

Patient Name : Mr.ARJUN KUMAR P S  
Age/Gender : 39 Y 5 M 19 D/M  
UHID/MR No : SALW.0000144484  
Visit ID : SALWOPV225033  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 35E7730

Collected : 09/Nov/2024 08:52AM  
Received : 09/Nov/2024 10:12AM  
Reported : 09/Nov/2024 10:34AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

METHODOLOGY: MICROSCOPIC


RBC : Predominantly Normocytic Normochromic RBCS.

WBC : Mildly reduced in number, morphology and maturation within normal limits. No abnormal cells seen.

PLATELET : Adequate on smear.

PARASITES : No haemoparasites seen.

COMMENTS : Kindly correlate clinically.

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:BED240245609



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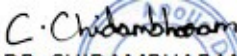
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**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	15.2	g/dL	13-17	Spectrophotometer
PCV	45.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.25	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	85.7	fL	83-101	Calculated
MCH	29	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	11.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>3,140</b>	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	42.0	%	40-80	Electrical Impedance
LYMPHOCYTES	<b>47.2</b>	%	20-40	Electrical Impedance
EOSINOPHILS	3.6	%	1-6	Electrical Impedance
MONOCYTES	5.8	%	2-10	Electrical Impedance
BASOPHILS	1.4	%	0-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	<b>1318.8</b>	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1482.08	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	113.04	Cells/cu.mm	20-500	Calculated
MONOCYTES	<b>182.12</b>	Cells/cu.mm	200-1000	Calculated
BASOPHILS	43.96	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	0.89		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	172000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	07	mm at the end of 1 hour	0-15	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:BED240245609




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**DEPARTMENT OF HAEMATOLOGY**

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

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST  
SIN No:BED240245609

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Patient Name	: Mr.ARJUN KUMAR P S	Collected	: 09/Nov/2024 08:52AM
Age/Gender	: 39 Y 5 M 19 D/M	Received	: 09/Nov/2024 03:10PM
UHID/MR No	: SALW.0000144484	Reported	: 09/Nov/2024 06:21PM
Visit ID	: SALWOPV225033	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7730		

**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	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY



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

SIN No:HA07979297

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.



Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 11:17AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 12:07PM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 12:24PM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**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	100	mg/dL	60-100	Oxidase & Peroxidase-reflectance spectrophotometry

**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:**

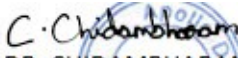
- The diagnosis of Diabetes requires a fasting plasma glucose of  $>$  or  $=$  126 mg/dL and/or a random / 2 hr post glucose value of  $>$  or  $=$  200 mg/dL on at least 2 occasions.
- Very high glucose levels ( $>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	121	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

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:PLP1487954




Patient Name : Mr.ARJUN KUMAR P S  
Age/Gender : 39 Y 5 M 19 D/M  
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Emp/Auth/TPA ID : 35E7730

Collected : 09/Nov/2024 11:17AM  
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**DEPARTMENT OF BIOCHEMISTRY**

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

preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST  
SIN No:PLP1487954

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Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 08:52AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 11:35AM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 12:44PM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**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	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	114	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.

- 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
  - A: HbF >25%
  - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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DR.R.SRIVATSAN  
M.D.(Biochemistry)



SIN No:EDT240094050

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

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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>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	<b>148</b>	mg/dl	150-219	CHE-COD-POD - colorimetric, reflectance Spectropho
TRIGLYCERIDES	<b>177</b>	mg/dl	50-149	LPL -GPO-POD Colorimetric, reflectance Spectropho
HDL CHOLESTEROL	<b>24</b>	mg/dL	37-67	CHE-COD-POD - colorimetric, reflectance Spectropho
NON-HDL CHOLESTEROL	124	mg/dL	<130	Calculated
LDL CHOLESTEROL	88.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>35.4</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	<b>6.17</b>		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	<b>0.51</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

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:SE04843206






Patient Name : Mr.ARJUN KUMAR P S  
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**DEPARTMENT OF BIOCHEMISTRY**

