

Patient Name : Mr.ABHINAV KUMAR	Collected : 11/Oct/2024 09:40AM
Age/Gender : 38 Y 2 M 1 D/M	Received : 11/Oct/2024 03:14PM
UHID/MR No : CSAR.0000145724	Reported : 11/Oct/2024 05:47PM
Visit ID : CSAROPV358809	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S34988	

DEPARTMENT OF HAEMATOLOGY

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

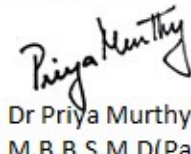
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.1	g/dL	13-17	Spectrophotometer
PCV	42.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	6.02	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	71.2	fL	83-101	Calculated
MCH	23.4	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	15	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,000	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	53.5	%	40-80	Electrical Impedence
LYMPHOCYTES	39	%	20-40	Electrical Impedence
EOSINOPHILS	2.5	%	1-6	Electrical Impedence
MONOCYTES	4.6	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4280	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3120	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	200	Cells/cu.mm	20-500	Calculated
MONOCYTES	368	Cells/cu.mm	200-1000	Calculated
BASOPHILS	32	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.37		0.78- 3.53	Calculated
PLATELET COUNT	269000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	22	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBCs: Show crowding and mild anisopoikilocytosis with predominance of Microcytic hypochromic RBCs. Occasional target cells are seen..

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



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PLATELETS: appear adequate in number.

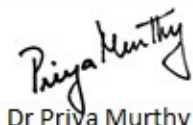
HEMOPARASITES: negative

IMPRESSION: MICROCYTIC HYPOCHROMIC BLOOD PICTURE

Note: Kindly evaluate for incipient iron deficiency status/hemoglobinopathy.



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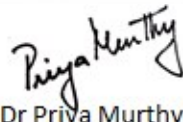
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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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Patient Name : Mr.ABHINAV KUMAR	Collected : 11/Oct/2024 12:06PM
Age/Gender : 38 Y 2 M 1 D/M	Received : 11/Oct/2024 06:03PM
UHID/MR No : CSAR.0000145724	Reported : 11/Oct/2024 06:35PM
Visit ID : CSAROPV358809	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	99	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:

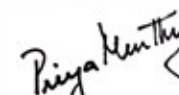
- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	77	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.


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: SAR241001188

Apollo Health and Lifestyle Limited

(CIN - U061107C2800PHG115839)

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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	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	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.

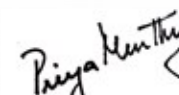
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241001157

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115819)
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DEPARTMENT OF BIOCHEMISTRY


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

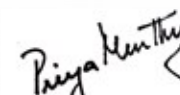
Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	149	mg/dL	<200	CHO-POD
TRIGLYCERIDES	117	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	50	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	99	mg/dL	<130	Calculated
LDL CHOLESTEROL	75.7	mg/dL	<100	Calculated
VLDL CHOLESTEROL	23.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.98		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.01		<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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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241001159

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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	0.85	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.71	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	46	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	34.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.7		<1.15	Calculated
ALKALINE PHOSPHATASE	104.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.37	g/dL	6.6-8.3	Biuret
ALBUMIN	4.37	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.46		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:

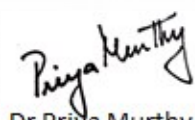
*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate 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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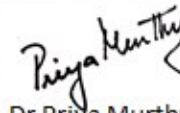
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DEPARTMENT OF BIOCHEMISTRY

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	1.07	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	21.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.50	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.80	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.91	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.37	g/dL	6.6-8.3	Biuret
ALBUMIN	4.37	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.46		0.9-2.0	Calculated


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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	43.00	U/L	<55	IFCC

Priya Murthy

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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)	1.02	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.56	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.545	µIU/mL	0.34-5.60	CLIA

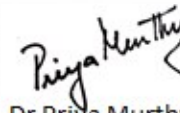
Comment:

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


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


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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241001158

Apollo Health and Lifestyle Limited (CIN - U061107C2800PH6115849)
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
 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

Address:
 Apollo Health and Lifestyle Limited, Apollo Health and Lifestyle Ltd, RRL BANGALORE Laboratory, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034



