





Age/Gender : 41 Y 1 M 21 D/M

UHID/MR No : CVIS.0000115782 Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:57AM Reported : 08/Apr/2023 02:37PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF HAEMATOLOGY**

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC, DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 1 of 13









Age/Gender : 41 Y 1 M 21 D/M

UHID/MR No : CVIS.0000115782 Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:57AM Reported : 08/Apr/2023 02:37PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF HAEMATOLOGY** ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324 **Test Name** Unit Method Result Bio. Ref. Range

HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	15.5	g/dL	13-17	Spectrophotometer
PCV	46.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.44	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86	fL	83-101	Calculated
MCH	28.5	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,400	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	46	%	40-80	Electrical Impedance
LYMPHOCYTES	39.1	%	20-40	Electrical Impedance
EOSINOPHILS	5.7	%	1-6	Electrical Impedance
MONOCYTES	9	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2024	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1720.4	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	250.8	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	396	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	8.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	268000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

Page 2 of 13









Age/Gender : 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:57AM Reported : 08/Apr/2023 03:06PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY					
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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	0	Forward & Reverse Grouping with Slide/Tube Aggluti			
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination			

Page 3 of 13









Age/Gender : 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:57AM Reported : 08/Apr/2023 02:37PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324						
Test Name	Result	Unit	Bio. Ref. Range	Method		

GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD	

#### **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	P

GLUCOSE, POST PRANDIAL (PP), 2	115	mg/dL	70-140	GOD - POD
HOURS , NAF PLASMA		,		

#### **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







Age/Gender : 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:57AM Reported : 08/Apr/2023 02:37PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **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	

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	120	mg/dL	4	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

Page 5 of 13









Age/Gender : 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:36AM Reported : 08/Apr/2023 01:35PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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					

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	192	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	180	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	47	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	145	mg/dL	<130	Calculated
LDL CHOLESTEROL	109	mg/dL	<100	Calculated
VLDL CHOLESTEROL	36	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.09		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.

Page 6 of 13









Age/Gender

: 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:36AM Reported : 08/Apr/2023 01:35PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	30	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	95.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	8.10	g/dL	6.3-8.2	Biuret
ALBUMIN	3.90	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	4.20	g/dL	2.0-3.5	Calculated
A/G RATIO	0.93		0.9-2.0	Calculated

Page 7 of 13



APOLLO CLINICS NETWORK







Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No Visit ID

: CVIS.0000115782

Ref Doctor

: CVISOPV109338

Emp/Auth/TPA ID

: Dr.SELF : 9496172718

**Test Name** 

Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM : 08/Apr/2023 01:35PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY** ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324 Unit Method Result Bio. Ref. Range

RENAL PROFILE/RENAL FUNCTION T	EST (RFT/KFT) , SERUI	Л		
CREATININE	1.10	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	20.50	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	9.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.90	mg/dL	3.5-8.5	Uricase
CALCIUM	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.40	mg/dL	2.5-4.5	PMA Phenol
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direct ISE

Page 8 of 13







: Mr.RAMBABU P

Age/Gender UHID/MR No : 41 Y 1 M 21 D/M : CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor

: Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM : 08/Apr/2023 01:35PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

		1	
	I Init	Die Def Denge	Mathad

Method Test Name Result Unit Bio. Ref. Range

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM

29.00

U/L

15-73

Glyclyclycine Nitoranalide

Page 9 of 13



www.apolloclinic.com

SIN No:SE04344586







Age/Gender : 41 Y 1 M 21 D/M UHID/MR No : CVIS.0000115782

Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 08/Apr/2023 11:36AM Reported : 08/Apr/2023 02:34PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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

THYROID PROFILE (TOTAL T3, TOTAL T4, TSH), SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.86	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	52.37	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.940	μIU/mL	0.3-4.5	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:

APOLLO CLINICS NETWORK

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

Page 10 of 13









Age/Gender : 41 Y 1 M 21 D/M

UHID/MR No : CVIS.0000115782 Visit ID : CVISOPV109338

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9496172718 Collected : 08/Apr/2023 09:48AM