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

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST  
SIN No:SE04843206

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Patient Name : Mr.ARJUN KUMAR P S  
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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>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.70	mg/dL	0.1-1.2	Diazo Dye Formation - reflectance spectrophotometr
BILIRUBIN CONJUGATED (DIRECT)	0.30	mg/dL	0.1-0.4	Diazo Dye Formation - reflectance spectrophotometr
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	4-44	Peroxidase oxidation of Diarylimidazole Leuco Dye
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	27.0	U/L	8-38	Peroxidase oxidation of Diarylimidazole Leuco Dye
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.8		<1.15	Calculated
ALKALINE PHOSPHATASE	60.00	U/L	32-111	P-Nitro Phenol Phosphate-reflectance spectrophoto
PROTEIN, TOTAL	6.70	g/dl	6.7-8.3	Biuret reaction(copper based)-colorimetric, refle
ALBUMIN	4.50	g/dL	3.8-5	Albumin-BCG Complex Colorimetric, reflectance spe
GLOBULIN	2.20	g/dL	2.0-3.5	Calculated
A/G RATIO	<b>2.05</b>		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:

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

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


**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 diseases, Cirrhosis, but the increase is usually not >2.

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.

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
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SIN No:SE04843206



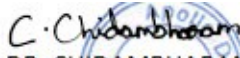
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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.71	mg/dL	0.6-1.1	Ammonia Concentration Measurement - color change o
UREA	<b>15.84</b>	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	<b>7.4</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.00	mg/dL	4-7	Uricase Peroxidase - colorimetric, reflectance spe
CALCIUM	8.40	mg/dL	8.4-10.2	Calcium - CLIII Complex - reflectance spectrophot
PHOSPHORUS, INORGANIC	2.60	mg/dL	2.6-4.4	PNP-XOD-POD - Colorimetric, reflectance spectroph
SODIUM	143	mmol/L	136-149	Ion Selective Electrode-potentiometric
POTASSIUM	4.3	mmol/L	3.8-5	Ion Selective Electrode-potentiometric
CHLORIDE	103	mmol/L	98-106	Ion Selective Electrode-potentiometric
PROTEIN, TOTAL	6.70	g/dl	6.7-8.3	Biuret reaction(copper based)-colorimetric, refle
ALBUMIN	4.50	g/dL	3.8-5	Albumin-BCG Complex Colorimetric, reflectance spe
GLOBULIN	2.20	g/dL	2.0-3.5	Calculated
A/G RATIO	<b>2.05</b>		0.9-2.0	Calculated

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DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:SE04843206




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

  
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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>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	33.00	U/L	16-73	catalytic activity-reflectance spectrophotometry

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:SE04843206

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Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 08:52AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 11:45AM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 12:45PM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**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)	1.32	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.03	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.705	µIU/mL	0.34-5.60	CLIA


**Comment:**

<b>For pregnant females</b>	<b>Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)</b>
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 Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy

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DR.R.SRIVATSAN  
M.D.(Biochemistry)



SIN No:SPL24146190

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Patient Name	: Mr.ARJUN KUMAR P S	Collected	: 09/Nov/2024 08:52AM
Age/Gender	: 39 Y 5 M 19 D/M	Received	: 09/Nov/2024 11:45AM
UHID/MR No	: SALW.0000144484	Reported	: 09/Nov/2024 12:45PM
Visit ID	: SALWOPV225033	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7730		

**DEPARTMENT OF IMMUNOLOGY**

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

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.R.SRIVATSAN  
M.D.(Biochemistry)



SIN No:SPL24146190

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.



Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 08:52AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 11:45AM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 12:34PM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**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>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b>	0.220	ng/mL	0-4	CLIA



DR.R.SRIVATSAN  
M.D.(Biochemistry)



SIN No:SPL24146190

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 08:52AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 10:25AM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 10:32AM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**DEPARTMENT OF CLINICAL PATHOLOGY**

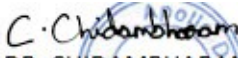
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.030		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	Modifed Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	Microscopy
RBC	ABSENT	/hpf	0-2	Microscopy
CASTS	ABSENT		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	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. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:UR2419275




Patient Name : Mr.ARJUN KUMAR P S  
Age/Gender : 39 Y 5 M 19 D/M  
UHID/MR No : SALW.0000144484  
Visit ID : SALWOPV225033  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 35E7730

Collected : 09/Nov/2024 08:52AM  
Received : 09/Nov/2024 10:25AM  
Reported : 09/Nov/2024 10:32AM  
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**

  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST  
SIN No:UR2419275

Page 19 of 20



Patient Name : Mr.ARJUN KUMAR P S	Collected : 09/Nov/2024 08:52AM
Age/Gender : 39 Y 5 M 19 D/M	Received : 09/Nov/2024 10:25AM
UHID/MR No : SALW.0000144484	Reported : 09/Nov/2024 10:31AM
Visit ID : SALWOPV225033	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7730	

**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 \*\*\*

*C. Chidambaram*  
DR. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST  
SIN No:UF012150

Page 20 of 20




Patient Name : Mr.ARJUN KUMAR P S  
Age/Gender : 39 Y 5 M 19 D/M  
UHID/MR No : SALW.0000144484  
Visit ID : SALWOPV225033  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 35E7730

Collected : 09/Nov/2024 08:52AM  
Received : 09/Nov/2024 10:25AM  
Reported : 09/Nov/2024 10:31AM  
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. CHIDAMBHARAM C  
M.D., D.N.B.  
CONSULTANT PATHOLOGIST

SIN No:UF012150



**APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED**

(Formerly Known as Nova Specialty Hospitals Private Limited)

CIN : U85100TG2009PTC099414

Registered Office: No.7-1-617A,615&616, Imperial Towers, 7th Floor, Opp.Ameerpet Metro Station Ameerpet, Hyderabad, Telangana-500 038.

**BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE**





11/9/24 9:39 AM

APOLLO SPECTRA HOSPITALS( SALW )

ALWERPET( OPD )

