

Patient Name	: Mr.DHRUVA H S	Collected	: 09/Nov/2024 09:08AM
Age/Gender	: 33 Y 10 M 25 D/M	Received	: 09/Nov/2024 10:10AM
UHID/MR No	: CSAR.0000047674	Reported	: 09/Nov/2024 11:53AM
Visit ID	: CMYSOPV131305	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E37942		

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



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

SIN No:MYS241100442



Patient Name : Mr.DHRUVA H S	Collected : 09/Nov/2024 09:08AM
Age/Gender : 33 Y 10 M 25 D/M	Received : 09/Nov/2024 10:10AM
UHID/MR No : CSAR.0000047674	Reported : 09/Nov/2024 01:16PM
Visit ID : CMYSOPV131305	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.1	g/dL	13-17	Spectrophotometer
PCV	38.90	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.78	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	81.4	fL	83-101	Calculated
MCH	27.3	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	11.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	11,490	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	56	%	40-80	Electrical Impedance
LYMPHOCYTES	31	%	20-40	Electrical Impedance
EOSINOPHILS	7	%	1-6	Electrical Impedance
MONOCYTES	5	%	2-10	Electrical Impedance
BASOPHILS	1	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6434.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3561.9	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	804.3	Cells/cu.mm	20-500	Calculated
MONOCYTES	574.5	Cells/cu.mm	200-1000	Calculated
BASOPHILS	114.9	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.81		0.78- 3.53	Calculated
PLATELET COUNT	342000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.

W.B.C: Are increased in number with normal morphology and increase in eosinophils.

Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

Page 2 of 14



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IMPRESSION: LEUCOCYTOSIS WITH EOSINOPHILIA.

Note : Suggested clinical correlation



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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Patient Name : Mr.DHRUVA H S	Collected : 09/Nov/2024 11:23AM
Age/Gender : 33 Y 10 M 25 D/M	Received : 09/Nov/2024 12:17PM
UHID/MR No : CSAR.0000047674	Reported : 09/Nov/2024 01:19PM
Visit ID : CMYSOPV131305	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	129	mg/dl	74-106	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:

- 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)	149	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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UHID/MR No : CSAR.0000047674	Reported : 09/Nov/2024 12:44PM
Visit ID : CMYSOPV131305	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	134	mg/dL		Calculated

Comment:

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

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

Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.

4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	155	mg/dl	0-200	CHOD
TRIGLYCERIDES	163	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	37	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	118	mg/dL	<130	Calculated
LDL CHOLESTEROL	84.88	mg/dL	<100	Calculated
VLDL CHOLESTEROL	32.68	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.14		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.28		<0.11	Calculated

Comment:

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

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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.51	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.37	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	57	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/l	0-35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.6		<1.15	Calculated
ALKALINE PHOSPHATASE	105.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	7.90	g/dl	6.4-8.3	Biuret
ALBUMIN	4.40	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated

Comment:

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

1. Hepatocellular Injury:

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

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

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

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



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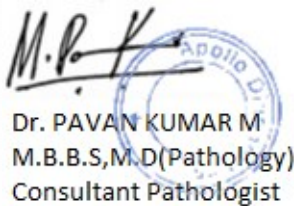


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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.63	mg/dL	0.67-1.17	Enzymatic colorimetric
UREA	24.23	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	11.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.60	mg/dL	3.5-7.2	Uricase
CALCIUM	8.90	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.76	mg/dl	2.7-4.5	Molybdate
SODIUM	137	mmol/L	135-145	Direct ISE
POTASSIUM	4.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.90	g/dl	6.4-8.3	Biuret
ALBUMIN	4.40	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated



Dr. PAVAN KUMAR M
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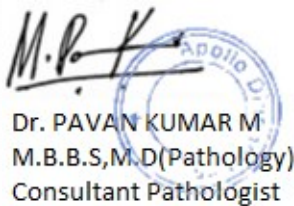


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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	51.00	U/l	0-55	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.51	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	9.64	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.900	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 Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes

