

Name : Mr. Chandra Shekhar Jha

Age: 39 Y
Sex: M

UHID: SPUN.0000042610



OP Number: CVIMOPV595273

Bill No : CVIM-OCR-63424

Date : 09.03.2024 11:35

Address : Flat No C 2 306 Mantra 7 Hills Gat No 642 to 645 Sinhgad Rd
Opp CWPRS Kowwadi Pune 411024

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Department

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	LIVER FUNCTION TEST (LFT)	
3	GLUCOSE, FASTING	
4	HEMOGRAM + PERIPHERAL SMEAR	
5	COMPLETE URINE EXAMINATION	
6	PERIPHERAL SMEAR	
7	ECG	
8	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
9	GLUCOSE, POST PRANDIAL (PP) 2 HOURS (POST MEAL) <i>Shw - Room no. 9</i>	
10	HbA1c, GLYCATED HEMOGLOBIN	
11	X-RAY CHEST PA <i>Room no - 1</i>	
12	FITNESS BY GENERAL PHYSICIAN	
13	BLOOD GROUP ABO AND RH FACTOR	
14	LIPID PROFILE	
15	BODY MASS INDEX (BMI)	
16	OPHTHAL BY GENERAL PHYSICIAN	
17	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Chandru jha on 09/03/24

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	<input type="checkbox"/>
<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. <u>HBA1C - 5.8%</u></p> <p>2. <u>↑ LDL.</u></p> <p>3. <u>↑ Bilirubin</u></p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none">• Currently Unfit. <p>Review after _____ recommended</p>	<input type="checkbox"/>
<ul style="list-style-type: none">• Unfit	<input type="checkbox"/>

Dr. Archana V.
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes.
Dr. Archana V. MBBS
Registration No. 103429

Date : 09-03-2024
MR NO : SPUN.0000042610

Department : GENERAL
Doctor :

Name : Mr. Chandra Shekhar Jha

Registration No :

Age/ Gender : 39 Y / Male

Qualification :

Consultation Timing: 11:34

Height : 170	Weight : 78	BMI :	Waist Circum : 96
Temp : 97°F	Pulse : 78	Resp : 20	B.P : 130/80

General Examination / Allergies History

O/E:
PE CVS / RES. NIAD

PLA soft (+)
gastro Reflux.
CNS - NFA / DEF.

Req - LVA
Statin

Clinical Diagnosis & Management Plan

• No specific complaints.
• family Hx -
Father - HTN.

Suggest :
• Vitamin Panel - I.
• Atorvastatin (B.I.) ✓
LD - Euto.

Follow up date:

Dr. Archana V. MBBS
Registration No. 103429



Doctor Signature

EYE EXAMINATION

DATE:

MOBILE NO: →

NAME: CHANDRASEKAR JHA

AGE: 40 / m

CORPORATE:

	Right Eye	Left Eye
Distant vision	6/6 ✓	6/6 ✓
Near vision	N/6 ✓	N/6 ✓
Color vision	Normal ✓	Normal ✓
Fundus examination	Normal ✓	Normal ✓
Intraocular pressure	Normal ✓	Normal ✓
Slit lamp exam.	Normal ✓	Normal ✓

fit with specs
Bofu eye WAZ

Impression - Normal Eye Check Up.

(Ophthalmology)

The Apollo Clinic
DR. M. D. ALAVAND
MBBS. DO.MS.
Cor: Senior Eye Surgeon
Reg. No.: 30319



