

S. No	Company Name
26	Arcofemi/Mediwheel/MALE/FEMALE
29	Arcofemi/Mediwheel/MALE/FEMALE

PACKAGE NAME	Booking ID
Arcofemi MediWheel Full Body Health Annual Plus Check Female 2D ECHO	bobS8552
Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO	bobE8539

EMP-NAME	AGE	GENDER
SWAPNA PULI	31 year	Female
MR. KONATHAM SATYAANAND	37 year	Male

EMAIL	CONTACT NO	Appointment Date	Appointment Time
satyaanand.konatham@gmail.com	7702564669	2/10/2024	9:00 AM
satyaanand.konatham@gmail.com	7702564669	2/10/2024	9:00 AM

CLINIC NAME	CLINIC STATE	CLINIC CITY
Apollo Clinic - Uppal	Telangana	Hyderabad
Apollo Clinic - Uppal	Telangana	Hyderabad

CLINIC ADDRESS

Apollo Clinic, Plot no:977,Survey no:45-50,H No:6-48/3,Near Pillar no:91, Beside Ramraj Cotton Show room, Canar

Apollo Clinic, Plot no:977,Survey no:45-50,H No:6-48/3,Near Pillar no:91, Beside Ramraj Cotton Show room, Canar

Booking Status

If 2D ECHO Slot are Full or 2D Echo Facility not Available book TMT Package

If 2D ECHO Slot are Full or 2D Echo Facility not Available book TMT Package

Apollo Status	Remarks
Confirmed at 9:00 AM	
Confirmed at 9:00 AM	



భారత ప్రభుత్వం
Government of India

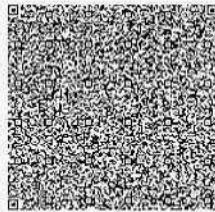
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 0000/00942/04094

To
సత్యానంద్ కొణతం
Satyaanand Konatham
S/O KONATHAM VENKATA RAMANAIAH
1-10-20/AB
KASAVA RAJUVARU STREET
REVENUE WARD NO 1
Kavali
Sri Potti Sriramulu Nellore Andhra Pradesh - 524201
7702564669

Validity unknown

Digitally signed by Satyaanand Konatham
DN: cn=S/O KONATHAM VENKATA RAMANAIAH, o=Unique Identification Authority of India, email=satyaanand.konatham@uidai.gov.in, c=IN, Date: 2022.07.07 14:02:15 UTC



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

6226 0892 5124

VID : 9151 7759 2376 8993

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



సత్యానంద్ కొణతం
Satyaanand Konatham
పుట్టిన తేదీ/DOB: 27/07/1986
పురుషుడు/ MALE

Issue Date: 09/12/2011

6226 0892 5124

VID : 9151 7759 2376 8993

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



సమాచారము / INFORMATION

- ఆధార్ అనేది గుర్తింపు రుజువు, పౌరసత్వానికి కాదు.
- ఆధార్ ప్రత్యేకమైనది మరియు సురక్షితమైనది.
- సురక్షిత QR కోడ్/ఆఫ్లైన్ XML/ఆఫ్లైన్ ప్రమాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.
- ఆధార్ లేటర్, PVC కార్డు, ఆధార్, ఎం ఆధార్ వంటి అన్ని రకాల ఆధార్ లు సమానంగా చెల్లుబాటు అవుతాయి. 12 అంకెల ఆధార్ నంబర్ స్థానంలో వర్చువల్ ఆధార్ ఐడెంటిటీ (VID)ని కూడా ఉపయోగించవచ్చు.
- కనీసం 10 సంవత్సరాలకు ఒకసారి ఆధార్ ను అప్డేట్ చేయండి.
- వినయ ప్రభుత్వ మరియు ప్రభుత్వేతర ప్రయోజనాలు/సేవలను పొందడంలో ఆధార్ మీకు సహాయపడుతుంది.
- మీ మొబైల్ నంబర్ మరియు ఈ-మెయిల్ వాడేని ఆధార్ లో అప్డేట్ చేసుకోండి.
- ఆధార్ సేవలను పొందేందుకు స్మార్ట్ ఫోన్లలో ఎం ఆధార్ యాప్ ను డౌన్లోడ్ చేసుకోండి.
- ప్రభుత్వ నిర్ధారించడానికి లాక/అన్లాక్ ఆధార్/బయోమెట్రిక్స్ పీచర్స్ ఉపయోగించండి.
- ఆధార్ ను అప్డేట్ చేసే సంస్థలు తగిన సమ్మతిని పొందవలసి ఉంటుంది.
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non- Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due consent.