 1860 500 7788
 www.apolloclinic.com

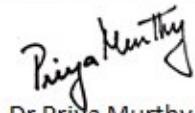
Patient Name : Mr.ABHINAV KUMAR	Collected : 11/Oct/2024 09:40AM
Age/Gender : 38 Y 2 M 1 D/M	Received : 11/Oct/2024 03:13PM
UHID/MR No : CSAR.0000145724	Reported : 11/Oct/2024 05:09PM
Visit ID : CSAROPV358809	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S34988	

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--


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


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



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 SIN No: SAR241001158

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

Address:
 32/100/125, Doddabangla Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


1860 500 7788
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)

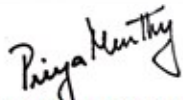
Patient Name : Mr.ABHINAV KUMAR	Collected : 11/Oct/2024 09:40AM
Age/Gender : 38 Y 2 M 1 D/M	Received : 11/Oct/2024 05:45PM
UHID/MR No : CSAR.0000145724	Reported : 11/Oct/2024 06:16PM
Visit ID : CSAROPV358809	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S34988	

DEPARTMENT OF CLINICAL PATHOLOGY

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



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



Dr Priya Murthy
M.B.B.S,M.D(Pathology)
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AND LIFESTYLE LIMITED- RRL BANGALORE



Patient Name : Mr.ABHINAV KUMAR	Collected : 11/Oct/2024 09:40AM
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Emp/Auth/TPA ID : 22S34988	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

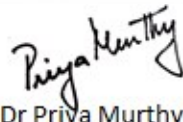
Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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

AND LIFESTYLE LIMITED- RRL BANGALORE



Patient Name : Mr.ABHINAV KUMAR
Age/Gender : 38 Y 2 M 1 D/M
UHID/MR No : CSAR.0000145724
Visit ID : CSAROPV358809
Ref Doctor : Self
Emp/Auth/TPA ID : 22S34988

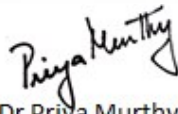
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TERMS AND CONDITIONS GOVERNING THIS REPORT

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. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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

AND LIFESTYLE LIMITED- RRL BANGALORE



Regd. Office: CSAR 24th Floor, Pathi 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

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Karnataka - 560034



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Patient Name	: Mr. Abhinav Kumar	Age	: 38Yrs 2Mths 2Days
UHID	: CSAR.0000145724	OP Visit No.	: CSAROPV358809
Printed On	: 11-10-2024 10:34 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S34988		

DEPARTMENT OF RADIOLOGY

ULTRASONOGRAPHY OF ABDOMEN &

PELVIS

LIVER : Normal in size 12CM & **Increased echotexture.**

No focal lesion seen. No intra hepatic biliary duct dilatation. Portal & hepatic veins appears normal. CBD is not dilated.

GALL BLADDER :Minimally distended. No intraluminal calculi seen. Wall thickness is normal.

PANCREAS : Obscured by bowel gas. However the visualized parts of the pancreas appear grossly normal. Para-Aortic areas could not be seen.

SPLEEN : Normal in size and echotexture normal. No focal / diffuse lesions.

KIDNEYS : Both kidneys are normal in size (RK: 9.4 X 4.5 CM, LK: 9.5 X 5 CM) and echotexture. No calculi. No pelvicalyceal dilatation on both sides. Corticomedullary differentiation is well maintained.

URINARY BLADDER : Moderately distended. No intraluminal calculi/mass lesion seen.

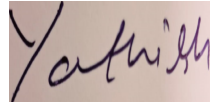
PROSTATE : Normal in size & echotexture.

IMPRESSION:

Grade I fatty liver.

(The sonography findings should always be considered in correlation with the clinical and other investigation findings where applicable).It is only a professional opinion.Not valid for medico-legal purpose) Higher imaging techniques to be done, depending on the condition of the patient, if clinically needed.

