

: Mr.PRANAY JAYESHKUMAR SHAH

Age/Gender UHID/MR No : 32 Y 6 M 0 D/M : STAR.0000064951

Visit ID

: STAROPV72651

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 9920144559

Collected

: 24/Aug/2024 09:43AM

Received

: 24/Aug/2024 11:11AM

Reported

: 24/Aug/2024 01:07PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

#### PERIPHERAL SMEAR, WHOLE BLOOD EDTA

Methodology: Microscopic

RBC : Normocytic normochromic

WBC: Normal in number, Eosinophilia

Platelets : Adequate in Number

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture, Eosinophilia

Note/Comment : Please Correlate clinically

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 1 of 8



SIN No:BED240217504

**Apollo Speciality Hospitals Private Limited** 

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

**Regd Off:**1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:

156, Famous Cine Labs, Behind Everest Building Tardeo (Mumbai Central), Mumbai, Maharashtra Ph: 022 4332 4500



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### DEPARTMENT OF HAEMATOLOGY

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.9	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	46.90	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.33	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	88	fL	83-101	Calculated
MCH	28	pg	27-32	Calculated
MCHC	31.8	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,660	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUN	T (DLC)			
NEUTROPHILS	55	%	40-80	Electrical Impedance
LYMPHOCYTES	27	%	20-40	Electrical Impedance
EOSINOPHILS	12	%	1-6	Electrical Impedance
MONOCYTES	06	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3663	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1798.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	799.2	Cells/cu.mm	20-500	Calculated
MONOCYTES	399.6	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.04		0.78- 3.53	Calculated
PLATELET COUNT	319000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

Methodology: Microscopic

RBC: Normocytic normochromic

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DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

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Note/Comment: Please Correlate clinically

DR. APEKSHA MADAN MBBS. DPB

SIN No:BED240217504

PATHOLOGY

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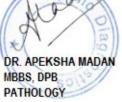
#### **DEPARTMENT OF HAEMATOLOGY**

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDT	Α		
BLOOD GROUP TYPE	В			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

Page 4 of 8





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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING, NAF PLASMA	92	mg/dL	70-100	GOD - POD

#### **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:

- 1. 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.
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	91	mg/dL	70-140	GOD - POD

#### **Comment:**

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE	35	U/L	4-44	JSCC

Page 5 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:SE04814324

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#### **DEPARTMENT OF BIOCHEMISTRY**

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

#### (ALT/SGPT), SERUM

#### **Comment:**

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

lest Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	0.30	mg/dL	0.1-1.2	Azobilirubin
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO, SERUM				
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.87	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	9.67			Calculated
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.87	mg/dL	0.6-1.1	ENZYMATIC METHOD



Page 6 of 8



**Apollo Speciality Hospitals Private Limited** 

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: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF CLINICAL PATHOLOGY

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (	CUE), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	SLIGHTLY HAZY		CLEAR	Physical measuremen
рН	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Refractometric
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET N	MOUNT AND MICROSCOPY			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	8-10	/hpf	0-2	MICROSCOPY
CASTS	OCCASIONAL GRANULAR CAST SEEN.		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

### **Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.

Page 7 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:UR2407135

**Apollo Speciality Hospitals Private Limited** 

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Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

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

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

**Apollo Speciality Hospitals Private Limited** 

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CIN- U85100TG2009PTC099414

Regd Off: 1-10-62/62, 5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Page 8 of 8



Patient Name : Mr.PRANAY JAYESHKUMAR SHAH

Age/Gender : 32 Y 6 M 0 D/M
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Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY SIN No:UR2407135



#### **Customer Care**

From: noreply@apolloclinics.info

Sent: 27 July 2024 15:10
To: network@mediwheel.in

**Cc:** cc.tardeo@apollospectra.com; syamsunder.m@apollohl.com

**Subject:** Your appointment is confirmed



### Dear Pranay Jayeshkumar Shah,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **SPECTRA TARDEO clinic** on **2024-08-03** at **08:15-08:30**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

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 be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

- During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, als inform our staff before health check. Please bring all your medical prescriptions and previous health medical records with you.
- 4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

#### For Women:

- 1. 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.

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

Clinic Address: FAMOUS CINE LABS, 156, PT.M.M.MALVIYA RAOD, TARDEO, MUMBAI, 400034.

Contact No: 022 - 4332 4500.

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.

Warm Regards, Apollo Clinic





**OUT-PATIENT RECORD** 

mr. pranay shah

Age/Gender

3241m.

Mobile No. Passport No.