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Unique Identification Authority of India

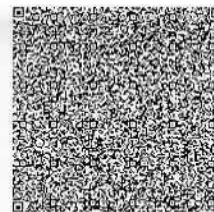


వరుసామా:

స/కొణతం వెంకట రమణయ్య, 0-00-20/అబ్, కేవల రజావారి స్ట్రీట్, రెవెన్యూ వార్డు నెం 01, కావాలి, శ్రీ పొట్టి శ్రీరాములు నెల్లూరు, ఆంధ్ర ప్రదేశ్ - 524201

Address:

S/O KONATHAM VENKATA RAMANAIAH, 1-10-20/AB, KASAVA RAJUVARU STREET, REVENUE WARD NO 1, Kavali, Sri Potti Sriramulu Nellore, Andhra Pradesh - 524201



6226 0892 5124

VID : 9151 7759 2376 8993

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The Apollo Clinic
PHYSICAL EXAMINATION FORM

Apollo Clinic
Established in 1983

Date 10/2/24 Age 37y/m
Name Mr. K. Satyanand UHID: 85837
Height Cms BMI
Weight Kgs BP

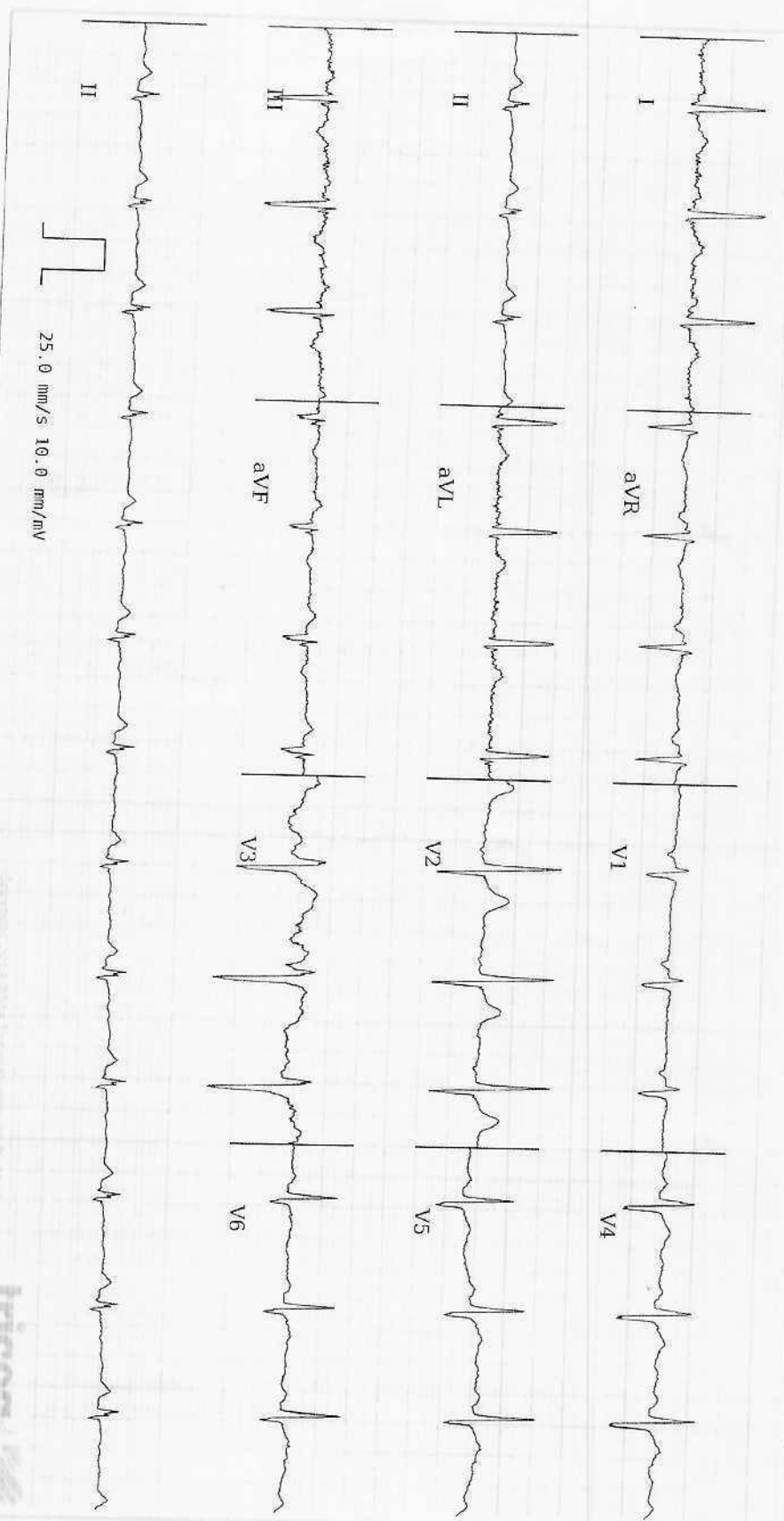
Apollo Clinic, H NO.6-48/3, PEERZADIGUDA, BESIDE RAMRAJ
COTTONS, BODUPPAL, R RDISTRCT, HYD PH. NO.04049503373/74



