

Patient Name : Mr.MADHU B	Collected : 23/Sep/2023 09:47AM
Age/Gender : 41 Y 5 M 0 D/M	Received : 23/Sep/2023 12:40PM
UHID/MR No : CMYS.0000058028	Reported : 23/Sep/2023 01:11PM
Visit ID : CMYSOPV117781	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 159857	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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SIN No:BED230231275

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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	16.7	g/dL	13-17	Spectrophotometer
PCV	49.90	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.22	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	96	fL	83-101	Calculated
MCH	32.1	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	11.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	10,000	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	57.2	%	40-80	Electrical Impedence
LYMPHOCYTES	34.7	%	20-40	Electrical Impedence
EOSINOPHILS	2.8	%	1-6	Electrical Impedence
MONOCYTES	4.6	%	2-10	Electrical Impedence
BASOPHILS	0.7	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	5720	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	3470	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	280	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	460	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	70	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	281000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

R.B.C: Majority are normocytic normochromic.
W.B.C: normal in number with normal morphology and distribution.
Platelets: normal in number and are seen in singles and clumps.
Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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GLUCOSE, FASTING , NAF PLASMA	137	mg/dl	74-106	GOD, POD
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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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	289	mg/dL	70-140	GOD - POD
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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.

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	4.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) ,	91	mg/dL		Calculated

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WHOLE BLOOD EDTA

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:PLF02031679,PLP1371595,EDT230087528

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DEPARTMENT OF BIOCHEMISTRY

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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	204	mg/dl	0-200	CHOD
TRIGLYCERIDES	193	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	36	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	168	mg/dL	<130	Calculated
LDL CHOLESTEROL	129.71	mg/dL	<100	Calculated
VLDL CHOLESTEROL	38.5	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.70		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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. 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.
5. 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.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
LDL CHOLESTEROL - (DIRECT LDL)	129.71	mg/dL	<100	CHE/CHO/POD & Catalase



SIN No:SE04490410

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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	1.24	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.21	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	1.03	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	66	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	40.0	U/l	0-35	IFCC
ALKALINE PHOSPHATASE	128.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	7.80	g/dl	6.4-8.3	Biuret
ALBUMIN	4.89	g/dl	3.5-5.2	Bromocresol Green
GLOBULIN	2.91	g/dL	2.0-3.5	Calculated
A/G RATIO	1.68		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 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.

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

CREATININE	1.07	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	12.06	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	5.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.40	mg/dL	3.5-8.5	Uricase
CALCIUM	9.82	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.01	mg/dl	2.7-4.5	Molybdate
SODIUM	145	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98 - 107	Direct ISE



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	71.00	U/L	15-73	Glycylglycine Nitoranalide



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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)	1.46	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	8.95	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.530	µIU/mL	0.35-4.94	CMIA

Comment:

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

1. 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.
2. 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.
3. 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.
4. 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

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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



SIN No:SPL23135768

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Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.310	ng/mL	0-4	CLIA



SIN No:IM06207014

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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE (++)		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2189534

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Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 159857	

DEPARTMENT OF CLINICAL PATHOLOGY

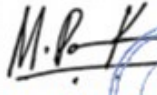
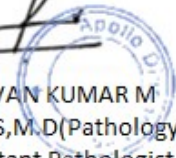
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324


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

*** End Of Report ***



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


DR.SHIVARAJA SHETTY
 M.B.B.S,M.D(Biochemistry)
 CONSULTANT BIOCHEMIST



Patient Name	: Mr. MADHU B	Age/Gender	: 41 Y/M
UHID/MR No.	: CMYS.0000058028	OP Visit No	: CMYSOPV117781
Sample Collected on	:	Reported on	: 23-09-2023 15:34
LRN#	: RAD2106797	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 159857		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

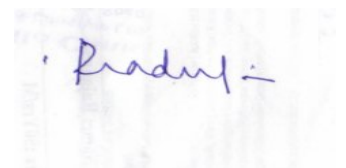
No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

IMPRESSION :NORMAL STUDY.



Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Patient Name	: Mr. MADHU B	Age/Gender	: 41 Y/M
UHID/MR No.	: CMYS.0000058028	OP Visit No	: CMYSOPV117781
Sample Collected on	:	Reported on	: 23-09-2023 12:23
LRN#	: RAD2106797	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 159857		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

GALL BLADDER: It is distended and shows multiple calculi measuring 3to4mm.

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

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

RIGHT KIDNEY: It measures 10.8x3.8 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 10.8x4.8 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

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

No e/o free fluid in the abdomen.

IMPRESSION:

- **GRADE I FATTY LIVER.**
- **CHOLELITHIASIS**

Chetan H, DNB
Consultant Radiologist.

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

Name: Mr. MADHU B
Age/Gender: 41 Y/M
Address: CHAMARAJANAGAR
Location: CHAMARAJANAGAR, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: MYSORE_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. JYOTHISHREE P V

MR No: CMYS.0000058028
Visit ID: CMYSOPV117781
Visit Date: 23-09-2023 09:45
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: **For Corporate Health Checkup,**

SYSTEMIC REVIEW

****Weight**

--->: **Stable,**

Number of kgs: **89.4,**

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: **Nil Significant,**

Cancer: **NILL,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Fitness Report

Fitness.: **YES,**

Fitness: **FIT,**

DISCLAIMER

Disclaimer: **The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,**

Doctor's Signature

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of Madhu B on 22/9/2023

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input 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 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 • Unfit 	

Dr. Praush
 Medical Officer
 The Apollo Clinic, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph: 0821-4006040/41

This certificate is not meant for medico-legal purposes

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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

APOLLO CLINICS NETWORK KARNATAKA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788



Date : 23-09-2023
MR NO : CMYS.0000058028

Department : GENERAL
Doctor :

Name : Mr. MADHU B

Registration No :

Age/ Gender : 41 Y / Male

Qualification :

Consultation Timing: 09:45

Height : 157	Weight : 89.4	BMI : 29	Waist Circum : 120
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Came for regular health (pre employment)
check up

2D Echo - Normal

Chest X-ray 1PA view - Normal Study

Blood Test - FBS - 137

PPBS - 289

LDL - 129.


Urine Test - Glucose - +

USG Abdomen & Pelvis - Grade I fatty liver
No cholelithiasis

ECG - normal

Adv - Life style modification

Follow up date :


Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821-400040/41

Date : 23-09-2023
MR NO : CMYS.0000058028

Department : GENERAL
Doctor : *Nethu Benz*

Name : Mr. MADHU B
Age/ Gender : 41 Y / Male

Registration No :
Qualification : *MS ENT.*

Consultation Timing: 09:45

Height : <i>177</i>	Weight : <i>89.4</i>	BMI : <i>29</i>	Waist Circum : B.P : <i>120/80</i>
Temp :	Pulse :	Resp :	

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Rae
Nose
throat } - *NAD.*

Follow up date :

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

Doctor Signature

Date : 23-09-2023
MR NO : CMYS.0000058028

Department : GENERAL
Doctor :

Name : Mr. MADHU B

Registration No :

Qualification :

Age/ Gender : 41 Y / Male

Consultation Timing: 09:45

Height : 177	Weight : 89.4	BMI : 29	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Rt eye

Lt eye

Distance

6/6

6/6

Near Vm

NG

NG

Color Vm Vm

Normal

Normal

Follow up date :

Doctor Signature
Apollo Clinic
23, 1st Floor,
Kalidasa Road, Mysore - 02
Ph : 0821 0006040/41