Aadhar number

Palso: 741min.	B.P: 110/80	Resp Qolmin	Temp: Afeboile
Weight: <b>97.7kg</b>	Height: 179cm	BMI: 30, 3,	Waist Groum: 101cm

m = NJ - 0

Married, Vegetauran Serep. (10) No Allery No addiction

Per Moran/Paseur: Don/ser

Normal Rysost

M.D. (MUM) Physician & Cardiologist Rug No. 56942

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034 Ph No: 022 - 4332 4500 | www.apollospectra.com

Follow up date:



Expertise. Empowering you

Patient Name

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





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www.apollodiagnostics.in





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**Test Name** 

Result

Unit

Bio. Ref. Interval

Method

Expertise. Empowering you

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA

**BLOOD GROUP TYPE** 

В

Rh TYPE

**POSITIVE** 

Forward & Reverse Grouping with Slide/Tube Aggluti Forward & Reverse Grouping with Slide/Tube Agglutination

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PATHOLOGY





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Comment:					
As per American Diabetes Guidelines, 2	2023				
Fasting Glucose Values in mg/dL	Interpretation				
$70\text{-}100~\mathrm{mg/dL}$	Normal				
100-125 mg/dL	Prediabetes				
≥126 mg/dL	Diabetes				
<70 mg/dL	Hypoglycemia				
No. 4 a 4			ocada sina maanna ori sii vamoomaan manormaan raa, ori sii siida mambii ali anaa rashimaalin shila mila mila galayida in d		

#### Note:

- 1. 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.
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	91	mg/dL	70-140	GOD - POD

#### Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each

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

**Test Name** Result Unit Bio. Ref. Interval Method **ALANINE AMINOTRANSFERASE** U/L 35 4-44 JSCC Page 5 of 8

DR. APEKSHA MADAN MBBS, DPB

SIN No:SE04814324

PATHOLOGY



Expertise. Empowering you.

Patient Name

: Mr.PRANAY JAYESHKUMAR SHAH

Age/Gender UHID/MR No : 32 Y 6 M 0 D/M

Visit ID

: STAR.0000064951 : STAROPV72651

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF : 9920144559 Collected

: 24/Aug/2024 09:43AM

Received

: 24/Aug/2024 11:54AM

Reported

: 24/Aug/2024 04:53PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### DEPARTMENT OF BIOCHEMISTRY

#### ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

#### (ALT/SGPT), SERUM

#### **Comment:**

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name BILIRUBIN, TOTAL , SERUM	Result 0.30	<b>Unit</b> mg/dL	Bio. Ref. Interval	<b>Method</b> Azobilirubin
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO, SERUM				
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.87	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	9.67			Calculated
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.87	mg/dL	0.6-1.1	ENZYMATIC METHOD

Page 6 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY





Patient Name Age/Gender

: Mr.PRANAY JAYESHKUMAR SHAH

: 32 Y 6 M 0 D/M

UHID/MR No : STAR.0000064951

Visit ID Ref Doctor : STAROPV72651

: Dr.SELF Emp/Auth/TPA ID : 9920144559 Collected

: 24/Aug/2024 09:43AM

Received

: 24/Aug/2024 01:33PM : 24/Aug/2024 03:45PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF CLINICAL PATHOLOGY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name Result		Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (	CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	SLIGHTLY HAZY		CLEAR	Physical measurement
рН	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Refractometric
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN NORMAL			NORMAL	MODIFED EHRLICH REACTION
NITRITE NEGATIVE			NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE NEGATIVE			NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpi	<10	MICROSCOPY
RBC	8-10	/hpf	0-2	MICROSCOPY
CASTS	OCCASIONAL GRANULAR CAST SEEN.		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

#### Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.

Page 7 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:UR2407135



Age/Gender UHID/MR No

Visit ID Ref Doctor

: Mr.PRANAY JAYESHKUMAR SHAH

: 32 Y 6 M 0 D/M

: STAR.0000064951

: STAROPV72651 : Dr.SELF

Emp/Auth/TPA ID : 9920144559 Collected

: 24/Aug/2024 09:43AM

Received

: 24/Aug/2024 01:33PM

Reported Status

: 24/Aug/2024 03:45PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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DEPARTMENT OF CLINICAL PATHOLOGY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

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

Page 8 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY SIN No:UR2407135





: Mr.PRANAY JAYESHKUMAR SHAH

Age/Gender : 32 Y 6 M 0 D/M UHID/MR No : STAR.0000064

Visit ID

: STAR.0000064951 : STAROPV72651

Ref Doctor

: STAROPV726 : Dr.SELF

Emp/Auth/TPA ID

: 9920144559

Collected

: 24/Aug/2024 09:43AM

Received Reported : 24/Aug/2024 01:33PM : 24/Aug/2024 03:45PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.

DR. APEKSHA MADAN MBBS, DPB



PATHOLOGY SIN No:UR2407135



: Mr. PRANAY JAYESHKUMAR SHAH

Age

: 32 Y M

UHID

: STAR.0000064951

OP Visit No

: STAROPV72651

Reported on

: 24-08-2024 13:50

Printed on

: 24-08-2024 13:51

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:24-08-2024 13:50

---End of the Report---

Dr. VINOD SHETTY

Radiology

**Apollo Spectra Hospitals:** 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034 Ph No: 022 - 4332 4500 | www.apollospectra.com 24/08/2024 11:57

PRANAY SHAH

32Years

### **EYE REPORT**



Name: Pranay.	Shah
---------------	------

Date: 24/8/24

32/M. Age /Sex:

Ref No.:

Complaint:

Ant. Seg: WNC - 0.6:1-HNRR.