Page 11 of 14



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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	5.5		5-7.5	Double Indicator
SP. GRAVITY	1.025		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	5 - 7	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 4	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		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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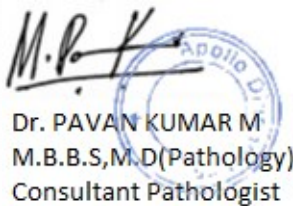
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Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	POSITIVE (+++)		NEGATIVE	GOD-POD

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

*** End Of Report ***



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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. PAVAN KUMAR M
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No: MYS241100443

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

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)

GSTIN: 29AADCA0733E1Z3

Address: 22, 23, 24, 25/101/3, Sree Rama Layout, BNR Complex,
OPP.RBI Layout, JP Nagar, 7th Phase, Bengaluru, Karnataka



**1860 500 7788**
www.apolloclinic.com

Patient	Mr. DHRUVA H S	Doctor	SUJATHA T R	Appt ID	CMYSAPT1454
Age/Gender	33Y Male	Qualification	MBBS, PGDMCH	Consult Date	10 Nov 2024
UHID	CSAR.0000047674	Reg. No.	69649	Order Bill ID	CMYS-OCR-24667
				Visit Display ID	CMYSOPV131305

VITALS

Weight : 91.4Kgs	Height : 179Cms
Pulse : 75 BPM	Spo2 : 98%
BP : 120 / 80 MmHg	Respiratory Rate : 20 BPM
Temperature : 98 °F	

SUJATHA T R
Doctor's Signature

Apollo Health and Lifestyle Limited

(CIN-U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7* Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

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

Patient Name	: Mr. DHRUVA H S	Age	: 33Yrs 10Mths 26Days
UHID	: CSAR.0000047674	OP Visit No.	: CMYSOPV131305
Printed On	: 10-11-2024 04:49 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E37942		

DEPARTMENT OF RADIOLOGY

LIVER: It is normal in size, outline and is increased in echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is distended with evidence of echogenic calculus measuring ~8mm noted within the lumen

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal in size, outline and echopattern.

RIGHT KIDNEY: It measures 10.9 cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 11.4cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No e/o calculi.

PROSTATE: It is normal in size, outline and echotexture.

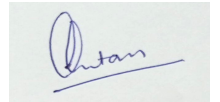
No e/o free fluid in the abdomen.

IMPRESSION:

Grade I fatty liver

Cholelithiasis .No features of cholecystitis

---End Of The Report---



Dr.CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Patient Name	: Mr. DHRUVA H S	Age	: 33Yrs 10Mths 30Days
UHID	: CSAR.0000047674	OP Visit No.	: CMYSOPV131305
Printed On	: 14-11-2024 07:37 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E37942		

DEPARTMENT OF CARDIOLOGY

2D ECHOCARDIOGRAPHY STUDY

Impression:

Normal chambers and valves
No regional wall motion abnormality
Normal left ventricular systolic function. EF 62 %
No clots. No pericardial effusion

??????

Findings

Left Ventricle: No RWMA
Right Ventricle Normal
Left Atrium Normal
Right Atrium Normal
Aorta Normal
Pulmonary Artery Normal
IAS Intact
IVS Intact
Valves Normal
Pericardium Normal
Doppler Normal

Patient's Name : Mr Dhruva H S Age & Sex; 33Yrs /Male

Date : 09.11.2024

UHID No: 47674

Measurements

AO:2.8cm

LA :3.5cm

RV :2.8 cm

LVIDd 4.76cm

LVIDs:3.21 cm

IVSd :0.98 cm

IVSs :1.24 cm

PWd :1.11 cm

PWs :1.30 cm

EF :62.0 %

FS :33.0 %

Doppler

MV TV AV PV

0.97

E :0.80m/sE --- m/sV max m/sV max1.01m/s

A: 0.55m/sA --- m/s

---End Of The Report---

Dr. GURU PRASAD B V
MBBS, PGDCC
69949
Cardiology

Patient Name	: Mr. DHRUVA H S	Age	: 33Yrs 10Mths 26Days
UHID	: CSAR.0000047674	OP Visit No.	: CMY SOPV131305
Printed On	: 10-11-2024 04:01 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E37942		

DEPARTMENT OF CARDIOLOGY

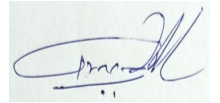
Observation :-

1. Sinus Rhythm.
2. Heart rate is 75 beats per minutes.

Impression:

NORMAL RESTING ECG.

