





Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No Visit ID

: CVIS.0000116739

Ref Doctor

: CVISOPV111061

: Dr.SELF Emp/Auth/TPA ID : 9848760669 Collected

: 10/Jun/2023 09:34AM

Received

: 10/Jun/2023 11:59AM : 10/Jun/2023 05:00PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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

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

HAEMOGLOBIN	16.1	g/dL	13-17	Spectrophotometer
PCV	45.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	6.52	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	84	fL	83-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	51.1	%	40-80	Electrical Impedance
LYMPHOCYTES	36.8	%	20-40	Electrical Impedance
EOSINOPHILS	5.2	%	1-6	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3525.9	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2539.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	358.8	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	469.2	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	6.9	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergrer

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APOLLO CLINICS NETWORK







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: 10/Jun/2023 11:59AM : 10/Jun/2023 02:47PM

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: ARCOFEMI HEALTHCARE LIMITED

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

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

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Received : 10/Jun/2023 11:59AM Reported : 10/Jun/2023 02:00PM

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					

GLUCOSE, FASTING , NAF PLASMA	100	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	165	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







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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - F	ULL BODY ANNUAL PLUS MA	LE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	126	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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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					

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	242	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	256	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	44	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	198	mg/dL	<130	Calculated
LDL CHOLESTEROL	146.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	51.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.50		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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APOLLO CLINICS NETWORK







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: Dr.SELF

ARCOFEMI - MEDIWHEEL -

: 9848760669

Test Name

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Received : 10/Jun/2023 11:59AM Reported : 10/Jun/2023 02:48PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

					J		
	DEPARTMENT OF BIOCHEMISTRY						
F	FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324						
	Result	Unit	Bio, Ref. Range	Method			

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.00	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.80	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	35	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	37.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	77.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.80	g/dL	6.3-8.2	Biuret
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		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

RENAL PROFILE/KIDNEY FUNCTION T	EST (RFT/KFT) , SERU	JM		
CREATININE	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	36.20	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	16.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.30	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.7	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	106	mmol/L	98 - 107	Direct ISE

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APOLLO CLINICS NETWORK





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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					

GAMMA GLUTAMYL TRANSPEPTIDASE	47.00	U/L	15-73	Glyclyclycine
(GGT), SERUM				Nitoranalide

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: ARCOFEMI HEALTHCARE LIMITED

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	1.55	ng/ml	0.69-2.15	CLIA	
THYROXINE (T4, TOTAL)	88.30	ng/ml	52-127	CLIA	
THYROID STIMULATING HORMONE (TSH)	1.120	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:

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









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Ref Doctor

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Emp/Auth/TPA ID

: Dr.SELF : 9848760669 Collected

: 10/Jun/2023 09:35AM

Received

: 10/Jun/2023 01:00PM : 10/Jun/2023 02:03PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324 **Test Name** Result Unit Bio. Ref. Range Method

COMPLETE URINE EXAMINATION (C	:UE) , URINE			
PHYSICAL EXAMINATION			4	
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		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	*(1	NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No Visit ID

: CVIS.0000116739

: CVISOPV111061

Ref Doctor

Emp/Auth/TPA ID

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: ARCOFEMI HEALTHCARE LIMITED

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

URINE GLUCOSE(FASTING)	NEGATIVE	NEGATIVE	Dipstick	

*** End Of Report ***

DR. V. SNEHAL M.D (PATH)

Consultant Pathologist



Patient Name : Mr. KARNENA UDAY KIRAN NAIDU Age/Gender : 33 Y/M

UHID/MR No.

: CVIS.0000116739

OP Visit No

: CVISOPV111061

Sample Collected on

: RAD2018845

Reported on

: 10-06-2023 15:56

Ref Doctor

LRN#

: SELF

Emp/Auth/TPA ID : 9848760669

Specimen

:

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 PEBBILIDMRD Radiology

Seura febbili

Radiology



Patient Name : Mr. KARNENA UDAY KIRAN NAIDU Age/Gender : 33 Y/M

UHID/MR No.

: CVIS.0000116739

Sample Collected on :

LRN#

: RAD2018845

Ref Doctor Emp/Auth/TPA ID

: SELF

: 9848760669

OP Visit No

Specimen

: CVISOPV111061

Reported on

: 10-06-2023 13:40

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver :appears normal in size and increased in 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: 10.3 x 4.8 cm Left kidney : 9.9 x 4.6 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:-

*FATTY INFILTRATION OF LIVER.