Received : 09/Apr/2023 01:15PM Reported : 09/Apr/2023 02:01PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

	DEPARTMENT OF	IMMUNOLOGY	1		
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

TOTAL PROSTATIC SPECIFIC ANTIGEN	1.140	ng/mL	0-4	CLIA	
(tPSA) . SERUM					

Page 11 of 13









Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID Ref Doctor : CVISOPV109338

Emp/Auth/TPA ID

: Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 01:21PM : 08/Apr/2023 03:19PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF CLINICAL PATHOLOGY**

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

**Test Name** Unit Method Result Bio. Ref. Range

COMPLETE URINE EXAMINATION, UF	RINE			
PHYSICAL EXAMINATION			4	
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	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	NEGATIVE		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 MO	UNT AND MICROSCOPY			
PUS CELLS	3-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 12 of 13









: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No Visit ID

: CVIS.0000115782

Ref Doctor

: CVISOPV109338

Emp/Auth/TPA ID

: Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 01:21PM

Reported

: 08/Apr/2023 02:49PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT		INICAL	DATHOLOGY	,
DEPARTMEN	UFG	LINICAL	. PATRULUGT	

Unit **Test Name** Result Bio. Ref. Range Method

URINE GLUCOSE(POST PRANDIAL) **NEGATIVE**  **NEGATIVE** Dipstick

**NEGATIVE** 

**NEGATIVE** 

Dipstick

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

DR. V. SNEHAL M.D (PATH) Consultant Pathologist

URINE GLUCOSE(FASTING)

M.B.B.S, MD

Consultant Pathologist

APOLLO CLINICS NETWORK





Apollo HOSPITALS			penise. Closer to you
DR. VINAY KUMAR MS ENT	ENT H	BALTH	CHECK
NAME P. RO	in babu. AGE:	fly SE	x: male
0/8-7	En el	)	
2) 3)	Nose O	le Trai	(P) Do HIT to de
		WA 5	
ENT	Not	MAL	J
1) Az	efla Nacal	1	
	6	7	ap Q
		-	
			11.11

## Health and Lifestyle Limited

5) 10TN2000FLC0450899 Regd Office: 19 Bishop Gardens, R.A. Puram, Chennal 600 028, Tamil Nadu, India | Email 10: Info@apollohi.com

# CLINICS NETWORK TELANGANA

id (AS Rac Nagar | Chanda Nagar | Jupilee Hills | Kondapur | Manikonda | Naliakunta | Nicampet | Uppal)

pointments: www.apolloclinic.com

TO BOOK AN APPOIN





Patient Name : Mr. RAMBABU P Age/Gender : 41 Y/M

UHID/MR No.

: CVIS.0000115782

OP Visit No

: CVISOPV109338

Sample Collected on

: RAD1972104

Reported on Specimen

: 08-04-2023 14:55

Ref Doctor

LRN#

: SELF

Emp/Auth/TPA ID : 9496

: 9496172718

## 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. ARUNA PEBBILI**DMRD Radiology

Seura febbili

Radiology



**Patient Name** : Mr. RAMBABU P Age/Gender : 41 Y/M

UHID/MR No.

: CVIS.0000115782

Sample Collected on :

LRN#

: RAD1972104

**Ref Doctor** Emp/Auth/TPA ID : 9496172718

Reported on Specimen

**OP Visit No** 

: CVISOPV109338 : 08-04-2023 14:06

#### DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

Liver: appears normal in size 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. 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: 10.2 x 4.8 cm Left kidney : 10.4 x 4.3 cm

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**: Normal in size and echo texture. No evidence of necrosis/calcification seen.

its volume 15 cc

There is no evidence of ascites/ pleural effusion seen.

### **IMPRESSION:-**

No significant abnormality detected.



Patient Name : Mr. RAMBABU P Age/Gender : 41 Y/M

For clinico-lab correlation / follow - up / further work up.

This is only a screening test.