Apollo clinic Boduppal

Age / Gender: 37 Male
Patient ID: 00000085837
Patient Name: Mr. Sanyand

Date and Time: 10th Feb 24 10:44 AM



ECG Within Normal Limits: Sinus rhythm, leftward axis, correlate clinically. 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

AR: 85bpm VR: 85bpm QRSD: 94ms QT: 372ms QTcB: 442ms PRI: 154ms P-R-T: 54° -19° -5°

REPORTED BY



72045

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of
Mr. K. Satya Anand on 12/2/24.

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

<ul style="list-style-type: none"> • Medically Fit 	<p>Tick</p> <input checked="" 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.</p> <p>2.</p> <p>3.</p> <p>However the candidate 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. <p>Review after.....recommended.</p>	
<ul style="list-style-type: none"> • Unfit 	

[Signature]
D. K. OPPULA TRIVENI
MBBS
Reg No - 05078R05078
TSMC
Consultant physician
Apollo Clinic
Uppal

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)
Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

POWER PRESCRIPTION

NAME: K. Satya Arand

GENDER: M/F

DATE: 10/2/24

AGE: 34

UHID: 85837

RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE				6/6
NEAR				N6

LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	-			6/6
NEAR				N6

COLOUR VISION : BE: Normal

DIAGNOSIS :
OTHER FINDINGS: } Nil

INSTRUCTIONS :



SIGNATURE

Patient Name	: Mr. KONATHAM SATYAANAND	Age	: 37 Y/M
UHID	: CUPP.0000085837	OP Visit No	: CUPPOPV129465
Reported By:	: Dr. VINAY KUMAR GUPTA	Conducted Date	: 10-02-2024 20:48
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 85beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement see

Impression:

NORMAL ECG.

LEFTWARD AXIS,

CORRELATE CLINICALLY.