---End Of The Report---



Dr. YATHISH B M
MBBS, MD. RADIO DIAGNOSIS
129691
Radiology

Patient Name	: Mr. Abhinav Kumar	Age	: 38Yrs 2Mths 2Days
UHID	: CSAR.0000145724	OP Visit No.	: CSAROPV358809
Printed On	: 11-10-2024 09:27 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S34988		

DEPARTMENT OF RADIOLOGY

CHEST PA VIEW

Trachea central.
Mediastinum is central.
Cardiac silhouette appear normal.
visualized lung fields appear normal.
Bilateral hilum appear normal.
CP angles are clear.

IMPRESSION : No obvious gross abnormality noted in the x-ray.

ADVICE : Higher imaging techniques to be done, if clinically needed, depending on the clinical condition of the patient for further evaluation.

---End Of The Report---



Dr. RAMESH G
MBBS, DMRD
27462
Radiology

Patient Name	: Mr. Abhinav Kumar	Age	: 38Yrs 2Mths 7Days
UHID	: CSAR.0000145724	OP Visit No.	: CSAROPV358809
Printed On	: 16-10-2024 10:50 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Reffered By	: Self	Registration No.	: --
Employeer Id	: 22S34988		

DEPARTMENT OF CARDIOLOGY

2D ECHO CARDIOGRAPHY REPORT

M-MODE MEASUREMENTS

AORTA : 2.6cm LV (D) 4.3cm IVS (D) : 1.1cm
LA : 3.4cm LV (S) : 2.8cm PW (S) : 1.1 cm
EF : 58%

VALVES

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED, NORMAL LV SYSTOLIC FUNCTION
RIGHT VENTRICLE : NORMAL SIZED, TAPSE-19 MM, NORMAL RV FUNCTION

SEPTAE

IAS : INTACT
IVS : INTACT

GREAT ARTERIES

AORTA : NORMAL
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

DOPPLER FLOW VELOCITIES

MITRAL FLOW - E/A 0.9/0.5 m/sec, Normal LV Diastolic function, MR- Trivial

AORTIC FLOW PG-08 mmHg

TRICUSPID FLOW PASP -29 mmHg, TR-Trivial

PULMONARY FLOW PG-05 mmHg

REGIONAL WALL MOTION: NO RWMA

OTHER FINDINGS

IVC -15 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE

IMPRESSION

NORMAL CHAMBER DIMENSIONS

NORMAL VALVES

NORMAL PA PRESSURE

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LV SYSTOLIC FUNCTION

NO CLOT / EFFUSION / VEGETATION

LIMITED ECHO WINDOW

DR .SAIKAT KANJILAL

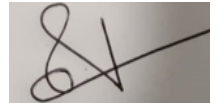
CONSULTANT INTERVENTIONAL CARDIOLOGY

PRASAD.B

CARDIAC SONOGRAPHER

Note: investigations have their limitations solitary pathological/ Radiological and investigations never confirm the final diagnosis they are help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly ,this report is not for medico-legal Purpose

---End Of The Report---



Mr.PRASAD BOODUGURI
BSC, DIP IN CARDIO TECH
19XXMCC04712/TSPMB
Cardiology

Patient Name	: Mr. Abhinav Kumar	Age	: 38Yrs 2Mths 7Days
UHID	: CSAR.0000145724	OP Visit No.	: CSAROPV358809
Printed On	: 16-10-2024 10:44 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S34988		

DEPARTMENT OF CARDIOLOGY

Observation :-


1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:-

NORMAL RESTING ECG.

NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED

---End Of The Report---



Dr. SUMANJITA BORA
MBBS, PGDCC
MCI-IMR-13/903
Cardiology

**APOLLO CLINIC
CONSENT FORM**

Patient name Abhishek Age 38 Y/M

UHID Number 145724 Company Name Mediwheel

Company want to inform u that I am ^{later} ~~not~~ interested in getting ENT, fitness by g.p.

Opthal.....And I claim the above statement in my full Consciousness.