**Dr. ARUNA PEBBILI**DMRD Radiology

Seura Jebbili

Radiology

Mr. RAMBABU P

Age/Gender: 41 Y/M VIZAG Address:

VIZAG VISAKHAPATNAM, ANDHRA PRADESH Location:

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Sangari ARCOFFMI HE VISHAKAPATNAM\_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. GOLI INDIRA PRIYADARSHINI

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVIS.0000115782 CVISOPV109338 Visit ID: Visit Date: 08-04-2023 09:27

Discharge Date:

Referred By: SELF Name: Mr. RAMBABU P

Age/Gender: 41 Y/M Address: VIZAG

Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY

Rate Plan: VISHAKAPATNAM\_03122022 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SRINIVAS RAO

#### **Doctor's Signature**

MR No: CVIS.0000115782
Visit ID: CVISOPV109338
Visit Date: 08-04-2023 09:27

Discharge Date:

Referred By: SELF

Mr. RAMBABU P

Age/Gender: 41 Y/M
Address: VIZAG
Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Sangson: ARCOFEMI HEA VISHAKAPATNAM\_03122022 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. R ABHISHEK

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

**HT-HISTORY** 

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

**IMPRESSION** 

RECOMMENDATION

**Doctor's Signature** 

MR No: CVIS.0000115782 CVISOPV109338 Visit ID: Visit Date: 08-04-2023 09:27

Discharge Date:

Referred By: SELF Name: Mr. RAMBABU P

Age/Gender: 41 Y/M Address: VIZAG

Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY

Rate Plan: VISHAKAPATNAM\_03122022 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. N MUKUNDA RAO

#### **Doctor's Signature**

MR No: CVIS.0000115782 Visit ID: CVISOPV109338 Visit Date: 08-04-2023 09:27

Discharge Date:

Referred By: SELF

II)ate	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
08-04-2023 16:59			18 Rate/min	_	165 cms	66 Kgs	%	%	Years	24.24	cms	cms	cms		AHLL07730

II)ate	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
08-04-2023 16:59			18 Rate/min	_	165 cms	66 Kgs	%	%	Years	24.24	cms	cms	cms		AHLL07730

II)ate	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
08-04-2023 16:59			18 Rate/min	_	165 cms	66 Kgs	%	%	Years	24.24	cms	cms	cms		AHLL07730

II)ate	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	Weight	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
08-04-2023 16:59			18 Rate/min	_	165 cms	66 Kgs	%	%	Years	24.24	cms	cms	cms		AHLL07730





# **Physical Medical Examination Format**

NAME:- P. Rambaby	DATE: 8-4-22							
DESIGNATION:-	AGE:- Ylul							
EMP CODE:	UNIT/DEPARTMENT:-							
BLOOD GROUP:-	MARTIAL STATUS:-MARRIED/UNMARRIED							
- MEDICAL EX	(AMINATION							
Complaints (if any)	N1							
Personal /family history	Nil	N						
Past Medical /Occupational History	nu _	1411						
Sensitivity/Allergy (if any)	Nu	iv						
Heart	Mallan							
Any other Conditions	Nu							
Height:- 165 Weight:- 66	BMI 24.24	Pulse 79						
Temp: 9866 Pulse 19	Resp:- \\	B.P 120180						
Remarks								
Treatment Recommended (if any):	2bab.	ro ampleyment						
I Hereby Certify that I have examined Mr/Ms	TO PI	re-employment						
/periodical medical examination, I have found / not foun	nd any disease, Illness, contaglous	illness						
	Gl	8 8 8 8 8 8						
I Certify That Employee Is Medically		*						
	# # 2	0.142						
Fit Unfit	Dr. S. VYJAYANTHIN	NALA IPH <del>I</del> I						
	Reg. No. 10 Phys	olician  Jaa J						
Signature Of Employee	Seethalling Registration No:							

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



# भारत सरकार Government of India





రాంబాబు పొన్నాడ Rambabu Ponnada పుట్టిన తేదీ / DOB : 15/02/1982 పురుషుడు / Male





6891 6948 6281

मेरा आधार, मेरी पहचान

Fw: Health Check up Booking Confirmed Request(bobE35645), Package Code-PKG10000307, Beneficiary Code-48621