MR, ARJUN KUMAR

Male

14  
ars

73 . Sinus rhythm.....normal P axis, V-rate 50- 99

. Baseline wander in lead(s) V2 V3 V5 V6

170  
99  
365  
402

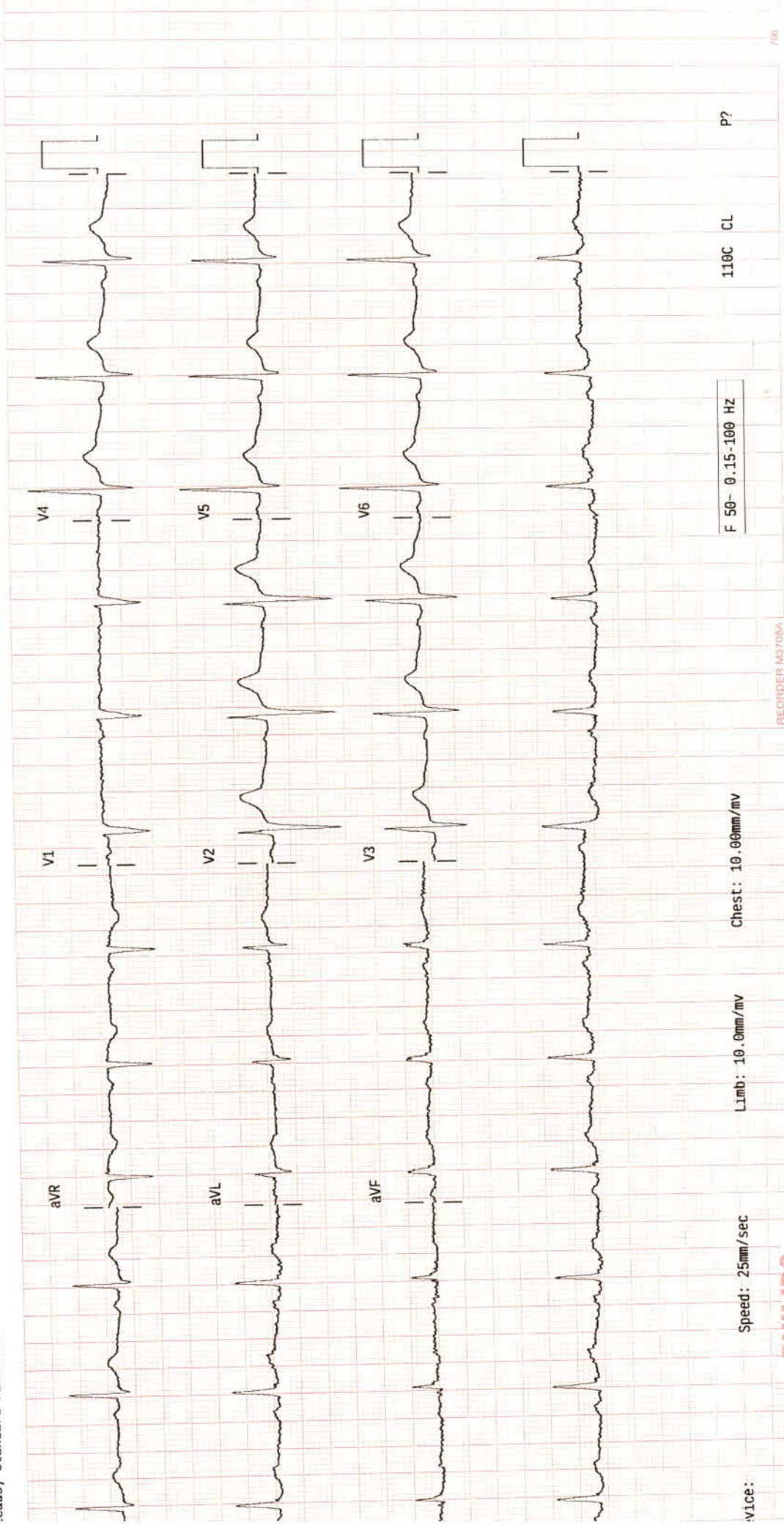
IS--

47  
51  
27

leads; Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



vice:

Speed: 25mm/sec

Limb: 10.0mm/mv

Chest: 10.00mm/mv

F 50- 0.15-100 HZ

110C CL

P?

PHILIPS

REORDER M3703A

708



Patient Name	: Mr. ARJUN KUMAR P S	Age	: 39 Y/M
UHID	: SALW.0000144484	OP Visit No	: SALWOPV225033
Conducted By:	: Dr. CECILY MARY MAJELLA	Conducted Date	: 09-11-2024 16:27
Referred By	: SELF		

**2D-ECHO WITH COLOUR DOPPLER**

Dimensions:

Ao (ed)	2.8 CM
LA (es)	3.4 CM
LVID (ed)	4.9 CM
LVID (es)	3.0 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.8 CM
EF	67%
%FD	37%

MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.8m/sec A: 0.5m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO  
0.8m/sec

VELOCITY ACROSS THE AV UPTO 0.9m/sec

TR VELOCITY UPTO 1.9m/sec 15mmHg

**IMPRESSION**

NO REGIONAL WALL MOTION ABNORMALITY  
NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION(LVEF-67%)  
TRIVIAL MITRAL REGURGITATION  
TRIVIAL TRICUSPID REGURGITATION  
NO PULMONARY ARTERY HYPERTENSION  
NORMAL RIGHT VENTRICULAR SYSTOLIC FUNCTION  
NO PERICARDIAL EFFUSION / CLOT.

Done By Mrs. KALAIYARASI

DR CECILY MARY MAJELLA MD DM (Cardio)



**Dr Sundhari V, DNB., MNAMS**  
SENIOR ENT CONSULTANT  
Ear Nose Throat Surgeon, Head & Neck Surgeon  
Specialist in Endoscopic, Microscopic,  
Advanced Skull Base  
Phono Surgery & Snoring Surgery  
Reg: 58764

9/11/24.

Mr. ARJUN KUMAR P S  
SALW.0000144484 39/M

Health check.

H/o Recurrent throat pain.

O/E. Exam. @ Ears. Tympanic membrane was impaled.