Patient signature [Signature] Date 11/10/24

Name : Mr. Abhinav Kumar

Age : 38Y 2M 1D

UHID : CSAR.0000145724

Address : Handenahalli Bangalore Karnataka INDIA 562125

sex : Male



CSAR.0000145724

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
PAN INDIA OP AGREEMENT

OP No: CSAROPV358809

Bill No: CSAR-OCR-49089

Date: Oct 11th, 2024, 9:33 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	Consultation	<input type="checkbox"/>
3	FITNESS BY GENERAL PHYSICIAN	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	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	Cardiology	<input type="checkbox"/>
22	ECG	Cardiology	<input type="checkbox"/>
23	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
24	DIET CONSULTATION	General	<input type="checkbox"/>

Eye 1 day

- 18 by 12

- 8

- 9

- 18 by 11

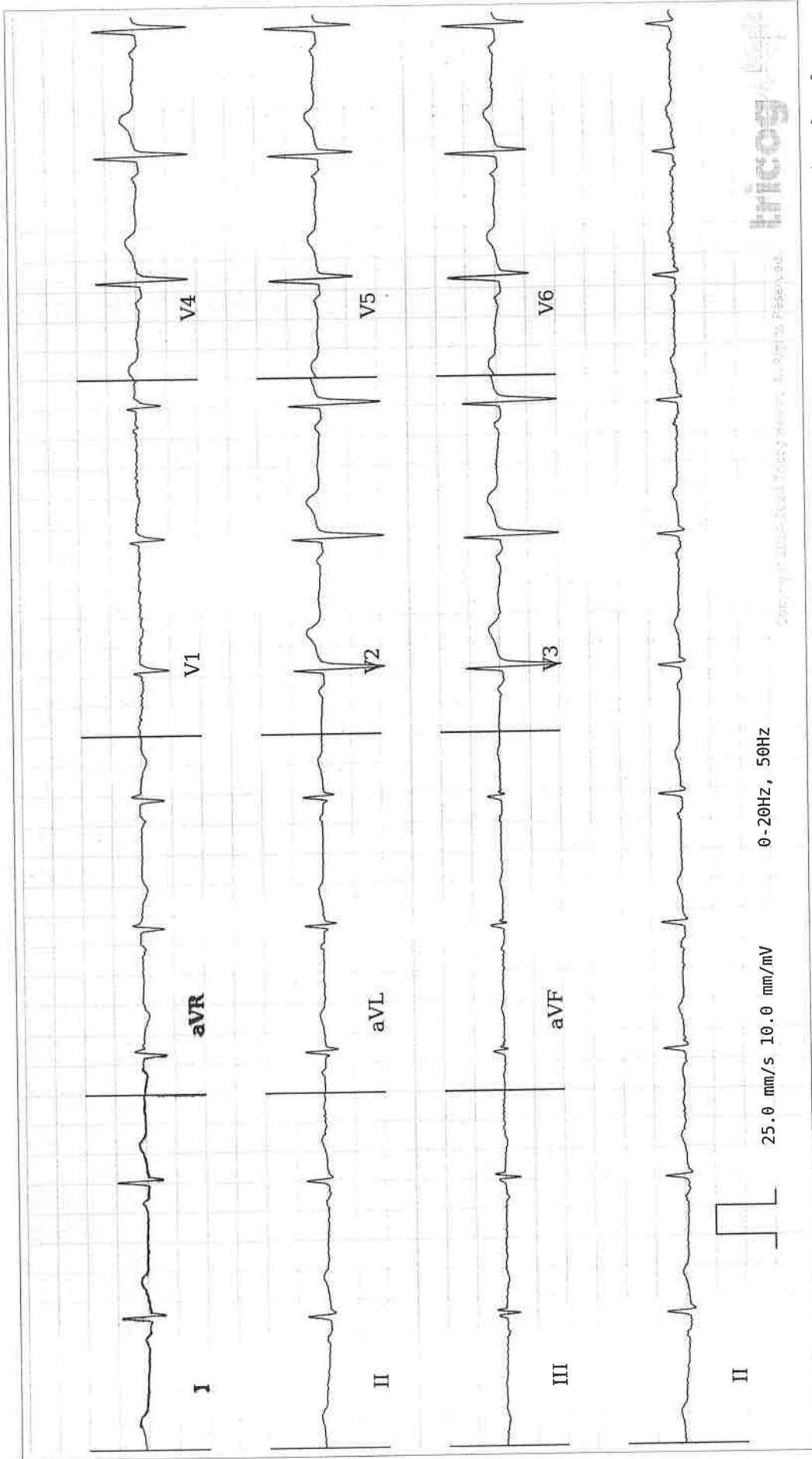
- 10

*Wt 75.5 kg
Ht. 166 cm
BP: 122/83 mmHg
Pulse 74/64
BGL 27.3*



Age / Gender: 38/Male
Patient ID: ABHINAV

Date and Time: 11th Oct 24 10:01 AM



REPORTED BY

Dr. Soumya Rao

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

ORAL EXAMINATION FORM



Date: 11/10/24

Patient ID: 145724 MHC

Patient Name: Mr. Abhinav Kumar Age: 38 Sex: Male Female

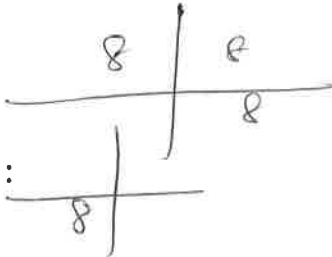
Chief Complaint:

Medical History:

Drug Allergy:

Medication currently taken by the Guest:

Initial Screenign Findings:

Dental Caries: 

Impacted Teeth:

Bleeding:

Calculus / Stains: tu

Restored Teeth:

Malocclusion:

Missing Teeth:

Attrition / Abrasion:

Pockets / Recession:

Mobility:

Non - restorable Teeth for extraction / Root Stumps:

Others:

For Appontments,
Call Us at
Mob-8870032885

Advice:- Sealing
OPG apollo bangalore 64@gmail.com
Doctor Dr. Ramya
Name & Signature:



2D ECHO CARDIOGRAPHY REPORT

PATIENT NAME: MR.ABHINAV KUMAR

AGE : 38 YEARS/MALE

Date:11/10/2024

M-MODE MEASUREMENTS

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TRICUSPID FLOW PASP -29 mmHg, TR-Trivial
PULMONARY FLOW PG-05 mmHg

REGIONAL WALL MOTION: NO RWMA

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT



OTHER FINDINGS

IVC -15 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE

IMPRESSION

NORMAL CHAMBER DIMENSIONS

NORMAL VALVES

NORMAL PA PRESSURE

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LIMITED ECHO WINDOW

DR .SAIKAT KANJILAL

CONSULTANT INTERVENTIONAL CARDIOLOGY

PRASAD.B
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Note: investigations have their limitations solitary pathological/ Radiological and investigations never confirm the final diagnosis they are help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly ,this report is not for medico-legal Purpose

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TO BOOK AN APPOINTMENT



Issue Date: 17/10/2011



भारत सरकार
Government of India



अभिनव कुमार

Abhinav Kumar

जन्म दिनांक / DOB: 10/08/1986

पुरुष / Male

आधार

5791 4815 9054

श्री आशार, श्री पहचान

5791 4815 9054



Fwd: Health Check up Booking Confirmed Request(22S34988),Package Code-PKG10000366, Beneficiary Code-302448

From akanksha srivastava <kittu991988@gmail.com>
Date Fri 11-10-2024 08:32
To Sarjapur Apolloclinic <sarjapur@apolloclinic.com>

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

From: **Mediwheel** <wellness@mediwheel.in>
Date: Wed, 9 Oct 2024 at 2:58 PM
Subject: Health Check up Booking Confirmed Request(22S34988),Package Code-PKG10000366, Beneficiary Code-302448
To: <kittu991988@gmail.com>
Cc: <customercare@mediwheel.in>

011-41195959

Dear **Akanksha srivastava**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name : Mediwheel Full Body Annual Plus
Name of Diagnostic/Hospital : Apollo Clinic - Sarjapur Road
Address of Diagnostic/Hospital : Apollo Clinic, #769, GYR Chambers, Opp South Indian Bank, Kalkondanahalli, Sarjapur Road -560034
City : Bangalore
State : Karnataka
Pincode : 560034
Appointment Date : 11-10-2024
Confirmation Status : Booking Confirmed
Preferred Time : 08:00 AM - 08:30 AM
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Abhinav kumar	38 year	Male

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