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



: Mr. KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y/M

This is only a screening test.

Dr. ARUNA PEBBILI
DMRD Radiology

Seura sebbili

Radiology

33 Y/M Age/Gender: VSKP Address:

VISAKHAPATNAM, ANDHRA PRADESH Location:

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Samuran ABCOFFM HE VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. ABHIJEET VISHWAS GHATGE

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CVIS.0000116739 Visit ID: CVISOPV111061 Visit Date: 10-06-2023 09:28

Discharge Date:

33 Y/M Age/Gender: VSKP Address:

VISAKHAPATNAM, ANDHRA PRADESH Location:

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. ABHIJEET SINGH SACHAN

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Samuran ABCOFFM HE VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. ABHIJEET VISHWAS GHATGE

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Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Samuran ABCOFFM HE VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. AISHWARYA MALLADI

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

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Discharge Date:

II)afe	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
10-06-2023 16:34		124/77 mmHg	-	_	172 cms	81 Kgs	%	%	Years	27.38	cms	cms	cms		AHLL07730

II)afe	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
10-06-2023 16:34		124/77 mmHg	-	_	172 cms	81 Kgs	%	%	Years	27.38	cms	cms	cms		AHLL07730

II)afe	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
10-06-2023 16:34		124/77 mmHg	-	_	172 cms	81 Kgs	%	%	Years	27.38	cms	cms	cms		AHLL07730

II)afe	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
10-06-2023 16:34		124/77 mmHg	-	_	172 cms	81 Kgs	%	%	Years	27.38	cms	cms	cms		AHLL07730





Physical Medical Examination Format

NAME: K. Wday Kiran Najdu	DATE:- 10623
DESIGNATION:-	AGE:- 33-1/
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:-MARRIED/UNMARRIED
	(AMINATION
Complaints (if any)	Mel
Personal /family history	100
Past Medical /Occupational History	Nel
Sensitivity/Allergy (if any)	No
Heart	Marina
Any other Conditions	Nel
Height:- 17 Weight:- 81	BMI 2 1 · 3 Pulse 72
Temp: 986 Pulse 72	Resp:- 98.6 B.P 1247
Remarks Treatment Recommended (if any): I Hereby Certify that I have examined Mr/Ms	Livan Maidu for pre-employment
/periodical medical examination, I have found / not four	nd any disease, Illness, contaglous illness
l Certify That Employee Is Medically	Q Q.
Fit	Temporarily Unfit Dr.G. INDIRAV RIYADARSHINI Signature& Seal Of Medical Examiner Withs
Signature Of Employee	Registration No: Reed No. 63148 Apollo Family Physician Apollo Clinic , Seethalminaper, Vizag

Apollo Health and Lifestyle Limited

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

0.67~35Hz AC50	I	aVF	aVL	Javr)Ħ	j=			Req. No.	Male 33Years	ID: 116739
AC50		-	}		-		>		,,	33Years	9
	<u> </u>		}	}	1	<u> </u>	}			92	
25mm/s 10mm/mV	<u>{</u>	<u> </u>		_}	+	<u>{</u>	<u></u>				100
V 2*5.0s+1r			<u>{</u>	_{	1	<u></u>	}	QT/QTcBz P/QRS/T RV5/SV1	PR ORS	P	PL 10-06-2023
CARDIART 9108 D. V1.46 Glasgow V28.6.7 APOLLO CLINIC VIZAG	}		} .	_{		}	}	5, 50 /		 114	10:26:38
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V1.46 GI	}	6	\(\frac{\lambda}{\lambda}\)	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			Report Co	Inferior T Borderline	Sinus rhythm	Thomposis i
asgow V2	_		1	1	1	1			G ve	ythm	Disconnect Information:
8.6.7 AP								,s	bnormality		
OLLO CLINI	}		\[\)						abnormality is nonspecific		
INIC VIZ									ecific		
AG											
	1	}	}	>			7				





Patient Name Reported By:

Referred By

: Mr. KARNENA UDAY KIRAN NAIDU

UHID

: CVIS.0000116739

: Dr. SHASHANKA CHUNDURI

OP Visit No Conducted Date : 33 Y/M

: CVISOPV111061

: 10-06-2023 15:51

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.

- 2. Heart rate is 72 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





: Mr. KARNENA UDAY KIRAN NAIDU

Age

: 33 Y M

UHID

: CVIS.0000116739

OP Visit No

: CVISOPV111061

Reported on

: 10-06-2023 13:39

Printed on

: 10-06-2023 15:48

Adm/Consult Doctor

Ref Doctor

: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

<u>Liver</u>: appears normal in size and increased in echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

<u>Gall bladder</u> 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.

<u>Pancreas</u> 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: 10.3 x 4.8 cm Left kidney: 9.9 x 4.6 cm

<u>Urinary Bladder</u> 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. KARNENA UDAY KIRAN NAIDU

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: 10-06-2023 15:48

Adm/Consult Doctor

Ref Doctor

: SELF

IMPRESSION:

*FATTY INFILTRATION OF LIVER.

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

This is only a screening test.

Printed on:10-06-2023 13:39

---End of the Report---

Acural ebbili

Dr. ARUNA PEBBILI

DMRD Radiology Radiology





: Mr. KARNENA UDAY KIRAN NAIDU

UHID

: CVIS.0000116739

Conducted By: Referred By : Dr. SHASHANKA CHUNDURI

: SELF

Age

OP Visit No Conducted Date : 33 Y/M

: CVISOPV111061 : 10-06-2023 15:14

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed) 2.9 CM
LA (es) 3.0 CM
LVID (ed) 4.2 CM
LVID (es) 2.8 CM
IVS (Ed) 1.0 CM
LVPW (Ed) 1.0 CM

EF 60.00% %FD 33.00%

MITRAL VALVE:

NORMAL

AML PML NORMAL NORMAL

NORMAL

TRICUSPID VALVE

AORTIC VALVE

NORMAL

RIGHT VENTRICLE

NORMAL

INTER ATRIAL SEPTUM

INTACT

INTER VENTRICULAR SEPTUM

INTACT

AORTA

NORMAL

RIGHT ATRIUM

NORMAL

LEFT ATRIUM

NORMAL

Pulmonary Valve

NORMAL

PERICARDIUM

NORMAL

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES:

PF:1.0m/sec. MF:E>A AF:1.0m/sec.

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IMPRESSION:
NORMAL CARDIAC SIZE.
NO RWMA.
GOOD LV/ RV FUNCTION.
TRIVIALMR/NO AR/NO TR/NO PAH. NO CLOT.
NO PERICARDIAL EFFUSION.
LVEF:60%.

Dr. SHASHANKA CHUNDURI





: Mr. KARNENA UDAY KIRAN NAIDU

Age

: 33 Y M

UHID

: CVIS.0000116739

OP Visit No

: CVISOPV111061

Reported on

: 10-06-2023 15:56

Printed on

: 10-06-2023 15:56

Adm/Consult Doctor

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:10-06-2023 15:56

---End of the Report---

Dr. ARUNA PEBBILI

Lana ebbili

DMRD Radiology

Radiology





CVIS.0000116739

CVISOPV111061

10-06-2023 09:28

SELF

Name: Age/Gender: Mr. KARNENA UDAY KIRAN NAIDU

33 Y/M

Address: Location: **VSKP**

Doctor:

VISAKHAPATNAM, ANDHRA PRADESH

Department: Rate Plan:

LABORATORY

VISHAKAPATNAM_06042023

Sponsor:

ARCOFEMI HEALTHCARE LIMITED

Vitals:

Date	Pulse (Beats/min)	Commence of the Commence of th	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Salar and Salar and Salar	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist	Waist & Hip Ratio	User
10-06-2023 16:34	\$270	124/77 mmHg	18 Rate/min	(C) (C) (C) (C)	172 cms	81 Kgs	%	%	Years	27.38		*******	cms		AHLL07730

MR No:

Visit ID:

Visit Date:

Discharge Date:

Referred By:

Apollo Health and Lifestyle Limited







: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

: CVIS.0000116739

Visit ID

: CVISOPV111061

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9848760669 Collected

: 10/Jun/2023 09:34AM

Received

: 10/Jun/2023 11:59AM

Reported

: 10/Jun/2023 05:00PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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







: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

: CVIS.0000116739

Visit ID Ref Doctor : CVISOPV111061

Emp/Auth/TPA ID

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: Dr.SELF

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Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	HAEMATOLO	GY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN	16.1	g/dL	13-17	Spectrophotometer
PCV	45.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	6.52	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	84	fL	83-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	51.1	%	40-80	Electrical Impedance
LYMPHOCYTES	36.8	%	20-40	Electrical Impedance
EOSINOPHILS	5.2	%	1-6	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3525.9	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2539.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	358.8	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	469.2	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	6.9	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				







: Mr.KARNENA UDAY KIRAN NAIDU

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Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	HAEMATOLO	GY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP TYPE	В .	Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination







: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING, NAF PLASMA	100	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	165	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







: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender UHID/MR No : 33 Y 6 M 0 D/M : CVIS.0000116739

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

D	EPARTMENT OF	BIOCHEMISTE	RY	
ARCOFEMI - MEDIWHEEL - FUL	L BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA	- FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) ,	126	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).
- 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.KARNENA UDAY KIRAN NAIDU

Age/Gender UHID/MR No : 33 Y 6 M 0 D/M

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: Dr.SELF

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

TOTAL CHOLESTEROL	242	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	256	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	44	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	198	mg/dL	<130	Calculated
LDL CHOLESTEROL	146.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	51.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.50		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	BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

BILIRUBIN, TOTAL	1.00	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.80	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	35	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	37.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	77.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.80	g/dL	6.3-8.2	Biuret
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		0.9-2.0	Calculated







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Sponsor Name

	DEPARTMENT OF	BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

CREATININE	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	36.20	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	16.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.30	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.7	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	106	mmol/L	98 - 107	Direct ISE





: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

: CVIS.0000116739

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Emp/Auth/TPA ID

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: 10/Jun/2023 02:48PM

Status

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Sponsor Name

	DEPARTMENT OF	BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM	47.00	U/L	15-73	Glyclyclycine Nitoranalide	
--	-------	-----	-------	-------------------------------	--







: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

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Visit ID Ref Doctor : CVISOPV111061

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: Dr.SELF : 9848760669 Collected

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: 10/Jun/2023 11:59AM

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: 10/Jun/2023 02:15PM

Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT O	F IMMUNOLOG	GY	
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

TRI-IODOTHYRONINE (T3, TOTAL)	1.55	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	88.30	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.120	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:

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		









: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

: CVIS.0000116739

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Emp/Auth/TPA ID

: 9848760669

Collected

: 10/Jun/2023 09:35AM

Received

: 10/Jun/2023 01:00PM

Reported

: 10/Jun/2023 02:03PM

Status

: Final Report

Sponsor Name

	DEPARTMENT OF CL	INICAL PATHO	LOGY	7
ARCOFEMI - MEDIWHEE	L - FULL BODY ANNUA	L PLUS MALE	- 2D ECHO - PAN INDIA -	FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW	PALE YELLOW		Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				- 3/
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	OUNT AND MICROSCOPY			
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY









: Mr.KARNENA UDAY KIRAN NAIDU

Age/Gender

: 33 Y 6 M 0 D/M

UHID/MR No

: CVIS.0000116739

Visit ID Ref Doctor : CVISOPV111061

Emp/Auth/TPA ID

: Dr.SELF : 9848760669 Collected

: 10/Jun/2023 09:35AM

Received

: 10/Jun/2023 01:00PM

Reported

: 10/Jun/2023 02:03PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	Dinetick

*** End Of Report ***

DR. V. SNEHAL M.D (PATH)

Consultant Pathologist

Your Apollo order has been confirmed

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

Thu 6/1/2023 7:14 PM

To:wellness@mediwheel.in <wellness@mediwheel.in>

Cc:Vizag Apolloclinic <vizag@apolloclinic.com>;Ramakumar V <ramakumar.v@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>

Dear MR. NAIDU KARNENA UDAY KIRAN,

Namaste Team.

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at VIZAG clinic on 2023-06-10 at 08:20-08:25.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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:

- 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.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

As per agreement terms please carry all relevant documents such as Confirmation mail, valid id proof, company ID card etc.

For further assistance please call us on our Help Line #: 1860 500 7788.

Clinic Address: 50-81-1/2, PLOT 5, SHEETHAMMAPETA, VISAKHAPATNAM.

Contact No: (0891) 258 5511 - 2.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Note: Speak Freely. Speak Free! Speak to our Doctor from 8:00 PM to 8:00 AM by calling 1860 500 7788 and press #2 on the IVR. Now get all your Health related queries answered by an expert! Service by Apollo Clinic.

Warm Regards, Apollo Team

Re: Health Check up Booking Confirmed Request(bobE40109), Package Code-PKG10000311, Beneficiary Code-44569

uday kiran <karnenaudaykiran@gmail.com> Wed 6/7/2023 14:59

To:Palakonda , Vishakhapatnam Region < VJPASR@bankofbaroda.com>

आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोले) FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACH

On Fri, 2 Jun 2023 at 10:57 AM, Mediwheel < wellness@mediwheel.in > wrote:

011-41195959 Email:wellness@mediwheel.in

Dear MR. NAIDU KARNENA UDAY KIRAN,

Please find the confirmation for following request.

Booking Date

: 31-05-2023

Package Name

: Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO

Name of

Diagnostic/Hospital: Apollo Clinic - Visakhapatnam

Address of

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

Diagnostic/Hospital Vishakapatnam,

Contact Details

: (0891) 258 5511 - 12

City

: Visakhapatnam

State

: Andhra Pradesh

Pincode

: 530016

Appointment Date: 10-06-2023

Confirmation

Status

: Confirmed

Preferred Time

: 8:00am-8:30am

Comment

: APPOINTMENT TIME 9:00AM

Instructions to undergo Health Check:

- 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).
- Please bring all your medical prescriptions and previous health medical records with you. ...

Deal Siel Madam,

Mg. K. Uday kisan Noidy

Came for health check and eye test is

Pending. client will visit on wonday 12/6/23.

ENT consultation done by but the consultation prescription is pending, we will update on 12/6/2023.





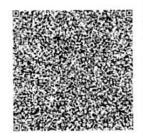
భారత ప్రభుత్వం Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ Unique Identification Authority of India

రిజిస్టేషన్/ Enrolment No.: 1358/91205/10828

ఉదయి కుమార్ ముదలి Udaya Kumar Mudili S/O: Satvanoravana 000-00 Main Street peddimpeta Peddimpeta Vizianagaram Andhra Pradesh - 535463 9490459330



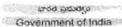


మీ ఆదార్ సంఖ్య / Your Aadhaar No. :

9314 3101 5195 VID: 9105 5796 2347 0550

నా ఆధార్, నా గుర్తింపు







ఉదయ కుమార్ ముదిలి Udaya Kumar Mudili කුළිය විසි/DOB: 15/07/1985 ప్రభుముడు/ MALE

9314 3101 5195

VID: 9105 5796 2347 0550

నా ఆధార్, నా గుర్తింపు



differential control



- 🛎 ఆధార్ ఒక గుర్తింపు మాత్రమే పొరసత్యం కాదు
- 🗷 సురకితమైన బ్యాలర్ కోడ్ / ఆఫలైన్ ఎక్స్ ఎం ఎర్ / ఆసలైన్. ప్రామాణికరణను ఉపయోగించి గుర్తింపును దృవీకరించింది.
- 🛎 අත බවතුට්රි හසුවේ නුගැනයිට ඒන.

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.
 - 🛮 ಆಧಾರಿ ದೆಕ್ಕವ್ಯಾವಿಂಗ್ ವಿಲ್ಯಾಬ್ಬ್ ಅವುತುಂದಿ.
 - 🖩 వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలను సులుపుగా పొందటానికి ఆధార్ మీకు సహాయపడుతుంది
 - 🖩 ఎల్లప్పుడూ మీ మొబైల్ నెంటర్ మరియు ఇమయిల్ ఐడీనీ ఆజార్ లో ఆఫ్ డెట్ చేసి ఉంచండి
 - 🖩 ఎమ్- జధార్ ఆప్ ఉపయోగించండి మీ జధార్ ను ఎల్లప్పుడూ మీస్మార్ఫ్ఫోన్లో ఉంచండి.
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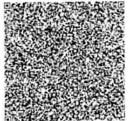


బారల విశిష్ట గుర్తింపు పాదికార సంస్థ Unique Identification Authority of India



5/0: సత్వనారాయణ, 000-00, మెయిన్ స్టీట్, షెర్టింపేట, పెద్దింపేట, వీజయినగరం, ఆరెధ్ద ప్రదేశ్ - 535463

Address: , S/O: Satyanarayana, 000-00, Main Street, peddimpeta, Peddimpeta, Vizianagaram, Andhra Pradesh - 535463



9314 3101 5195

VID: 9105 5796 2347 0550



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