

Patient Name : Mr.RAMANA REDDY THATIPARTHI  
 Age/Gender : 44 Y 6 M 12 D/M  
 UHID/MR No : CMAR.0000369565  
 Visit ID : CMAROPV914090  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22E50324

Collected : 06/Feb/2025 08:23AM  
 Received : 06/Feb/2025 10:42AM  
 Reported : 06/Feb/2025 11:35AM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	14.8	g/dL	13-17	Spectrophotometer
PCV	43.70	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.28	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	<b>82.7</b>	fL	83-101	Calculated
MCH	28	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,550	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYtic COUNT (DLC)</b>				
NEUTROPHILS	60.6	%	40-80	Electrical Impedance
LYMPHOCYTES	30.5	%	20-40	Electrical Impedance
EOSINOPHILS	1.1	%	1-6	Electrical Impedance
MONOCYTES	7	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	0-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3969.3	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1997.75	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	72.05	Cells/cu.mm	20-500	Calculated
MONOCYTES	458.5	Cells/cu.mm	200-1000	Calculated
BASOPHILS	52.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.99		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	183000	cells/cu.mm	150000-410000	Electrical impedance
MPV	10.5	fL	8.1-13.9	Calculated
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	2	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

RBCs: Are normocytic normochromic

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



Dr. Sumanlata Sahu  
 M.B.B.S.,M.D(Pathology)  
 Consultant Pathologist



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
 SIN No: CHL250201010

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
 Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |  
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APOLLO CLINICS NETWORK

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PLATELETS: Appear adequate in number.

HEMOPARASITES: Negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**

Kindly correlate clinically.



Dr. Sumanlata Sahu  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



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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
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Patient Name : Mr.RAMANA REDDY THATIPARTHI	Collected : 06/Feb/2025 10:50AM
Age/Gender : 44 Y 6 M 12 D/M	Received : 06/Feb/2025 12:26PM
UHID/MR No : CMAR.0000369565	Reported : 06/Feb/2025 02:25PM
Visit ID : CMAROPV914090	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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	94	mg/dL	70-110	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)	67	mg/dL	70-140	Hexokinase

Result is rechecked. Kindly correlate clinically

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.



Dr.Nisha  
M.B.B.S,MD(Pathology)  
Consultant Pathologist



SIN No: CHI 250201063  
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Age/Gender	: 44 Y 6 M 12 D/M	Received	: 06/Feb/2025 12:06PM
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Visit ID	: CMAROPV914090	Status	: Final Report
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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
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	<b>6</b>	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	126	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)



**Dr. Nisha**  
M.B.B.S,MD(Pathology)  
Consultant Pathologist



SIN No: CHI 250201012  
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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	<b>208</b>	mg/dL	0-199	CHE/CHO/POD
TRIGLYCERIDES	<b>198</b>	mg/dL	60-145	Glycerol Phosphate Oxidase/peroxidase
HDL CHOLESTEROL	<b>34</b>	mg/dL	35-80	Selective Inhibition
NON-HDL CHOLESTEROL	<b>174</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>133.92</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>39.63</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	<b>6.11</b>		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	<b>0.41</b>		<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

  
**Dr. Sumanlata Sahu**  
 M.B.B.S.,M.D(Pathology)  
 Consultant Pathologist



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<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.39	mg/dl	0.2-1.2	Diazotized Sulfanilic
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	0-0.4	Diazotized Sulfanilic
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	18.05	U/L	0-49	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.3	U/L	0-46	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.9		<1.15	Calculated
ALKALINE PHOSPHATASE	81.13	U/L	35-104	IFCC (Kinetic)
PROTEIN, TOTAL	6.48	g/dL	5.7-8.0	Biuret
ALBUMIN	4.39	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.09	g/dL	2.0-3.5	Calculated
A/G RATIO	2.1		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, Wilson's'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.
2. Cholestatic Pattern:\*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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<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.75	mg/dL	0.62-1.17	
eGFR - ESTIMATED GLOMERULAR FILTRATION RATE	111.15	mL/min/1.73m <sup>2</sup>	>60	CKD-EPI FORMULA
UREA	15.45	mg/dL	10-50	Urease
BLOOD UREA NITROGEN	7.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.45	mg/dL	3.5-7.2	Uricase
CALCIUM	9.33	mg/dL	8.8-10.2	Arsenazo III
PHOSPHORUS, INORGANIC	2.79	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.8	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103.5	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	6.48	g/dL	5.7-8.0	Biuret
ALBUMIN	4.39	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.09	g/dL	2.0-3.5	Calculated
A/G RATIO	2.1		0.9-2.0	Calculated