42610
39 Years

chandra jha (viman nagar)
Male

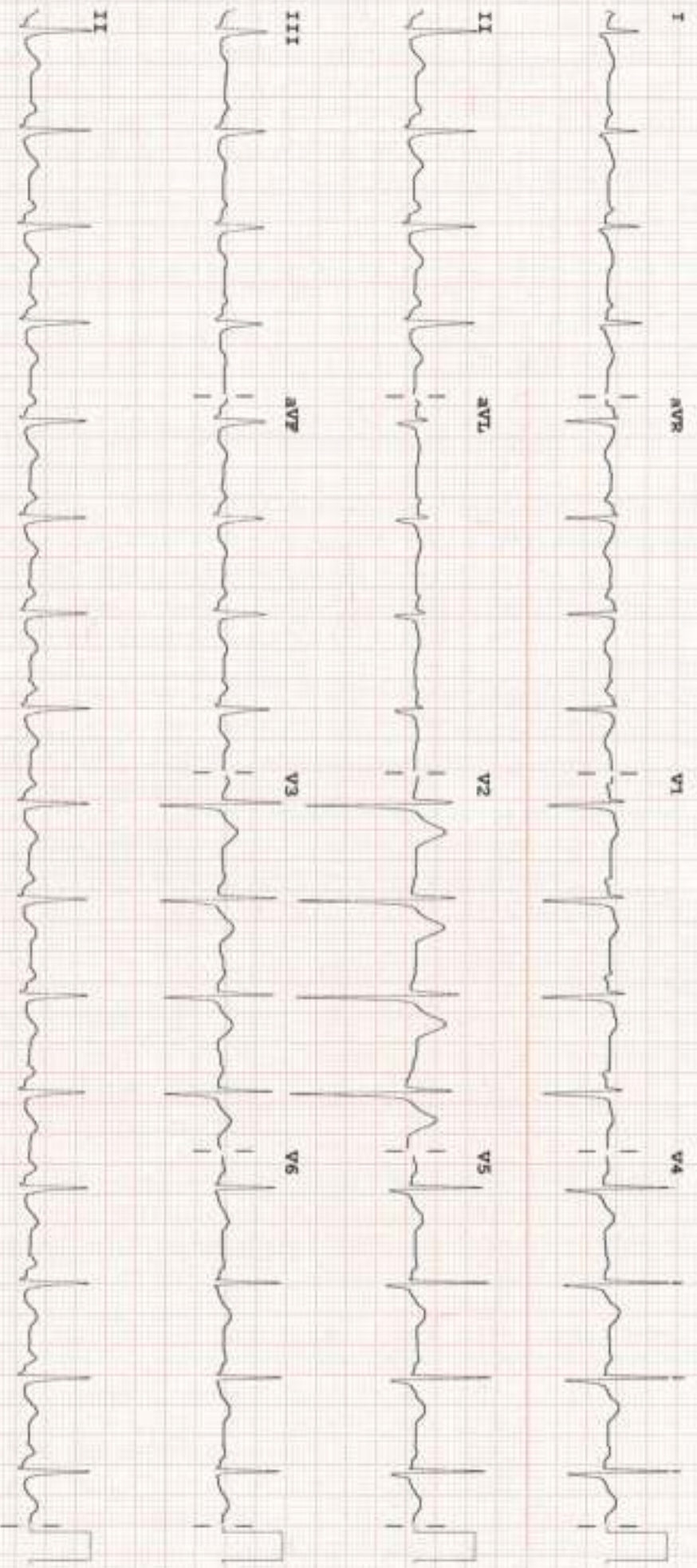
09-Mar-24 1:02:31 PM

Rate 95 Sinus rhythm..... normal p axis, V-rate 50-99
PR 141 Consider left ventricular hypertrophy..... (S V1/V2+R V5/V6) >3.50mV
QRSD 91
QT 345
QTc 434

--AXIS--
P 56
QRS 75
T 43
12 Lead: Standard Placement

- ABNORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Lamp: 10 mm/mV Chest: 10.0 mm/mV

PHILIPS

F 50 ~ 0.50 ~ 40 Hz W PH100B CL P?

REORDER NUMBER

Certificate No: MC-9697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 03:25PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 04:19PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	16.9	g/dL	13-17	Spectrophotometer
PCV	48.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.06	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	95.1	fL	83-101	Calculated
MCH	33.4	pg	27-32	Calculated
MCHC	35.1	g/dL	31.5-34.5	Calculated
R.D.W	13.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,860	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	61.6	%	40-80	Electrical Impedance
LYMPHOCYTES	26.9	%	20-40	Electrical Impedance
EOSINOPHILS	2.3	%	1-6	Electrical Impedance
MONOCYTES	8.9	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5457.76	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2383.34	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	203.78	Cells/cu.mm	20-500	Calculated
MONOCYTES	788.54	Cells/cu.mm	200-1000	Calculated
BASOPHILS	26.58	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.29		0.78- 3.53	Calculated
PLATELET COUNT	251000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	4	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC's are Normocytic Normochromic
WBC's are normal in number and morphology
Platelets are Adequate

Page 2 of 12



DR. Sanjay Ingie
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No: BED240063693

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited ICIN - U65100RG260091C1158191