---End Of The Report---



Dr. GURU PRASAD B V
MBBS, PGDCC
69949
Cardiology

8, 9, 12, eye

Name : Mr. DHRUVA H S
 Address : Mysore Mysore Karnataka INDIA 570001
 Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
 PAN INDIA OP AGREEMENT

H → 174
 sex : Male
 W → 91.4
 BP → 120/80

UHID : CSAR.0000047674



OP No: CMYSOPV131305
 Bill No: CMYS-OCR-24667
 Date: Nov 9th, 2024, 9:00 AM

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

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr Dhruva HS on 09/11/24

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <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"> • Currently Unfit. Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	

Dr. [Signature]
Medical Officer

This certificate is not meant for medico-legal purposes.

Apollo Clinic
1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

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 KARNATAKA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

[Phy]

Mr. Dhruva HS

33 yrs / Male

Height: 179 cm	Weight: 91.4 kg	BMI:	Waist Circum:
Temp:	Pulse: 78	Resp: 20	B.P: 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan


C/S
N/S
M/WAS

Adv

Regular En cereal

T- ALT - D₃ 60K once 10
u ok

Follow up date :


Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 57
Ph : 0821-4006040/41

Date : 11/9/2024 Department : ENT
 Patient Name : Mr. DHRUVA H S Doctor : Dr. PRAVEEN KUMAR R
 UHID : CSAR.0000047674 Registration No. : 66012
 Age / Gender : 33Yrs 10Mths 25Days/ Male Qualification : MBBS, MS (ENT)
 Consultation Timing : 10:23 AM

Height : 179	Weight : 91.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Cause for recurrent headaches

Ear Bilateral TM @

nose - nasal mucus . @

oral cavity low opaline . @

neck @

As

exam

ph

Follow up date :

Doctor Signature

Date : 11/9/2024 Department : Dental
 Patient Name : Mr. DHRUVA H S Doctor : Dr. JYOTHISHREE P V
 UHID : CSAR.0000047674 Registration No. : 33268A
 Age / Gender : 33Yrs 10Mths 25Days/ Male Qualification : B.D.S[Bachelor of Dental Surgery]
 Consultation Timing : 10:23 AM

Height : 179	Weight : 91.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/88

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

OK

~~1123~~ Halo RCT

Adv. Rest Flwby
Crown

Cuff, SET

Follow up date :

Jyothishree
Doctor Signature

Apollo Clinic
23, 1st Floor,
Kaldasa Road, Mysore - 02
Ph : 0821-4006040/41

[Ophthalmology]

Date : 11/9/2024 Department : General Practice
Patient Name : Mr. DHRUVA H S Doctor : Dr. SUJATHA T R
UHID : CSAR.0000047674 Registration No. : 69649
Age / Gender : 33Yrs 10Mths 25Days/ Male Qualification : MBBS, PGDMCH
Consultation Timing : 10:24 AM

Height : 179	Weight : 91.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Distance

vision

Un < 6/6
6/6

near

vision

No

(CV) = normal

Colour

vision

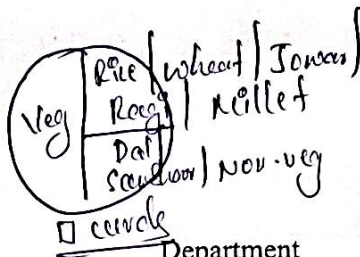
(BE) = normal

Prescribed for Blue cut

Follow up date : 09/11/24

Ateebu
Khan
Doctor Signature

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41



Date : 11/9/2024 Department : Nutrition & Dietetics
 Patient Name : Mr. DHRUVA H S Doctor : Miss.MADHURA B P
 UHID : CSAR.0000047674 Registration No. : A104102
 Age / Gender : 33Yrs 10Mths 25Days/ Male Qualification : M.Sc. Nutrition and Dietetics
 Consultation Timing : 10:24 AM **PhD^o**

IBCM - 71kg

Height : 179	Weight : 91.4	BMI : 28.5 kg/m ²	Waist Circum : 120/80
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination / Allergies History

ESR - 20
 FBS - 129
 PPBS - 149
 HSA.C - 6.3%
 Triglycerides - 163
 HDL - 37
 VLDL - 32.68

Clinical Diagnosis & Management Plan

Di^s - Grade I Fatty liver, cholelithiasis.
 → Advised low fat, salt restricted, diabetic diet with fiber rich foods.
 → Avoid fruits like Mango, Sapota, Jackfruits, custard & Big banana.
 → Avoid roots vegetables like Potato, sweet potato, Yam & Arbi.
 → Dietary guideline chart is given.