ID: 58028

23-09-2023 10:38:09 AM

MR MADHU B

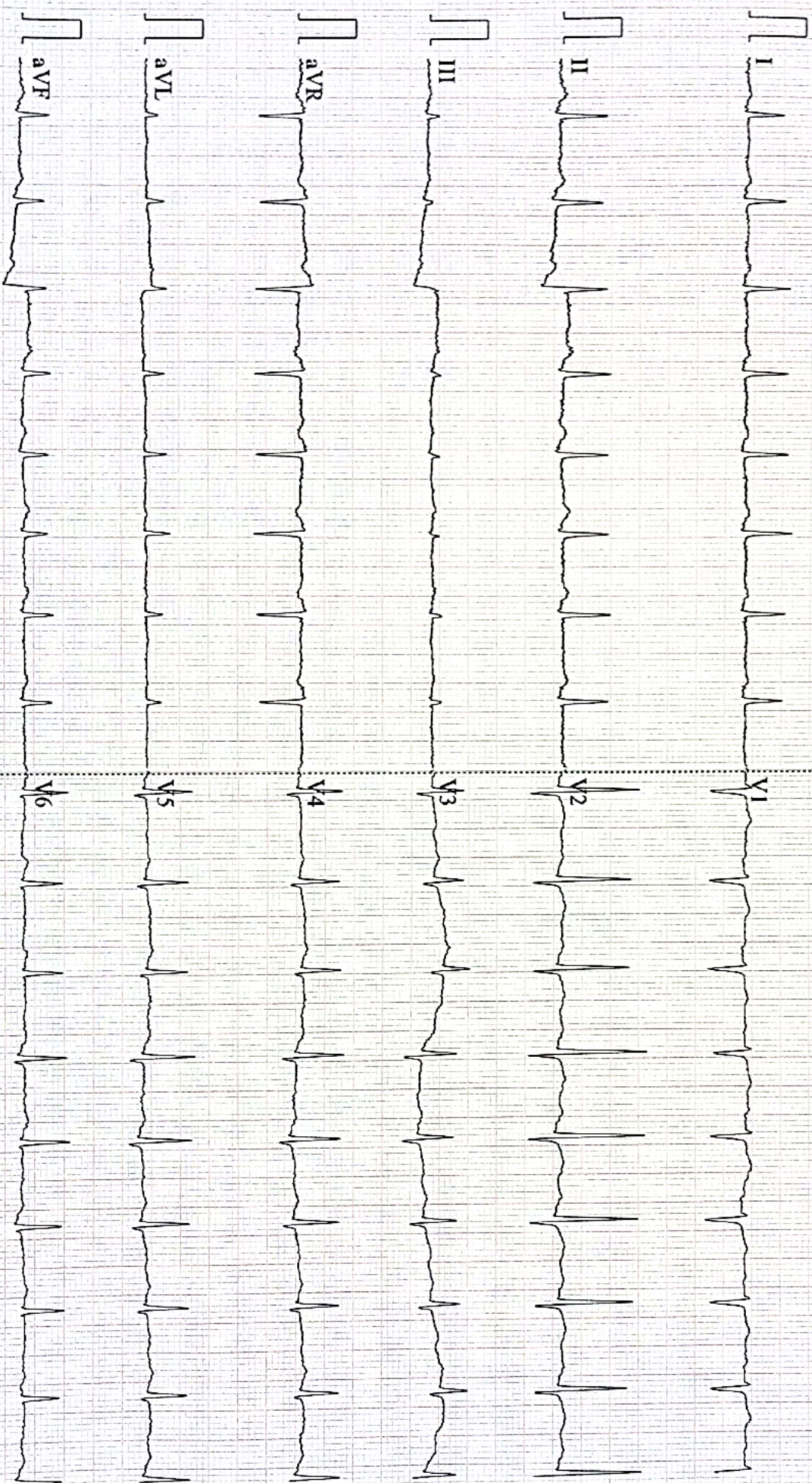
Male 41Years

177cm 89kg 120/80 mmHg

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

Diagnosis Information:

Unconfirmed Report.