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www.apollohsl.com | Email: dr.sanjay@apollohsl.com, Ph No: 040-4994 7777, Fax No: 4994 7746

Apollon Mission Premiums, Cooperative Society
Limited, Shop No.51 & 52B Floor, Building "C",
Vijaya Nagar, Pune, Maharashtra, India - 411014



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Certificate No: MC-5697

Patient Name	: Mr.CHANDRA SHEKHAR JHA	Collected	: 09/Mar/2024 11:45AM
Age/Gender	: 39 Y 2 M 26 D/M	Received	: 09/Mar/2024 03:25PM
UHID/MR No	: SPUN.0000042610	Reported	: 09/Mar/2024 06:26PM
Visit ID	: CVIMOPV595273	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 383623		

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

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



Sneha Shah
 Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist
 SIN No: BE13240063693

This test has been performed at Apollo Health and Lifestyle Ind- Sadashiv Peth Pune, Diagnostics Lab



Certificate No: MC-5697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 01:55PM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 05:16PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 07:18PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	91	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	115	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Sneha Shah

 Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist

SIN No:PLP1429474

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Certificate No: MC-5697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 03:29PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 09:36PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	2.19	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.36	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.83	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	53.7	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	32.8	U/L	<50	IFCC
ALKALINE PHOSPHATASE	90.47	U/L	30-120	IFCC
PROTEIN, TOTAL	7.50	g/dL	6.6-8.3	Biuret
ALBUMIN	4.23	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.27	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		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. • Bilirubin may be elevated.
- AST: ALT (ratio) - In case of hepatocellular injury AST: ALT > 1In 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.
- Bilirubin may be elevated. • ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

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



DR. Sanjay Ingle
M.B.B.S., M.D. (Pathology)
Consultant Pathologist

SIN No: SE04656294

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Ryoti Welfare Prasthas, Cooperative Society Limited, Shop No. 51 & 50th Floor, Building 'C', Viman Nagar, Pune, Maharashtra, India - 411014



Certificate No: MC-5697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 03:29PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 09:36PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.88	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	11.49	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	5.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.03	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.66	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.13	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142.68	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104.05	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.50	g/dL	6.6-8.3	Biuret
ALBUMIN	4.23	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.27	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		0.9-2.0	Calculated



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:SEH4656294

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited (CIN: U85110MG2000PLC115819)

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Certificate No: MC-5697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 DM	Received : 09/Mar/2024 03:28PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 09:36PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/AUTH/TPA ID : 383623	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	51.45	U/L	<55	IFCC



DR. Sanjay Ingole
M.B.B.S., M.D (Pathology)
Consultant Pathologist

SIN No:SE04656294

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited | CIN - U85110TG2000PLC1158191

Regd. Office: 1-10-49/62, Ashoka Rajghatpeth Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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Certificate No: MC-5697

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 03:28PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 05:47PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.26	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	4.272	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

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

Page 11 of 12



Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No: SPL24042373

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.CHANDRA SHEKHAR JHA	Collected : 09/Mar/2024 11:45AM
Age/Gender : 39 Y 2 M 26 D/M	Received : 09/Mar/2024 03:13PM
UHID/MR No : SPUN.0000042610	Reported : 09/Mar/2024 03:33PM
Visit ID : CVIMOPV595273	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 383623	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		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
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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



DR. Sanjay Ingle
M.B.B.S., M.D. (Pathology)
Consultant Pathologist

SIN No: UR2301857

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab
Apollo Health and Lifestyle Limited | CIN - UAS1101G2800PLC1158191

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Apollon Medicare Private, Cooperative Society Limited, Shop No.51 & 50A Floor, Building "C", Vihar Nagar, Pune, Maharashtra, India - 411014



Patient Name : Mr. Chandra Shekhar Jha Age : 39 Y M
UHID : SPUN.0000042610 OP Visit No : CVIMOPV595273
Reported on : 11-03-2024 11:23 Printed on : 11-03-2024 13:54
Adm/Consult Doctor : Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

X-RAY CHEST PA

Trachea appears normal.

Both the lung fields are clear.

Cardiac shadows appear apparently normal.

Both domes of diaphragm appear normal.

Both costophrenic angles are clear.

Bony thoracic cage shows no deformity. Visualised bones appear normal.

Soft tissues appear normal.

Impression: Essentially Normal Study.

Printed on: 11-03-2024 11:23

---End of the Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
Radiology