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Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

Address:  
 323/100/123, Doddathangur Village, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034





Patient Name : Mr.RAMANA REDDY THATIPARTHI  
 Age/Gender : 44 Y 6 M 12 D/M  
 UHID/MR No : CMAR.0000369565  
 Visit ID : CMAROPV914090  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22E50324

Collected : 06/Feb/2025 08:23AM  
 Received : 06/Feb/2025 11:02AM  
 Reported : 06/Feb/2025 12:46PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	23.95	U/L	10-45	Szasz



Dr. Sumanlata Sahu  
 M.B.B.S.,M.D(Pathology)  
 Consultant Pathologist



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
 SIN No: CHL250201008

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
 Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |  
 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

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Address:  
 323/100/123, Doddathangur Village, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034



Patient Name : Mr.RAMANA REDDY THATIPARTHI	Collected : 06/Feb/2025 08:23AM
Age/Gender : 44 Y 6 M 12 D/M	Received : 06/Feb/2025 12:06PM
UHID/MR No : CMAR.0000369565	Reported : 06/Feb/2025 01:07PM
Visit ID : CMAROPV914090	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E50324	

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
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-iodothyronine (T3, TOTAL)	1.45	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	11.28	µg/dL	5.48-14.28	
THYROID STIMULATING HORMONE (TSH)	2.934	µIU/mL	0.38-5.33	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 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



Dr. Nisha  
M.B.B.S,MD(Pathology)  
Consultant Pathologist



SIN No: CHI 250201009  
THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
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APOLLO CLINICS NETWORK

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Address:  
323/100/123, Doddathangur Village, Neeladri Main Road,  
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Karnataka- 560034



Patient Name : Mr.RAMANA REDDY THATIPARTHI  
 Age/Gender : 44 Y 6 M 12 D/M  
 UHID/MR No : CMAR.0000369565  
 Visit ID : CMAROPV914090  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22E50324

Collected : 06/Feb/2025 08:23AM  
 Received : 06/Feb/2025 03:46PM  
 Reported : 06/Feb/2025 04:33PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	0.440	ng/mL	0-4	CLIA



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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
 SIN No:1M09130788

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
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 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:  
 323/100/123, Doddathangur Village, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034

 **1860 500 7788**  
[www.apolloclinic.com](http://www.apolloclinic.com)

**APOLLO CLINICS NETWORK**  
 Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

Patient Name : Mr.RAMANA REDDY THATIPARTHI	Collected : 06/Feb/2025 08:23AM
Age/Gender : 44 Y 6 M 12 D/M	Received : 06/Feb/2025 11:35AM
UHID/MR No : CMAR.0000369565	Reported : 06/Feb/2025 12:30PM
Visit ID : CMAROPV914090	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E50324	


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
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	5.0		5-7.5	Double Indicator
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/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.

  
**Dr. Sumanlata Sahu**  
 M.B.B.S.,M.D(Pathology)  
 Consultant Pathologist



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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Patient Name : Mr.RAMANA REDDY THATIPARTHI  
 Age/Gender : 44 Y 6 M 12 D/M  
 UHID/MR No : CMAR.0000369565  
 Visit ID : CMAROPV914090  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22E50324

Collected : 06/Feb/2025 08:23AM  
 Received : 06/Feb/2025 11:35AM  
 Reported : 06/Feb/2025 12:30PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**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(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD

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

\*\*\* End Of Report \*\*\*



**Dr. Sumanlata Sahu**  
**M.B.B.S.,M.D(Pathology)**  
**Consultant Pathologist**



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

SIN No: CHL250201013

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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