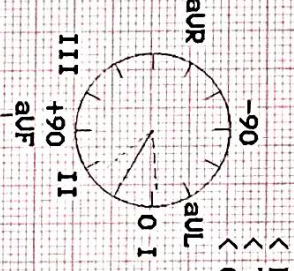
Follow up date :

Doctor Signature 11/11/2024

Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

AGE: 33 NO:

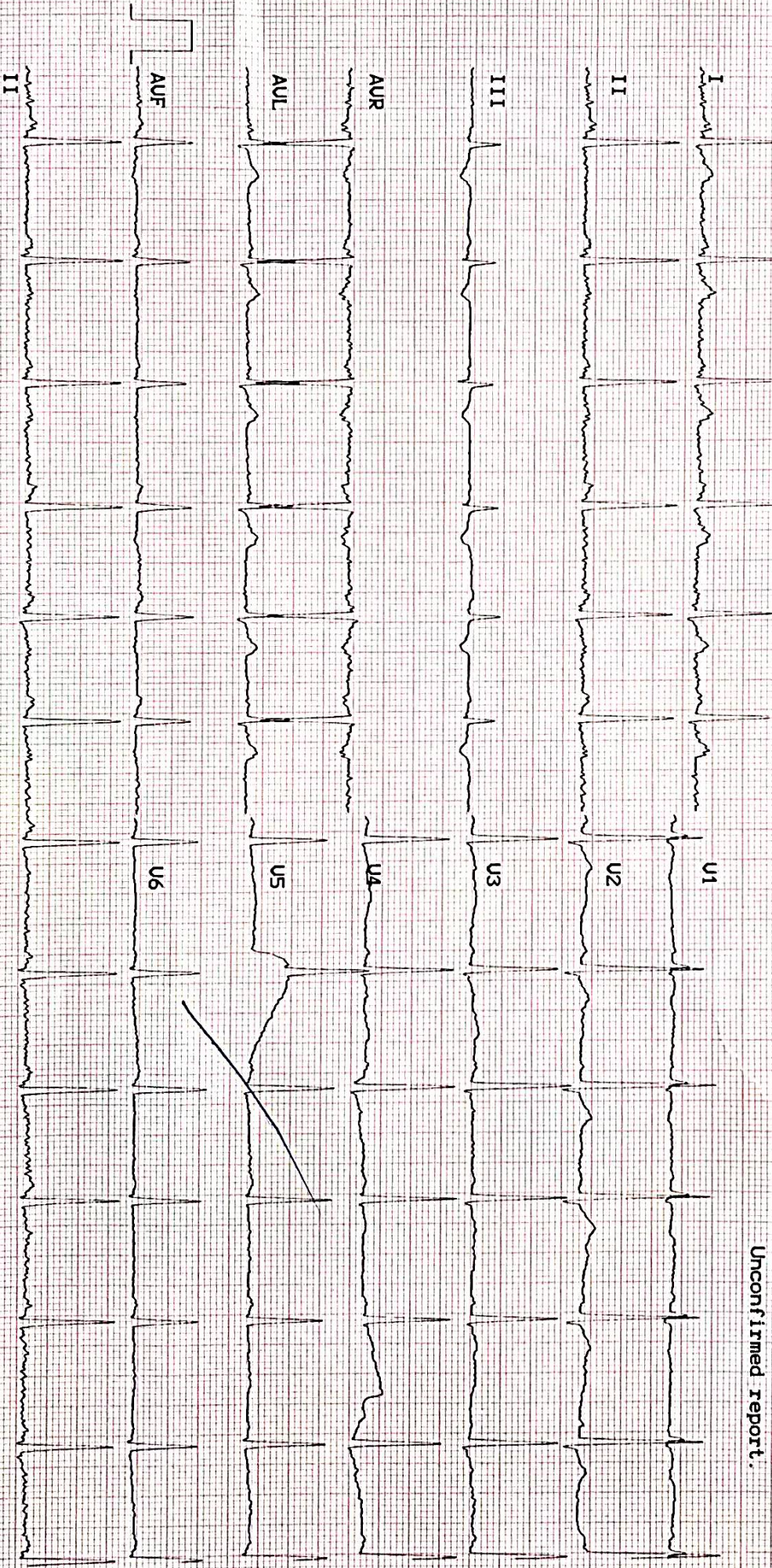
Measurement Results:
 QRS : 90 ms
 QT/QTcB : 348 / 392 ms
 PR : 124 ms
 P : 104 ms
 RR/PP : 790 / 790 ms
 P/QRS/T : 50 / 30 / -5 degrees
 QTd/QTcBD: 50 / 56 ms
 Sokolow : 1.4 mV
 NK : 11