O/E. TM intact. Eustachian tube was.

Nose. DSR with bilateral. HTS. EOME B block.

Throat. Nallampatti. Grade IV Oropharynx

Larynx soft palate E thickened uvula.

BLE. Bilateral. Grade IV tonsils.

Macroglossia. E congested granular base

Δ DSR / Moderately severe. OSA / URS

Shel

Health checkup at tie-up Ctr | HealthChkup Authorisatn letter



Union Bank of India  
RD - CHENNAI SOUTH  
38 & 39, WHITES ROAD, CHENNAI 600  
014, Tamil Nadu, - 0

To  
The Chief Medical Officer  
M/S Mediwhool  
https://mediwhool.in/signup011-  
41195959(A brand name of  
Arcofomi Healthcare Ltd),  
Mumbai400021

Dear Sir,  
**Tie-up arrangement for Health Checkup under Health Checkup Executive Male 35+**

Shri/Smt./Kum. ARJUN KUMAR,P.S  
PF No. 477017 Designation : Chief Manager (Branch Head)  
Checkup for Financial Year 2024-2025 Approved Charges Rs. 4000.00

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup(for Executives) at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank

Please send the receipt of the above payment and the relevant reports to our above address

Thanking you,  
  
(Signature of the Employer) P. L. SRINIVAS BRANCH MANAGER/SENIOR MANAGER  
Yours Faithfully,




PS Status of the application

[View Worklist](#)

Health checkup at tie-up Ctr | HealthChkup Authorisatn letter

कृते यूनियन बैंक ऑफ इंडिया  
For Union Bank of India  
क्षेत्रीय कार्यालय, चेन्नै दक्षिण Regional Office, Chennai South

  
प्रबंधक (कर्मचारी), Manager(HR)  
चेन्नै / Chennai - 600014

यूनिजन बँक  
The First  
of India



Union Bank  
of India



नाम : पी एस अर्जुन कुमार

Name : **P.S.ARJUNKUMAR**

कर्मचारी संख्या / Employee No. **477017**

जन्म दिन / Birth Date : **21.05.1985**

रक्त समूह / Blood Group : **A+**

*P. Arjun Kumar*

जारी करने का स्थान

हस्ताक्षर / Signature

Place of Issue : **CHENNAI**

जारी करने की तारीख

Date of Issue: **01-11-2023**

*[Signature]*

जारीकर्ता प्राधिकार / Issuing Authority

# OPHTHALMIC RECORD

NAME :

AGE :

Mr. ARJUN KUMAR P S  
SALW.0000144484 39/M

DATE :

9.11.24

I.D. No. :

REFERRAL DETAILS :

NHE

ALLERGIES :

Not aware

OCULAR HISTORY :

OU: No floaters on left.  
Black spots.

SYSTEMIC ILLNESS :

S/P Cataract on 2012 (BE)

CURRENT MEDICATION :

Nil

INVESTIGATIONS :

Nil

MAIN DIAGNOSIS

TREATMENT GIVEN

	RE	LE
--	----	----

PRESENT GLASSES :  
 NV ADD :

ne

VN. WITH PG :

VISION UNAIDED :

6/6 P Mb

6/6 Mb

VN WITH PH :

RETINOSCOPY *AL* :

$\pm 1.50 \times 10$

$\pm$

SUBJECTIVE :

$\pm 1.25 \times 10$   
 (6/6) Mb

$\pm 1.6/6$  Mb

ANTERIOR SEGMENT :

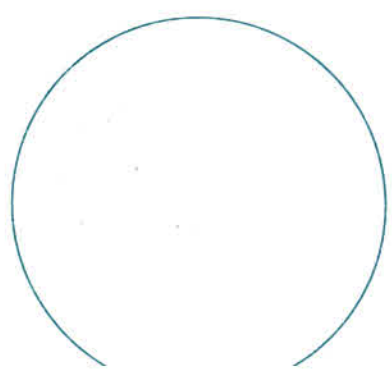
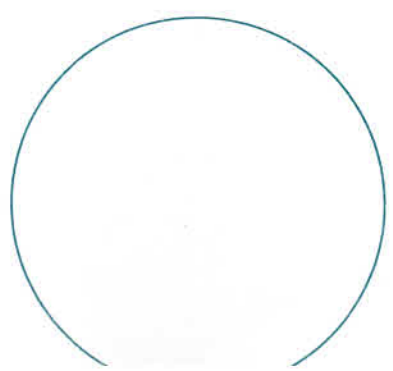
B/oly Pb feels same with R  
 without Rp.