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 Karnataka- 560034




Patient Name : Mr.RAMANA REDDY THATIPARTHI  
Age/Gender : 44 Y 6 M 12 D/M  
UHID/MR No : CMAR.0000369565  
Visit ID : CMAROPV914090  
Ref Doctor : Self  
Emp/Auth/TPA ID : 22E50324

Collected : 06/Feb/2025 08:23AM  
Received : 06/Feb/2025 11:35AM  
Reported : 06/Feb/2025 12:30PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### 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. Sumanlata Sahu**  
**M.B.B.S., M.D (Pathology)**  
**Consultant Pathologist**



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE  
SIN No: CHL250201013

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
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Address:  
323/100/123, Doddathangur Village, Neeladri Main Road,  
Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka- 560034



---

Patient Name	: Mr. RAMANA REDDY THATIPARTHI	Age	: 44Yrs 6Mths 13Days
UHID	: CMAR.0000369565	OP Visit No.	: CMAROPV914090
Printed On	: 06-02-2025 09:19 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E50324		

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## DEPARTMENT OF RADIOLOGY

---

### ULTRASOUND - WHOLE ABDOMEN MALE

**LIVER:** Appears normal in size (13.3cm), shape and **shows diffuse increase in echopattern**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

**GALLBLADDER:** Partially distended.No definite calculi identified in this state of distension . No evidence of abnormal wall thickening noted.

**SPLEEN:** Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

**PANCREAS:** Head and body appears normal. Rest obscured by bowel gas.

**KIDNEYS:** Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 10.1cm and parenchymal thickness measures 1.3cm.

Left kidney measures 9.7 cm and parenchymal thickness measures 1.5 cm.

**URINARY BLADDER:** Partially distended and appears normal. No evidence of abnormal wall thickening noted.

**PROSTATE:** Prostate is normal in size and echo-pattern. It measures 2.6 X 4.2 X 3.3 cm. vol - 19.9 cc

No free fluid or lymphadenopathy is seen.

---

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Visualized bowel loops appears normal.

**IMPRESSION:**

**GRADE I FATTY INFILTRATION OF LIVER.**

NO OTHER SIGNIFICANT ABNORMALITY DETECTED.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose
3. please note: non obstructing ureteric calculi; small renal/ ureteric calculi may not always be detected on USG; a CT KUB is advised if symptoms persist .
4. Printing mistakes should immediately be brought to notice for correction.
5. This is USG Abdomen screening.

---End Of The Report---



Dr. NAVEEN KUMAR K  
MBBS, DMRD, DNB Radiology  
85518  
Radiology



Patient Name	: Mr. RAMANA REDDY THATIPARTHI	Age	: 44Yrs 6Mths 13Days
UHID	: CMAR.0000369565	OP Visit No.	: CMAROPV914090
Printed On	: 08-02-2025 07:32 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E50324		

## DEPARTMENT OF CARDIOLOGY

### 2D ECHO& COLOUR DOPPLER

DIMENSIONS		VALUES	VALUES(RANGE)	DIMENSIONS		VALUES	VALUES(RANGE)
AO(ed)	32mm	25 - 37 mm	IVS(ed)	10mm	06 - 11 mm		
LA(es)	31mm	19 - 40 mm	LVPW(ed)	10mm	06 - 11 mm		
RVID(ed)	17mm	07 - 21 mm	EF	60 %	(50 - 70 %)		
LVID(ed)	43mm	35 - 55 mm	%FD	30%	(25 - 40%)		
LVID(es)	25mm	24 - 42 mm					

### MORPHOLOGICAL DATA

Situs	Solitus
Cardiac position	Levocardia
Systemic veins	Normal
Pulmonary veins	Normal
Mitral valve	Normal
Aortic Valve	Normal
Tricuspid Valve	Normal
Pulmonary Valve	Normal
Right Ventricle	Normal
Left Ventricle	Normal
Interatrial Septum	Intact
Interventricular Septum	Intact
Pulmonary Artery	Normal
Aorta	Normal
Right Atrium	Normal
Left Atrium	Normal