0.5-45Hz AC50 25mm/s 10mm/mV 2*5.0s 100 CARDIART

D V143 Glasgow V28.6.0 APOLLO CLINIC MYSURU

Patient Name : Mr. MADHU B
UHID : CMYS.0000058028
Reported on : 23-09-2023 15:33
Adm/Consult Doctor :

Age : 41 Y M
OP Visit No : CMYSOPV117781
Printed on : 23-09-2023 15:34
Ref Doctor : SELF

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.

IMPRESSION :NORMAL STUDY.

Pradeep

Printed on:23-09-2023 15:33

---End of the Report---

Dr. PRADEEP KUMAR C N
MBBS DNB(RADIOLOGY)
Radiology

Apollo Health and Lifestyle Limited

CIN: U65110TG2000PLC1158191

Regd Office: 1-10-60-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph No: (91) 4964 7777 Fax No: 4964 7744 | Email ID: enquiry@apolloh.com | www.apolloh.com

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

1 of 1

Scanned with CamScanner



Scanned with OKEN Scanner

Patient Name: Mr. MADHU B	Date: 23.09.2023	Referring Doctor: Self
Age / Sex :42yrs /Male	UHID :58028	
ULTRASONOGRAPHY – ABDOMEN & PELVIS		

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

GALL BLADDER: It is distended and shows multiple calculi measuring 3to4mm.

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

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

RIGHT KIDNEY: It measures 10.8x3.8 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 10.8x4.8 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

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

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

No e/o free fluid in the abdomen.

IMPRESSION:

- **GRADE I FATTY LIVER.**
- **CHOLELITHIASIS**



Dr. Chetan H, DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

ICD - U85110G2000PLC115819
Regd. Office: T-10/60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
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Koramangala | Sarjapur Road | Mysore: (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mr.Madhu B

Age & sex : 41Yrs /male

Date : 23.09.2023

UHID No : 58028


2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chamber volumes
- Normal left ventricular function. EF 65%
- No regional wall motion abnormality
- Normal valves
- No clots. No pericardial effusion

Findings

Left Ventricle:	Normal
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal


Dr. C.B. KESHAVAMURTHY MD, DM, DNB
CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

(CIN: URS10TG2000PLC11A819)

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

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Koramangala | Sarjapur Road | **Mysore** (VV Mohalla)

Online appointments: www.apolloh.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mr.Madhu B
Date : 23.09.2023

Age & sex : 41Yrs /male
UHID No : 58028

Measurements

AO : 2.93 cm
LA : 3.13 cm

RV : 2.00 cm
LVIDd : 4.22 cm
LVIDs : 2.73 cm
IVSd : 1.08 cm
IVSs : 1.33 cm
PWd : 1.10 cm
PWs : 1.40 cm
EF : 65.0 %
FS : 35.0 %

Doppler

MV	TV	AV	PV
E: 0.85 m/s	E 0.50 m/s	V max 1.42 m/s	V max 1.07 m/s
A: 0.75 m/s	A 0.41 m/s		
MR Nil	TR Nil	AR Nil	PR Nil

Dr. C.B. KESHAVAMURTHY MD, DM, DNB
CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

(CIN : U85110TG2000PLC115819)

Regd. Office: 1, 1D-6D-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788



बैंक ऑफ बरोडा
Bank of Baroda

नाम
Name

मधु बी
Madhu B

E. C. No.

159857



जारीकर्ता प्राधिकारी

Issuing Authority



Handwritten signature of the holder

धारक के हस्ताक्षर

Signature of Holder

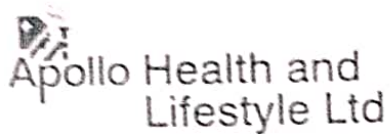
Your Apollo order has been confirmed

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

Fri 22-09-2023 16:38

To: Madhukb21585@gmail.com <Madhukb21585@gmail.com>

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



Dear MR. B MADHU,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at **KALIDASA RAOD clinic on 2023-09-23 at 08:15-08:20.**

Payment Mode	Credit
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

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

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
4. Please bring all your medical prescriptions and previous health medical records with you.