----- END OF THE REPORT -----

Dr. VINAY KUMAR GUPTA

Patient Name : Mr. KONATHAM SATYANAND Age : 37 Y/M
UHID : CUPP.0000085837 OP Visit No : CUPPOPV129465
Conducted By: : Dr. CH VENKATESHAM Conducted Date : 10-02-2024 16:05
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.2 CM
LA (es)	3.5 CM
LVID (ed)	4.6 CM
LVID (es)	3.0 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	1.0 CM
EF	67.00%
%FD	33.00%
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

Patient Name	: Mr. KONATHAM SATYAANAND	Age	: 37 Y/M
UHID	: CUPP.0000085837	OP Visit No	: CUPPOPV129465
Conducted By:	: Dr. CH VENKATESHAM	Conducted Date	: 10-02-2024 16:05
Referred By	: SELF		

COLOUR AND DOPPLER STUDIES

AJV=1.4

PJV=0.9

E=0.9

A=0.6

IMPRESSION

NORMAL SIZED CARDIAC CHAMBERS & VALVES


NORMAL BLOOD FLOWS

NO RWMA / LVH

GOOD LV / RV FUNCTIONS

NO CLOT / P.E.

Patient Name : Mr. KONATHAM SATYAANAND Age : 37 Y/M
UHID : CUPP.0000085837 OP Visit No : CUPPOPV129465
Conducted By: : Dr. CH VENKATESHAM Conducted Date : 10-02-2024 16:05
Referred By : SELF



Patient Name : Mr. KONATHAM SATYAANAND

Age/Gender : 37 Y/M

UHID/MR No. : CUPP.0000085837

OP Visit No : CUPPOPV129465

Sample Collected on :

Reported on : 10-02-2024 17:54

LRN# : RAD2231324

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 200198/351460

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. MATTA JYOTHIRMAI
MBBS, MDRD
Radiology

Patient Name : Mr. KONATHAM SATYANAND

Age/Gender : 37 Y/M

UHID/MR No. : CUPP.0000085837

OP Visit No : CUPPOPV129465

Sample Collected on :

Reported on : 10-02-2024 16:03

LRN# : RAD2231324

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 200198/351460

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size 129 mm and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal in size 118 mm. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney : 95 x 47 mm.

Left kidney : 108 x 50 mm.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

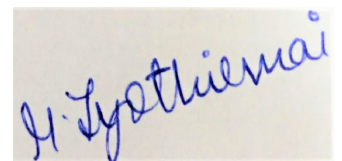
Prostate is normal in size 37 x 33 x 31 mm and echo texture. Volume measure 21 cc. No evidence of necrosis/calcification seen.

IMPRESSION:-

No significant abnormality detected.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Dr. MATTA JYOTHIRMAI
MBBS, MDRD
Radiology


Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 12:50PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 02:34PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.9	g/dL	13-17	Spectrophotometer
PCV	46.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.57	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	83.6	fL	83-101	Calculated
MCH	28.5	pg	27-32	Calculated
MCHC	34.1	g/dL	31.5-34.5	Calculated
R.D.W	14.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,640	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	47.9	%	40-80	Electrical Impedance
LYMPHOCYTES	42.2	%	20-40	Electrical Impedance
EOSINOPHILS	3.1	%	1-6	Electrical Impedance
MONOCYTES	5.8	%	2-10	Electrical Impedance
BASOPHILS	1	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2222.56	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1958.08	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	143.84	Cells/cu.mm	20-500	Calculated
MONOCYTES	269.12	Cells/cu.mm	200-1000	Calculated
BASOPHILS	46.4	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	236000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC
WBC WITHIN NORMAL LIMITS
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN



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

SIN No: BED240032915

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



Patient Name : Mr.KONATHAM SATYAANAND
Age/Gender : 37 Y 6 M 14 D/M
UHID/MR No : CUPP.0000085837
Visit ID : CUPPOPV129465
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 200198/351460

Collected : 10/Feb/2024 08:38AM
Received : 10/Feb/2024 12:50PM
Reported : 10/Feb/2024 02:34PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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

SIN No:BED240032915

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

Page 2 of 15
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Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 12:50PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 04:14PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF HAEMATOLOGY

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

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



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

SIN No:BED240032915

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad



Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 12:51PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 02:08PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	81	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 > 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. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	87	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.