---

LV – RWMA	No RWMA at rest.
LV – FUNCTION	Normal systolic function
Pericardium	Normal Study
Doppler Studies	Normal
Doppler Summary	Normal
Rhythm	Sinus
	Normal cardiac chambers
	Normal valves
	Normal LV Systolic function
IMPRESSION	No pulmonary hypertension
	No RWMA at rest
	Normal pericardium,
	No intracardiac masses / thrombi

---End Of The Report---



Dr.KAPIL RANGAN  
MBBS,MD,DM (CARDIOLOGY)  
KMC NO.88625  
Cardiology

Patient Name	: Mr. RAMANA REDDY THATIPARTHI	Age	: 44Yrs 6Mths 13Days
UHID	: CMAR.0000369565	OP Visit No.	: CMAROPV914090
Printed On	: 06-02-2025 11:18 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E50324		

---

**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.NAVEEN KUMAR K**  
MBBS, DMRD, DNB Radiology  
85518  
Radiology

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Ramana Reddy on 6/2/25

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> <li>• Currently Unfit. Review after _____ recommended</li> </ul>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	

Dr.   
Medical Officer

*This certificate is not meant for medico-legal purposes*

Name : Mr. RAMANA REDDY THATIPARTHI

Age : 44Y 6M 12D

UHID : CMAR.0000369565

Address : Whitefield Bangalore Karnataka INDIA 560066

sex : Male



CMAR.0000369565

Plan : ARCOFEMI MEDIWHEEL MALE AHC  
CREDIT PAN INDIA OP AGREEMENT

OP No: CMAROPV914090

Bill No: CMAR-OCR-140880

Date: Feb 6th, 2025, 8:08 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
1	DENTAL CONSULTATION	Consultation	<input type="checkbox"/>
2	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	Biochemistry	<input type="checkbox"/>
3	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
4	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
5	ULTRASOUND - WHOLE ABDOMEN	Ultrasound Radiology	<input type="checkbox"/>
6	OPHTHAL BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
7	ENT CONSULTATION	Consultation	<input type="checkbox"/>
8	DIET CONSULTATION	Consultation	<input type="checkbox"/>
9	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
10	2 D ECHO	Cardiology	<input type="checkbox"/>
11	X-RAY CHEST PA - 5	X Ray Radiology	<input type="checkbox"/>
12	ECG - 7	Cardiology	<input type="checkbox"/>
13	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
14	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
15	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
16	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
17	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
18	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
19	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	URINE GLUCOSE (POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
22	URINE GLUCOSE (FASTING)	Clinical Pathology	<input type="checkbox"/>
23	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) After BIF 2h	Biochemistry	<input type="checkbox"/>
24	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>

wt - 63.8 kgs

Ht - 168 cms.