Examination

FR+

### Spectacle Rx

Right Eye								
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	3.5	4.50	1 5 6	6/6		0.50	15"
Read	N <sub>6</sub>	χ. 3	, , ,	13	N6	1000		

·lopography Remarks:

#### Medications:

Trade Name	Frequency	Duration

Follow up:

Consultant:

**Apollo Spectra Hospitals** Famous Cine Labs, 156, Pt. M. M. Malviya Road, Tardeo, Mumbai - 400 034. Tel.: 022 4332 4500 www.apollospectra.com &

M.D., D.O M.S. (GOLD MEDALIST) Reg. No. 2012/10/2914 Mob:- 8850 1858 73



Shah

64951 ID

Height

179cm

24. 8. 2024 Date

APOLLO SPECTRA HOSPITAL

Segmental Lean

Trunk

 $29.5 \,\mathrm{kg}$ Normal

3.8kg

Normal

10.6kg

Normal

35.3%

2. 2kg

Over

27, 4%

4. 2kg

Over

eft

Segmental Fat

Lean Mass

Evaluation

3.8kg

Normal

10, 6kg

Normal

PBF

Fat Mass

Evaluation

35.0%

2. 2kg Over

27:5%

4. 3kg

Over

\* Segmantal Fat is estimated.

Age 32

TBW

Total Body Water

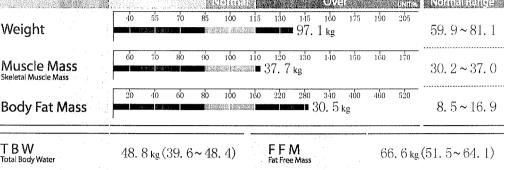
Protein

Gender

Male

12:21:36 Time

Roay Comb	osition
Maiaht	40
Weight	



\* Mineral is estimated.

Mineral

## **Obesity Diagnosis**

Obesity L	)iagno:	SIS		Nutrition	al Evaluatio	n	
			a Wormalkange	Protein	☑Normal	☐ Deficient	
ВМІ				Mineral	✓Normal	Deficient	
Body Mass Index	(kg/m²)	30. 3	18. $5 \sim 25$ . 0	Fat	□Normal	□ Deficient	<b>✓</b> Excessive
				Weight M	lanagemen	t	
PBF	(%)	31. 5	10. 0 ~ 20. 0	Weight	□ Normal	☐ Under	<b>∀</b> Over
Percent Body Fat				SMM	□Normal	□ Under	☑ Strong
MALLO		6 6 6		Fat	□Normal	□ Under	<b>☑</b> Over
WHR Waist-Hip Ratio	0. 98	0.80~0.90	Obesity Diagnosis				
BMR		***************************************		B-M I	□Normal	☐ Under ☑ Extremely	□ Over Over
Basal Metabolic Ra	(kcal)	1808	1975 <b>~</b> 2331	PBF	□Normal	☐ Under	✓ Over
				WHR	□Normal	□ Under	✓ Over

### **Impedance**

287. 5 288. 8 23. 2 221. 1 219. 6 100kHz 255, 7 258, 5 19, 8 197, 7 196, 3

Trunk 34.2%

16. 3kg Over

### Muscle-Fat Control

Muscle Control

 $0.0 \,\mathrm{kg}$ 

**Fat Control** 

13.  $2 \text{ kg} (10.6 \sim 13.0)$ 

- 18.8 kg

Fitness Score

68

4.  $60 \text{ kg} (3.67 \sim 4.48)$ 

## \* Use your results as reference when consulting with your physician or fitness trainer.

### Exercise Planner Plan your weekly exercises from the followings and estimate your weight loss from those activities.

#### Energy expenditure of each activity(base weight: 97. 1 kg / Duration: 30min. / unit: kcal) Walking Jogging Bicycle Swim Mountain Climbing Aerobic 194 340 291 340 317 340 Table tennis Oriental Fencing Football Gate ball Badmintor Tennis 219 291 340 486 184 219 Racket ball Rope jumping Tae Golf Squash Basketball won-do 486 486 486 291 340 171Weight training Dumbbell Elastic Push-ups Sit-ups Squats band abdominai

#### How to do

- 1. Choose practicable and preferable activities from the left.
- 2. Choose exercises that you are going to do for 7 days.
- 3. Calculate the total energy expenditure for a week.
- 4. Estimate expected total weight loss for a month using the formula shown below.
- · Recommended calorie intake per day kcal

\*Calculation for expected total weight loss for 4 weeks: Total energy expenditure (kcal/week) X 4weeks ÷ 7700



Patient Name : Mr. PRANAY JAYESHKUMAR SHAH Age/Gender : 32 Y/M

UHID/MR No.: STAR.0000064951OP Visit No: STAROPV72651Sample Collected on: 24-08-2024 13:50

**Ref Doctor** : SELF **Emp/Auth/TPA ID** : 9920144559

#### DEPARTMENT OF RADIOLOGY

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Dr. VINOD SHETTY

Radiology