Color m :  
 or: normal

IOP  $\left\{ \begin{array}{l} \text{① } 16 \text{ mmHg} \\ \text{② } 16 \text{ mmHg} \end{array} \right.$

@ 10:15 AM

FUNDUS :



## CERTIFICATE OF MEDICAL FITNESS

This ~~is~~ the clinical examination  
of \_\_\_\_\_ on 9/11/2024  
At Mr. ARJUN KUMAR P S on clinical examination it has been found  
th SALW.0000144484 39/M

	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>	<input type="checkbox"/>
<ul style="list-style-type: none"><li>Currently Unfit. Review after _____ recommended</li></ul>	<input type="checkbox"/>
<ul style="list-style-type: none"><li>Unfit</li></ul>	<input type="checkbox"/>

Dr. DR. RAJ MADHANGI D  
**Medical Officer**  
INTERNAL MEDICINE  
GENERAL PHYSICIAN  
Apollo Spectra Alwarpet  
APOLLO SPECTRA HOSPITALS  
Alwarpet, REG No: 164481

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





<b>Patient Name</b>	: Mr. ARJUN KUMAR P S	<b>Age/Gender</b>	: 39 Y/M
<b>UHID/MR No.</b>	: SALW.0000144484	<b>OP Visit No</b>	: SALWOPV225033
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 11-11-2024 12:06
<b>LRN#</b>	: RAD2433107	<b>Specimen</b>	:
<b>Ref Doctor</b>	: DR VIJENDRA MAKK REDDY		
<b>Emp/Auth/TPA ID</b>	: 35E7730		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

Liver appears normal in size, Shows fatty changes (Grade I).  
Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.  
Wall thickness appear normal.

Pancreas / Para aortic / Portal region obscured.  
Spleen measures 10.2cm and shows uniform echotexture.

Visualised aorta and IVC are normal.  
No evidence of ascites.

Right kidney measures 11.2 x 5.6cm. 4mm echogenic foci noted in the upper pole with no definite  
after shadow, S/o ? calculus.

Left kidney measures 11.2 x 5.4cm.

Both kidneys show normal echopattern with no evidence of calyceal dilatation.

Prostate measures 3.1 x 3.1 x 3.1cm (Vol- 16ml).

Bladder is normal in contour.

**IMPRESSION:**

FATTY LIVER.

**Patient Name** : Mr. ARJUN KUMAR P S

**Age/Gender**

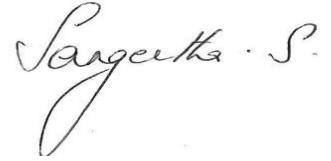
: 39 Y/M

PANCREAS / PARA AORTIC / PORTAL REGION OBSCURED.

RIGHT KIDNEY - S/O ? CALCULUS.

- SUGGESTED CLINICAL CORRELATION.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable).



**Dr. S SANGEETHA**  
MBBS., TRAINED IN ULTRASONOGRAPHY  
Radiology

<b>Patient Name</b>	: Mr. ARJUN KUMAR P S	<b>Age/Gender</b>	: 39 Y/M
<b>UHID/MR No.</b>	: SALW.0000144484	<b>OP Visit No</b>	: SALWOPV225033
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 09-11-2024 15:25
<b>LRN#</b>	: RAD2433107	<b>Specimen</b>	:
<b>Ref Doctor</b>	: DR VIJENDRA MAKK REDDY		
<b>Emp/Auth/TPA ID</b>	: 35E7730		

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.


Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

**IMPRESSION:**

NORMAL STUDY.



**Dr. ARUN KUMAR S**  
**MBBS, DMRD, DNB**  
Radiology