Interpretation:

Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Unconfirmed report.



Patient Name	: Mr. DHRUVA H S	Age	: 33Yrs 10Mths 25Days
UHID	: CSAR.0000047674	OP Visit No.	: CMYSOPVI31305
Printed On	: 09-11-2024 12:41 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E37942		

DEPARTMENT OF RADIOLOGY

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

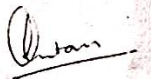
Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION: NORMAL STUDY .

---End Of The Report---



Dr.CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-4006040/41

Patient's Name : Mr Dhruva H S	Age & Sex; 33Yrs /Male
Date : 09.11.2024	UHID No: 47674

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 62 %
- No clots. No pericardial effusion

Findings

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

Apollo Health and Lifestyle Limited

(CIN: U85110TG2000PLC115819)

Regd Office: 110-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860|500 7788**

Patient's Name : Mr Dhruva H S	Age & Sex; 33Yrs /Male
Date : 09.11.2024	UHID No: 47674

Measurements

AO : 2.8 cm
LA : 3.5 cm

RV : 2.8 cm
LVIDd : 4.76 cm
LVIDs : 3.21 cm
IVSd : 0.98 cm
IVSs : 1.24 cm
PWd : 1.11 cm
PWs : 1.30 cm
EF : 62.0 %
FS : 33.0 %

Doppler

	MV		TV		AV		PV			
E	0.80	m/s	E ---	m/s	V max	0.97	m/s	V max	1.01	m/s
A:	0.55	m/s	A ---	m/s						

Dr. GURU PRASAD. B. V, MBBS, PGDCC
CONSULTANT – NON-INVASIVE CARDIOLOGY

Apollo Health and Lifestyle Limited

(CIN: UR5110TG2000PLC115819)

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

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

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name: Mr. DHRUVA H S	Date:09.11 .2024	Referring Doctor: Self
Age / Sex :33 yrs /Male	UHID :47674	
ULTRASONOGRAPHY – ABDOMEN & PELVIS		

LIVER: It is normal in size, outline and is increased in echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is distended with evidence of echogenic calculus measuring ~8mm noted within the lumen

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal in size, outline and echopattern.

RIGHT KIDNEY: It measures 10.9 cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 11.4cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No e/o calculi.

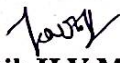
PROSTATE: It is normal in size, outline and echotexture.

No e/o free fluid in the abdomen.

IMPRESSION:

Grade I fatty liver

Cholelithiasis .No features of cholecystitis


Dr. Karthik H V MDRD , DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

ICIN: UBS110TG2000PLC1158191

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


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

APOLLO CLINICS NETWORK KARNATAKA

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**





Your appointment is confirmed

From noreply@apolloclinics.info <noreply@apolloclinics.info>

Date Thu 07-11-2024 18:34

To dhruva.shivaswamy@gmail.com <dhruva.shivaswamy@gmail.com>

Cc Mysore Apolloclinic <mysore@apolloclinic.com>; Yogeesh KV <mkt.mysore@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear MR. H S DHRUVA,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **KALIDASA RAOD clinic** on **2024-11-09** at **08:15-08:30**.

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

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.

3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: 23, KALIDASA ROAD, VV MOHLLA, MYSORE.

Contact No: (0821) 400 6040 - 41.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic