

Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:52AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:06PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	15.5	g/dL	13-17	Spectrophotometer
PCV	45.10	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.76	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	94.7	fL	83-101	Calculated
MCH	32.5	pg	27-32	Calculated
MCHC	34.3	g/dL	31.5-34.5	Calculated
R.D.W	15.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	3,660	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	44.1	%	40-80	Electrical Impedence
LYMPHOCYTES	45.7	%	20-40	Electrical Impedence
EOSINOPHILS	1.4	%	1-6	Electrical Impedence
MONOCYTES	8.4	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	1614.06	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1672.62	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	51.24	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	307.44	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	14.64	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	171000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

RBC ANISOCYTOSIS
WBC MILD LEUCOPENIA
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN.



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



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Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:52AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 02:25PM
Visit ID : SPUNOPV57683	Status : Final Report
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Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	99	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	93	mg/dL	70-140	HEXOKINASE
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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.

Ref: Marks medical biochemistry and clinical approach

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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
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	103	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



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Visit ID : SPUNOPV57683	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	246	mg/dL	<200	CHO-POD
TRIGLYCERIDES	121	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	61	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	186	mg/dL	<130	Calculated
LDL CHOLESTEROL	161.54	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.14	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.06		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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	1.90	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.26	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.63	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	29.15	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.4	U/L	<50	IFCC
ALKALINE PHOSPHATASE	67.86	U/L	30-120	IFCC
PROTEIN, TOTAL	7.34	g/dL	6.6-8.3	Biuret
ALBUMIN	4.69	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.77		0.9-2.0	Calculated



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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
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.64	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	17.94	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.43	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.12	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.41	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139.74	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103.95	mmol/L	101–109	ISE (Indirect)



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UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:55PM
Visit ID : SPUNOPV57683	Status : Final Report
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Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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	29.60	U/L	<55	IFCC



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Emp/Auth/TPA ID : 45102	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.99	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.94	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.498	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

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



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Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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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 - 3	/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



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:50AM
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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. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

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

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



Name :- Ranjeet Nirmal

Test pending :-

1 Fitness General Consultation

2. USG

3 Dental Consultation

Name : Mr. Ranjeet Ramdas Nirmal

Age: 36 Y

UHID:SPUN.0000044340

Sex: M



Address : Pune Nanded city

OP Number:SPUNOPV57683

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Bill No :SPUN-OCR-9549

Date : 12.08.2023 09:00

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

Ranjeetnirmal09@gmail.com.

8975796251


CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Ranjeet Nirmal on 12/08/23

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. Samrat Shah 
 General Physician
 Apollo Spectra Hospital Pune

This certificate is not meant for medico-legal purposes

Dr. Samrat Shah
 MBBS MD
 Reg No. 2021097302
 Consultant Internal Medicine
 Apollo Speciality Hospital

Apollo Clinic

CONSENT FORM

Patient Name: Ranjeet Kumar Age: 36

UHID Number: Company Name: Bank of Baroda

I Mr/Mrs/Ms Ranjeet Kumar Employee of Bank of Baroda

(Company) Want to inform you that I am not interested in getting USG & Dental, Physiotherapy
fitness

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: [Signature] Date: 12/08/23

Date : 12/08/23
MRNO : SPUN.0000044340
Name : Mr. Ranjit Nirmal
Age/Gender : 36/M
Mobile No :

Department : G.P
Consultant : Dr. Samrat Shah
Reg. No :
Qualification :

Consultation Timing :

SPO₂:-

Pulse : 84/m	B.P : 120/86	Resp : 18/m	Temp : 98'f
Weight : 57.2kg	Height : 166 cm	BMI : 20.7	Waist Circum : -

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Date : 12/08/23
MRNO : SPUN. 44340
Name : Mr. Ranjeet Nirmal
Age/Gender : 36/M
Mobile No :

Department : ENT
Consultant : Dr. Sushrut. Deshmukh
Reg. No :
Qualification :

Consultation Timing :

Pulse :	B.P :	Resp :	Temp :
Weight :	Height :	BMI :	Waist Circum :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

S/B DR. SUSHRUT
DESHMUKH
MC(ENT)

O/E

EAR — B/L MILDLY RETRACTED
TM

NOSE — NAD

THROAT — NAD

ENT — NAD

Follow up date:



Doctor Signature



Patient Name: MR. RANJEET NIRMAL 36Y
Age: 36 Years

Gender: M
Image Count: 1
Arrival Time: 12-Aug-2023 10:12

MR No: SPUN.000044340
Location: Apollo Spectra Hospital Pune
(Swargate)

Physician: SELF
Date of Exam: 12-Aug-2023
Date of Report: 12-Aug-2023 14:12



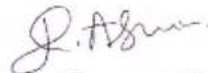
X-RAY CHEST PA VIEW

FINDINGS

Normal heart and mediastinum.
There is no focal pulmonary mass lesion is seen.
No collapse or consolidation is evident.
The apices, costo and cardiophrenic angles are free.
No hilar or mediastinal lymphadenopathy is demonstrated.
There is no pleural or pericardial effusion.
No destructive osseous pathology is evident.

IMPRESSION:

No significant abnormality is seen.


Dr. Aswin Kumar, MD.
Consultant Radiologist
REG NO: 113870

CONFIDENTIALITY:

This transmission is confidential. If you are not the intended recipient, please notify us immediately. Any disclosure, distribution or other action based on the contents of this report may be unlawful.

PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

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DEPARTMENT OF HAEMATOLOGY

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R.D.W	15.3	%	11.6-14	Calculated
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DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
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LYMPHOCYTES	45.7	%	20-40	Electrical Impedance
EOSINOPHILS	1.4	%	1-6	Electrical Impedance
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BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	1614.06	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1672.62	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	51.24	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	307.44	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	14.64	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	171000	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 ANISOCYTOSIS				
WBC MILD LEUCOPENIA				
PLATELETS ARE ADEQUATE ON SMEAR				
NO HEMOPARASITES SEEN.				



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:52AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:52PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF HAEMATOLOGY

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

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



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:52AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 02:25PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	99	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	93	mg/dL	70-140	HEXOKINASE
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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.

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:52AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 02:25PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , <i>WHOLE BLOOD EDTA</i>	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , <i>WHOLE BLOOD EDTA</i>	103	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name	: Mr.RANJEET RAMDAS NIRMAL
Age/Gender	: 36 Y 2 M 3 D/M
UHID/MR No	: SPUN.0000044340
Visit ID	: SPUNOPV57683
Ref Doctor	: Dr.SELF
Emp/Auth/TPA ID	: 45102

Collected	: 12/Aug/2023 09:04AM
Received	: 12/Aug/2023 12:29PM
Reported	: 12/Aug/2023 01:58PM
Status	: Final Report
Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	246	mg/dL	<200	CHO-POD
TRIGLYCERIDES	121	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	61	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	186	mg/dL	<130	Calculated
LDL CHOLESTEROL	161.54	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.14	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.06		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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 12:29PM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:58PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	1.90	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.26	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.63	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	29.15	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.4	U/L	<50	IFCC
ALKALINE PHOSPHATASE	67.86	U/L	30-120	IFCC
PROTEIN, TOTAL	7.34	g/dL	6.6-8.3	Biuret
ALBUMIN	4.69	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.77		0.9-2.0	Calculated



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 12:29PM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:58PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.64	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	17.94	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.43	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.12	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.41	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139.74	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103.95	mmol/L	101–109	ISE (Indirect)



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 12:29PM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:55PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF BIOCHEMISTRY

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	29.60	U/L	<55	IFCC



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 12:29PM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 01:17PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.99	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.94	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.498	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

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



Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:49AM
UHID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 12:23PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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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 - 3	/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



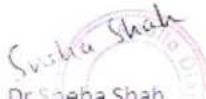
Patient Name : Mr.RANJEET RAMDAS NIRMAL	Collected : 12/Aug/2023 09:04AM
Age/Gender : 36 Y 2 M 3 D/M	Received : 12/Aug/2023 11:50AM
UH ID/MR No : SPUN.0000044340	Reported : 12/Aug/2023 12:23PM
Visit ID : SPUNOPV57683	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 45102	

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
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist



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



2D ECHO / COLOUR DOPPLER

Name : MR. Ranjeet Nirmal
Ref by : HEALTH CHECKUP

Age : 36 YRS / M
Date : 12/08/2023

LA – 32 AO – 26 IVS – 10 PW – 10
LVIDD – 37 LVIDS - 25
EF 60 %

Normal LV size and systolic function.
No diastolic dysfunction
Normal LV systolic function, LVEF 60 %
No regional wall motion abnormality
Normal sized other cardiac chambers.
Mitral valve has thin leaflets with normal flow.
Aortic valve has three thin leaflets with normal structure and function. No aortic regurgitation.No LVOT gradient
Normal Tricuspid & pulmonary valves.
No tricuspid regurgitation.
PA pressures Normal
Intact IAS and IVS.
No clots, vegetations, pericardial effusion noted.

IMPRESSION :
NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.
NO RWMA. NO PULMONARY HTN
NO CLOTS/VEGETATIONS



DR.SAMRAT SHAH
MD, CONSULTANT PHYSICIAN

EYE REPORT

ASH/PUN/OPHTH/06/02-0216

Date: 12/08/23

Name: Mr. Ranjeet Nirmal.

Age / Sex: 36 Y / M

Ref No.:

Complaint: NO complaints.

Examination

NO PM

NO HTN

Spectacle Rx

Vision
 R 6/6
 L 6/6

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	PLANO	—	—	6/6	PLANO	—	—
Read	—	—	—	NC	—	—	—	NC
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

Remarks:

WNL

PGP
 R
 L

Medications: ∴ BE colour vision Normal.

Trade Name	Frequency	Duration

Follow up: 1 yr

Consultant:

[Signature]

Nirmal, Ranjeet



12.08.2023 9:46:24 AM

Apollo Spectra Hospital
SWARGATE
PUNE-4110

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

70 bpm
-- / -- mmHg

166 cm Male
57.0 kg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 94 ms
QT / QTcBaz : 376 / 406 ms
PR : 118 ms
P : 90 ms
RR / PP : 860 / 857 ms
P / QRS / T : 49 / 63 / 59 degrees

Normal sinus rhythm
Incomplete right bundle branch block
Borderline ECG

