOD - POD

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)	96	mg/dL	70-140	GOD - POD

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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Dr.Manju Kumari
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SIN No:BO00012939



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 11:33AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 01:14PM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	143	mg/dL		Calculated

Kindly correlate clinically

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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - HbF >25%
 - Homozygous Hemoglobinopathy.
(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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SIN No:BO00012940

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:18AM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	176	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	164	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	34	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	142	mg/dL	<130	Calculated
LDL CHOLESTEROL	109.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	32.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.18		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.32		<0.11	Calculated

Kindly correlate clinically

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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SIN No:BO00012937

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:18AM
Visit ID ₁	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dL	0-1.2	Diazo Dye Formation - reflectance spectrophotometr
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	49.0	U/L	8-38	JSCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.5		<1.15	Calculated
ALKALINE PHOSPHATASE	102.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.30	g/dL	6.3-8.2	BIURET
ALBUMIN	4.70	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.81		0.9-2.0	Calculated

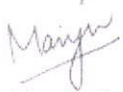
Kindly correlate clinically

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:

- 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, Wilson's diseases, Cirrhosis, but the increase is usually not >2. Note- If both SGPT and SGOT are within reference range then AST:ALT (De Ritis ratio) does not have any clinical significance.
- Cholestatic Pattern:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin (Direct) and GGT elevated- helps to establish hepatic origin.
- Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

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Dr. Manju Kumari
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SIN No:BO00012937



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:18AM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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

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Dr. Manju Kumari
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SIN No: BO00012937



Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 10:23AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 11:18AM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.68	mg/dL	0.5-1.04	Creatinine amidohydrolase
eGFR - ESTIMATED GLOMERULAR FILTRATION RATE	109.80	mL/min/1.73m ²	>60	CKD-EPI FORMULA
UREA	19.00	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	8.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.70	mg/dL	3.5-8.5	URICASE
CALCIUM	9.20	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.70	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	5.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	100	mmol/L	98-107	Direct ISE
PROTEIN, TOTAL	7.30	g/dL	6.3-8.2	BIURET
ALBUMIN	4.70	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.81		0.9-2.0	Calculated

Kindly correlate clinically



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SIN No:BO00012937

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 11:33AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 01:19PM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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)	113.6	ng/dL	87-178	CLIA
THYROXINE (T4, TOTAL)	9.62	µg/dL	5.48-14.28	
THYROID STIMULATING HORMONE (TSH)	7.145	µIU/mL	0.38-5.33	CLIA

Kindly correlate clinically

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

1. 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.
2. 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.
3. 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.
4. 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 Treatment.
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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

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SIN No:IL00001406

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 10:15AM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 11:33AM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 12:47PM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	1.000	ng/mL	0-4	CLIA



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Consultant Pathologist.

SIN No:IL00001406

Patient Name	: Mr.ABHAS KUMAR	Collected	: 10/Mar/2025 12:30PM
Age/Gender	: 52 Y 0 M 0 D/M	Received	: 10/Mar/2025 12:49PM
UHID/MR No	: SSH.0000025219	Reported	: 10/Mar/2025 01:52PM
Visit ID	: SSH118172	Status	: Final Report
Ref Doctor	: Dr.Dr.CASUALTY MEDICAL OFFICERS	Client Name	: HLM SHEETLA HOSPITAL
IP/OP NO	:	Center location	: Gurgaon,GURGAON

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.5		5-7.5	Double Indicator
SP. GRAVITY	1.020		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	Protein Error Of Indicator
GLUCOSE	NEGATIVE		NEGATIVE	Glucose Oxidase
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Azo Coupling Reaction
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium Nitro Prusside
UROBILINOGEN	Normal		NORMAL	Modified Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy
OTHERS	NIL			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.

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Dr.Manju Kumari
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SIN No:P00003366



Patient Name : Mr.ABHAS KUMAR
Age/Gender : 52 Y 0 M 0 D/M
UHID/MR No : SSH.0000025219
Visit ID : SSH118172
Ref Doctor : Dr.Dr.CASUALTY MEDICAL OFFICERS
IP/OP NO :
Collected : 10/Mar/2025 12:30PM
Received : 10/Mar/2025 12:49PM
Reported : 10/Mar/2025 01:52PM
Status : Final Report
Client Name : HLM SHEETLA HOSPITAL
Center location : Gurgaon,GURGAON

DEPARTMENT OF CLINICAL PATHOLOGY

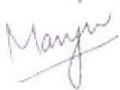
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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

*** End Of Report ***

Result/s to Follow:
GAMMA GLUTAMYL TRANSFERASE (GGT)

Page 13 of 13



Dr. Manju Kumari
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SIN No: P00003366



Patient Name : Mr.ABHAS KUMAR
 Age/Gender : 52 Y 0 M 0 D/M
 UHID/MR No : SSH.0000025219
 Visit ID : SSH118172
 Ref Doctor : Dr.Dr.CASUALTY MEDICAL OFFICERS
 IP/OP NO :

Collected : 10/Mar/2025 10:15AM
 Received : 10/Mar/2025 05:26PM
 Reported : 10/Mar/2025 06:09PM
 Status : Final Report
 Client Name : HLM SHEETLA HOSPITAL
 Center location : Gurgaon,GURGAON

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	33.60	U/L	10-71	IFCC

*** End Of Report ***



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 Consultant Pathologist

SIN No:BI24655389