BP - 128/78 mmHg

PR - 68 bpm

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

06.02.2025 8:34:01  
APOLLO MEDICAL CENTRE  
KUNDALAHALLI  
BANGALORE

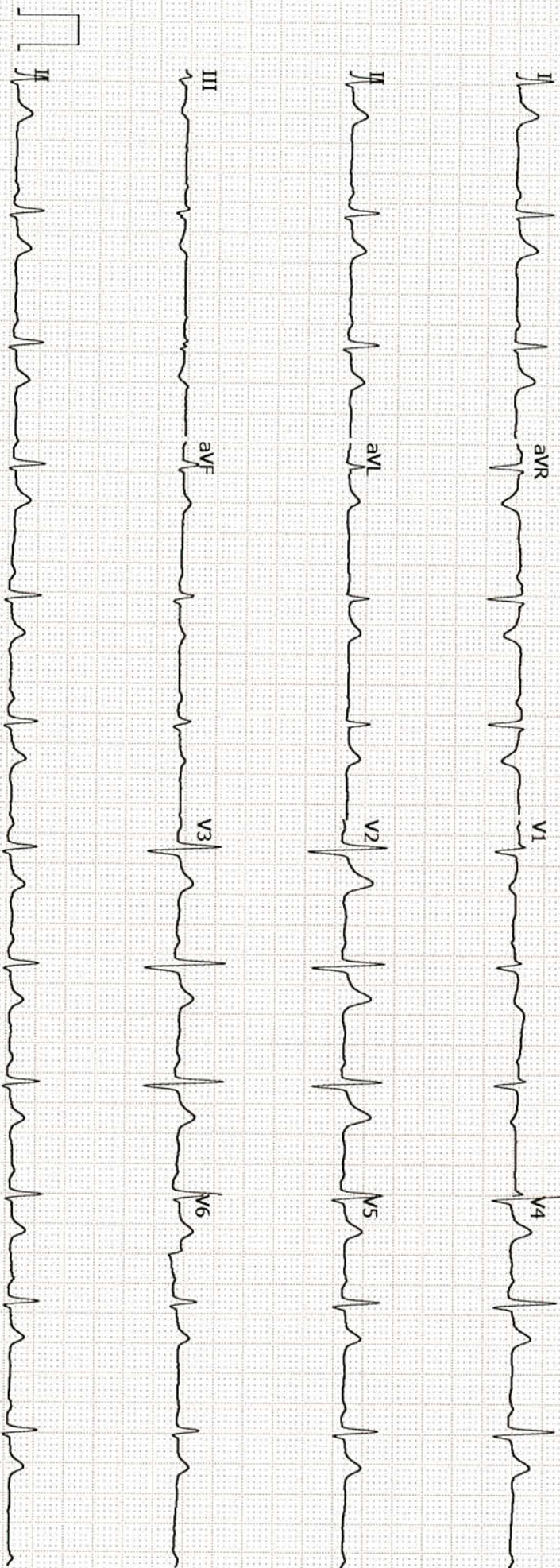
Location:  
Order Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room:

73 bpm  
-- / -- mmHg

QRS : 84 ms  
QT / QTcBaz : 368 / 405 ms  
PR : 158 ms  
P : 94 ms  
RR / PP : 818 / 821 ms  
P / QRS / T : 28 / 18 / 21 degrees

Normal sinus rhythm with sinus arrhythmia  
Normal ECG




## DEPARTMENT OF OPHTHALMOLOGY

Employee Name: <u>Ramona Reddy</u>	Date: <u>6/2/25</u>
Employee No:	Sex: <u>M</u>
Age: <u>44</u>	Systemic illness:

Examination	RE	LE
Anterior Segment	<u>Normal/Abnormal</u>	<u>Normal/Abnormal</u>
Vision Distance	<u>6/6</u>	<u>6/6</u>
Near vision	<u>N/6</u>	<u>N/6</u>
Colour (Ishihara)	<u>Normal/Abnormal</u>	<u>Normal/Abnormal</u>
Refractive Error	<u>Present/Absent</u>	<u>Present/Absent</u>
New Glass power		
Add Power		
Glass If any	<u>To Continue / Change</u>	<u>To Continue / Change</u>
IOP (mm of Hg)	<u>Normal/Abnormal</u>	<u>Normal/Abnormal</u>
Posterior Segment	<u>Normal/Abnormal</u>	<u>Normal/Abnormal</u>
Impression	<u>Normal/Refractive Error/Presbyopic BE/Others</u>	

Advice/Comments



Signature of Consultant & Optometrist

DL No. : KA41 20190015277 DOI : 26/07/2019  
NAME : RAMANA REDDY THATIPARTHI  
D.O.B : 25/07/1980 B.G. : B+  
VALID TILL : 24/07/2030(NT)

FORM - 7  
[See Rule 16(2)]



VALID THROUGHOUT INDIA

COV: LMV 26/07/2019  
: MCWG 26/07/2019

CDOI : 26/07/2019

S/o : NAGI REDDY THATIPARTHI  
ADDRESS : NO 104 A BLOCK LE TERRACE  
SEETHARAMPALYA HOODI ROAD GRAPHITE  
INDIA JUNCTION MAHADEVAPURA Bangalore  
South, Bangalore, KA 560048

Sign. Of Holder

Sign. Licencing Authority  
JNB-BANGALORE