## rambabu navy <rambabu navy@yahoo.com>

Sat 4/8/2023 9:04 AM

To: Vizag Apolloclinic <vizag@apolloclinic.com>

Health checkup RAMBABU

## Sent from Yahoo Mail on Android

---- Forwarded message -----

From: "Mediwheel" <wellness@mediwheel.in>

To: "rambabu navy@yahoo.com" <rambabu navy@yahoo.com> Cc: "customercare@mediwheel.in" <customercare@mediwheel.in>

Sent: Sat, 1 Apr 2023 at 11:57

Subject: Health Check up Booking Confirmed Request(bobE35645), Package Code-

PKG10000307, Beneficiary Code-48621

011-41195959 Email:wellness@mediwheel.in

Dear MR. P RAM BABU,

Please find the confirmation for following request.

**Booking Date** 

: 24-03-2023

Package Name

Arcofemi MediWheel Full Body Annual Plus Male Above 50 2D

Name of

Diagnostic/Hospital: Apollo Clinic - Visakhapatnam

Address of

50, Plot 5, Sheethammapeta, Beside BVK college, Dwaraka

Diagnostic/Hospital Nagar, Vishakapatnam,

Contact Details

: (0891) 258 5511 - 12

City

: Visakhapatnam

State

: Andhra Pradesh

Pincode

: 530016

Appointment Date: 08-04-2023

Confirmation

Status

: Confirmed

Preferred Time

: 8:00am-9:00am

Comment

: APPOINTMENT TIME 9:00AM

<u>9</u>	}	<u> </u>	<u>\</u>	<u>\</u>	<u>t</u>	1	
y is nonspe	}	<u> </u>				\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	C VIZAG
e abnormali	\ <u>\</u> \			<u> </u>			
terior T wav							V28.6.7 APC
Dignosis Information: Sinus rhythm Inferior and anterior T wave abnormality is nonspecific Borderline ECG  Report Confirmed by:		}		1	}		VI.46 Glasgow V28.6.7 APOLLO CLINIC VIZAG
AMESW Diagn Sini Enf Enf MS MV Repor	<u></u>		<u>\$</u>	. V4	- S/2 - S/2	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	γ Α
1:50:13 79 bpm 114 ms 140 ms 98 ms 378/434 30/26/-10 0.797/0.239			<b>\$</b>			4	2*5.0s+1r CARDIART 9108
08-04-2023 1 HR : PR : QRS : QT/QTCBZ : P/QRS/T : RV5/SV1 :	\(\lambda\)	\{	}	}	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	7	
	<u>\</u>		}	<u>}</u>	7		25mm/s 10mm/mV
	<u> </u>	3	}	<u>)                                    </u>	\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\		
5782 babu 41Years No. :		7	1	)	<u> </u>	5	Z ACS0





: Mr. RAMBABU P

UHID

: CVIS.0000115782

Reported on

: 08-04-2023 14:55

Adm/Consult Doctor

. C v 13.0000113762

Age

: 41 Y M

OP Visit No

: CVISOPV109338

Printed on

: 08-04-2023 15:01

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.

## **CONCLUSION:**

No obvious abnormality seen.

Printed on:08-04-2023 14:55

---End of the Report---

Leunaleblih

Dr. ARUNA PEBBILI

DMRD Radiology
Radiology





: Mr. RAMBABU P

UHID

: CVIS.0000115782

Reported on

: 08-04-2023 14:06

Adm/Consult Doctor

Age

:41 Y M

OP Visit No

: CVISOPV109338

Printed on

: 08-04-2023 14:06

Ref Doctor

: SELF

## DEPARTMENT OF RADIOLOGY

#### ULTRASOUND - WHOLE ABDOMEN

Liver: appears normal in size 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. 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: 10.2 x 4.8 cm

Left kidney : 10.4 x 4.3 cm

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**: Normal in size and echo texture. No evidence of necrosis/calcification seen. its volume 15 cc

There is no evidence of ascites/ pleural effusion seen.





: Mr. RAMBABU P

UHID

: CVIS.0000115782

Reported on

: 08-04-2023 14:06

Adm/Consult Doctor

Age

: 41 Y M

OP Visit No

: CVISOPV109338

Printed on

: 08-04-2023 14:06

Ref Doctor : SELF

# **IMPRESSION:-**

No significant abnormality detected.

For clinico-lab correlation / follow - up / further work up.

This is only a screening test.

Printed on:08-04-2023 14:06

---End of the Report---

Acuna febbili

Dr. ARUNA PEBBILI DMRD Radiology

Radiology

MEDIWHEEC

Mr. P. RAMBARU

Gender:

Test Done Date: 8/4/23

**OPHTALMOLOGY SCREENING REPORT** 

VISION:

DISTANCE

**NEAR VISION** 

**COLOUR VISON** 

ANT. SEGMENT:

Conjunctiva:

Cornea

Pupil

**FUNDUS** 

IMPRESSION:

600 6/6

Signature

Will





: Mr. RAMBABU P

UHID

: CVIS.0000115782

Conducted By:

: Dr. SHASHANKA CHUNDURI

Referred By

: SELF

Age

: 41 Y/M

OP Visit No Conducted Date : CVISOPV109338

: 08-04-2023 16:07

#### 2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (cd) 2.6 CM LA (es) 3.0 CM LVID (ed) 4.3 CM LVID (cs) 3.0 CM IVS (Ed) 1.0 CM LVPW (Ed) 1.0 CM EF 62.00% %FD 33.00%

MITRAL VALVE:

NORMAL

AML PML NORMAL NORMAL

AORTIC VALVE

NORMAL

TRICUSPID VALVE

NORMAL

RIGHT VENTRICLE

NORMAL

INTER ATRIAL SEPTUM

NORMAL

INTER VENTRICULAR SEPTUM

NORMAL

**AORTA** 

NORMAL

RIGHT ATRIUM

NORMAL

LEFT ATRIUM

NORMAL

Pulmonary Valve

NORMAL

PERICARDIUM

NORMAL

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES:

PF:0.8 m/sec. MF:E>A. AF:0.9 m/sec.

#### **Apollo Health and Lifestyle Limited**





IMPRESSION:
NORMAL CARDIAC SIZE.
NO RWMA.
GOOD LV/ RV FUNCTION.
TRIVIALMR/NO AR/NO TR/NO PAH. NO CLOT.
NO PERICARDIAL EFFUSION.
LVEF:62%

Dr. SHASHANKA CHUNDURI





: Mr. RAMBABU P

UHID

: CVIS.0000115782

Reported By: Referred By

: Dr. SHASHANKA CHUNDURI

OP Visit No Conducted Date : 41 Y/M

: CVISOPV109338

: 08-04-2023 16:58

## **ECG REPORT**

## Observation :-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 79 beats 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 seen.

## Impression:

NORMAL RESTING ECG.

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

Dr. SHASHANKA CHUNDURI





CVIS.0000115782

CVISOPV109338

08-04-2023 09:27

SELF

Name:

Mr. RAMBABU P

Age/Gender:

41 Y/M VIZAG

Address: Location:

VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department:

LABORATORY

Rate Plan:

VISHAKAPATNAM\_03122022

Sponsor:

ARCOFEMI HEALTHCARE LIMITED

Vitals:

	Pulse (Beats/min)	Resp (Rate/min)	Temp (F)	Height (cms)	(Kge)		Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	(cms)	Waist & Hip Ratio	User
08-04-2023 16:59	79 Beats/min	18 Rate/min	98.6 F	165 cms	66 Kgs	%	%	Years	24.24	cms	cms	cms		AHLL07730

MR No:

Visit ID:

Visit Date:

Referred By:

Discharge Date:

Apollo Health and Lifestyle Limited







: Mr.RAMBABU P

Age/Gender UHID/MR No : 41 Y 1 M 21 D/M

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:57AM

Reported

: 08/Apr/2023 02:37PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

## DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 1 of 12









: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M : CVIS.0000115782

UHID/MR No Visit ID

Ref Doctor

: CVISOPV109338

Emp/Auth/TPA ID

: Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:57AM

Reported

: 08/Apr/2023 02:37PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF HAEMATOLOGY**

ARCOFEMI - MEDIWHEE!	L - FULL BODY ANNUA	L PLUS ABOVE 50Y MALE	- 2D ECHO - PAN INDIA - FY2324
----------------------	---------------------	-----------------------	--------------------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
			80	

HAEMOGLOBIN	15.5	g/dL	13-17	Spectrophotometer
PCV	46.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.44	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86	fL	83-101	Calculated
MCH	28.5	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,400	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			****
NEUTROPHILS	46	%	40-80	Electrical Impedance
LYMPHOCYTES	39.1	%	20-40	Electrical Impedance
EOSINOPHILS	5.7	%	1-6	Electrical Impedance
MONOCYTES	9	. %	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT			11	
NEUTROPHILS	2024	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1720.4	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	250.8	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	396	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	8.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	268000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-15	Modified Westergre

Page 2 of 12









: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor

: Dr.SELF

: 9496172718 Emp/Auth/TPA ID

Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:57AM

Reported

: 08/Apr/2023 03:06PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

/Auth/TPA ID : 9496172718	OF I	LA EMATOL OC	27	
	DEPARTMENT OF H	HAEIVIA I OLOG	TO TOUR DANIE	IDIA - FY2324
		A DOVE FOY	MALE JILECHO - PAN IN	DIA . 1202.
- DOCESAL MEDIWHEEL	FILL BODY ANNUAL PLUS	S ABOVE SOL	WALE - 2D LOTTO TTTT	
ARCOFEMI - MEDIWHEEL	- FULL BODY ANNUAL PLUS	Unit	Bio. Ref. Range	Method

LOOD GROUP ABO AND RH FAC	TOR, WHOLE BLOOD-EDTA		Forward & Reverse
BLOOD GROUP TYPE	. 0	2	Grouping with Slide/Tube Aggluti
	POSITIVE		Forward & Reverse Grouping with
Rh TYPE			Slide/Tube Agglutination

Page 3 of 12









: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: 9496172718

Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:57AM

Reported

: 08/Apr/2023 02:37PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FL	JLL BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	IDIA - FY2324
Test Name	Result	Unit	Bio Ref. Range	Method

GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD

### 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	115	mg/dL	70-140	GOD - POD
HOURS, NAF PLASMA		201		

### 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







: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:57AM

Reported

: 08/Apr/2023 02:37PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FU	LL BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	NDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.8	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	120	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.

- 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







: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM

Reported

: 08/Apr/2023 01:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL E	ODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	IDIA - FY2324
ARCOFEMI - MEDIWHEEL - FULL E	DOD! ANNOAL! 20	Unit	Bio, Ref. Range	Method

Bio. Ref. Range Unit Result **Test Name** 

IPID PROFILE , SERUM	100	ma/dl	<200	CHE/CHO/POD
TOTAL CHOLESTEROL	192	mg/dL	<150	Enzymatic
TRIGLYCERIDES	180	mg/dL	100-08-08-08-08-08-08-08-08-08-08-08-08-0	CHE/CHO/POD
-A - 2 - A - A - A - A - A - A - A - A -	47	mg/dL	>40	
HDL CHOLESTEROL	145	mg/dL	<130	Calculated
NON-HDL CHOLESTEROL	148	mg/dL	<100	Calculated
LDL CHOLESTEROL	109	A CARLOS CONTROL OF THE PARTY O	<30	Calculated
VLDL CHOLESTEROL	36	mg/dL		Calculated
CHOL / HDL RATIO	4.09		0-4.97	Calculated

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
		200 - 239	≥ 240	
TOTAL CHOLESTEROL	< 200	150 - 199	200 - 499	≥ 500
TRIGLYCERIDES	<150		100	100
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.

Page 6 of 12









: Mr.RAMBABU P

Age/Gender UHID/MR No : 41 Y 1 M 21 D/M : CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM

Reported

: 08/Apr/2023 01:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FU	LL BODY ANNUAL PLU		MALE - 2D ECHO - PAN IN	NDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	30	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	95.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	8.10	g/dL	6.3-8.2	Biuret
ALBUMIN	3.90	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	4.20	g/dL	2.0-3.5	Calculated
A/G RATIO	0.93		0.9-2.0	Calculated







: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM

Reported

: 08/Apr/2023 01:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FU	LL BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	NDIA - FY2324
ARCOTEINI - MEDITITIEEE			Bio. Ref. Range	Method
Test Name	Result	Unit	Blo. Rei. Range	me man

ENAL PROFILE/RENAL FUNCTION T CREATININE	1.10	mg/dL	0.66-1.25	Creatinine amidohydrolase
LIDEA	20.50	mg/dL	19-43	Urease
UREA	9.6	mg/dL	8.0 - 23.0	Calculated
BLOOD UREA NITROGEN	4.90	mg/dL	3.5-8.5	Uricase
URIC ACID	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
CALCIUM	3.40	mg/dL	2.5-4.5	PMA Phenol
PHOSPHORUS, INORGANIC	CSERCI MEN	mmol/L	135-145	Direct ISE
SODIUM	142	mmol/L	3.5-5.1	Direct ISE
POTASSIUM	4.6		98 - 107	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direction





: Mr.RAMBABU P

Age/Gender UHID/MR No : 41 Y 1 M 21 D/M : CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 9496172718

Collected

: 08/Apr/2023 09:48AM

Received Reported : 08/Apr/2023 11:36AM : 08/Apr/2023 01:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

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

Test Name Result Unit Bio. Ref. Range Method

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) . SERUM	29.00	U/L	15-73	Glyclyclycine Nitoranalide







: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 11:36AM

Reported

: 08/Apr/2023 02:34PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

## DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FU	I L BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	IDIA - FY2324
ARCOFEINII - MIEDIWHEEL - 1 0			Bio. Ref. Range	Method
Test Name	Result	Unit	Bio. Rei. Range	802 0

HYROID PROFILE (TOTAL T3, TOTAL T4,	0.86	ng/ml	0.69-2.15	CLIA
TRI-IODOTHYRONINE (T3, TOTAL)			52-127	CLIA
THYROXINE (T4, TOTAL)	52.37	ng/ml		
THYROID STIMULATING HORMONE (TSH)	1.940	μIU/mL	0.3-4.5	CLIA

### Comment:

Scrum 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		

Page 10 of 12



ALL SUBJECT NETWORK TEL ANGANA & AD







: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received Reported : 08/Apr/2023 01:21PM

: 08/Apr/2023 03:19PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# DEPARTMENT OF CLINICAL PATHOLOGY

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

Method Bio. Ref. Range Unit Result **Test Name** 

PHYSICAL EXAMINATION	2			v
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025	17.57-31		Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE	(V)	NEGATIVE	PROTEIN ERROR O
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE			Dipstick
NITRITE	NEGATIVE	14	NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE	All the state of t		PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Ý		
PUS CELLS	3-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 11 of 12









: Mr.RAMBABU P

Age/Gender

: 41 Y 1 M 21 D/M

UHID/MR No

: CVIS.0000115782

Visit ID

: CVISOPV109338

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9496172718 Collected

: 08/Apr/2023 09:48AM

Received

: 08/Apr/2023 01:21PM

Reported

: 08/Apr/2023 02:49PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTME	NT OF	CLINICAL	. PATHOLOGY

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

Method **Test Name** Result Unit Bio. Ref. Range

URINE GLUCOSE(POST PRANDIAL)	NEGATIVE	NEGATIVE	Dipstick	
URINE GLUCOSE(FASTING)	NEGATIVE	NEGATIVE	Dipstick	

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

Result/s to Follow:

PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)

DR. V. SNEHAL M.D (PATH)

Consultant Pathologist

Page 12 of 12