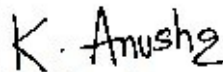
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues,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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE	105	mg/dL		Calculated



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:EDT240014398



Dr.K.Anusha
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist

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This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 12:51PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 02:08PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF BIOCHEMISTRY

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

(eAG)

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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SIN No:EDT240014398

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

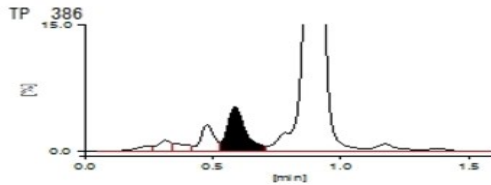
Chromatogram Report

HLC72368 V5.28 1 2024-02-10 13:47:19
 ID EDT240014398
 Sample No. 02100094 SL 0002 - 07
 Patient ID
 Name
 Comment

CALIB Name	%	Time	Area
A1A	0.4	0.24	6.56
A1B	0.7	0.32	10.29
F	0.6	0.39	8.79
LA1C+	1.8	0.48	27.74
SA1C	5.3	0.59	63.37
AO	93.0	0.89	1443.42
H-V0			
H-V1			
H-V2			

Total Area 1560.17

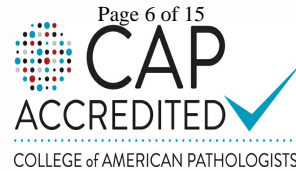
HbA1c 5.3 % **IFCC 34 mmol/mol**
 HbA1 6.4 % HbF 0.6 %



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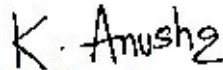
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324



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


Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	156	mg/dL	<200	CHO-POD
TRIGLYCERIDES	80	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	41	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	115	mg/dL	<130	Calculated
LDL CHOLESTEROL	99	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.80		0-4.97	Calculated

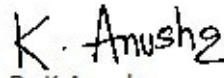
Comment:

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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.


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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. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.85	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.69	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	9.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	47.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.70	g/dL	6.6-8.3	Biuret
ALBUMIN	4.45	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.25	g/dL	2.0-3.5	Calculated
A/G RATIO	1.98		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:

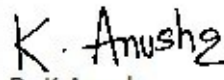
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.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

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.


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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.82	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	13.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.51	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.81	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101-109	ISE (Indirect)

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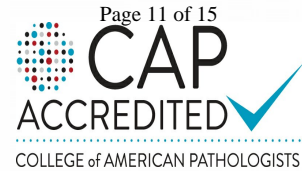
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	16.00	U/L	<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. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.98	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	9.49	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.313	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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



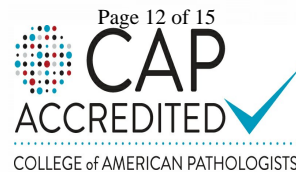
Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:SPL24021594

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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H. No 6-48/3, Peerzadiguda Panchayat, Boduppal,
R R District., Uppal, Hyderabad, Telangana, India - 500039



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.KONATHAM SATYAANAND
Age/Gender : 37 Y 6 M 14 D/M
UHID/MR No : CUPP.0000085837
Visit ID : CUPPOPV129465
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 200198/351460

Collected : 10/Feb/2024 08:38AM
Received : 10/Feb/2024 01:21PM
Reported : 10/Feb/2024 03:42PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Maruthi...

Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:SPL24021594

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 **1860 500 7788**
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Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 05:05PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 08:49PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - 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	HAZY		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	TRACE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4-5	/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


Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UR2278928

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Patient Name : Mr.KONATHAM SATYAANAND	Collected : 10/Feb/2024 08:38AM
Age/Gender : 37 Y 6 M 14 D/M	Received : 10/Feb/2024 05:04PM
UHID/MR No : CUPP.0000085837	Reported : 10/Feb/2024 08:48PM
Visit ID : CUPPOPV129465	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 200198/351460	

DEPARTMENT OF CLINICAL PATHOLOGY

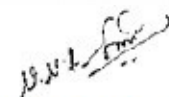
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

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

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UF010488

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