





Patient Name : Mr.SHUBHAM KUMAR PRIYADARSHI Collected : 26/Aug/2023 08:11AM Age/Gender : 28 Y 7 M 25 D /M Received : 26/Aug/2023 06:31PM UHID/MR No Reported : CANN.0000124537 : 26/Aug/2023 07:26PM Visit ID : CANNOPV367604 Status : Final Report Ref Doctor : Dr.SELF : ARCOFEMI HEALTHCARE LIMITED Sponsor Name Emp/Auth/TPA ID : bobS44672

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR, И	PERIPHERAL SMEAR, WHOLE BLOOD EDTA				
METHODOLOGY	: Microscopic.				
RBC MORPHOLOGY	: Predominantly normocytic normochromic RBC's noted.				
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.				
PLATELETS	: Adequate in number.				
PARASITES	: No haemoparasites seen.				
IMPRESSION	: Normocytic normochromic blood picture.				
NOTE/ COMMENT	: Please correlate clinically.				

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SIN No:BED230203467

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory. Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819) Address: D No.30, F – Block. 2nd Avenue, Anna Nagar East, Chennai.600 102, Phone - 044-26224504 / 05

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APOLLO CLINICS NETWORK







Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 06:31PM
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 07:26PM
Visit ID	: CANNOPV367604	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS44672		

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

HAEMOGLOBIN		14.2	g/dL	13-17	Spectrophotometer
PCV		42.40	%	40-50	Electronic pulse & Calculation
RBC COUNT		4.66	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV		91.2	fL	83-101	Calculated
MCH		30.6	pg	27-32	Calculated
MCHC		33.5	g/dL	31.5-34.5	Calculated
R.D.W		14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COU	JNT (TLC)	4,700	cells/cu.mm	4000-10000	Electrical Impedanc
DIFFERENTIAL LEUCOC	YTIC COUNT (DL	C)			
NEUTROPHILS		44.0	%	40-80	Electrical Impedance
LYMPHOCYTES		46.3	%	20-40	Electrical Impedance
EOSINOPHILS		1.7	%	1-6	Electrical Impedanc
MONOCYTES		7.7	%	2-10	Electrical Impedanc
BASOPHILS		0.3	%	<1-2	Electrical Impedanc
ABSOLUTE LEUCOCYTE	COUNT				
NEUTROPHILS		2068	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES		2176.1	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS		79.9	Cells/cu.mm	20-500	Electrical Impedanc
MONOCYTES	÷.,	361.9	Cells/cu.mm	200-1000	Electrical Impedanc
BASOPHILS		14.1	Cells/cu.mm	0-100	Electrical Impedanc
PLATELET COUNT		157000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIME RATE (ESR)	NTATION	3	mm at the end of 1 hour	0-15	Modified Westergre
PERIPHERAL SMEAR					
METHODOLOGY	: Microscopic				
RBC MORPHOLOGY	: Predominantly	normocytic norr	nochromic RBC's no	ted.	
VBC MORPHOLOGY	: Normal in nur	mber, morpholog	y and distribution. N	o abnormal cells see	1.
PLATELETS	: Adequate in r	number.			
PARASITES	: No haemopara	asites seen			

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Visit ID Ref Doctor Emp/Auth/TPA ID	: CANNOPV367604 : Dr.SELF : bobS44672	Status Sponsor Name	: Final Report : ARCOFEMI HEALTHCARE LIMITED	
A	DEPARTM RCOFEMI - MEDIWHEEL - FULL BOI	ENT OF HAEMATOLOG	-	2324
	est Name Resu		Bio. Ref. Range	Method

NOTE/ COMMENT

: Please correlate clinically.

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SIN No:BED230203467

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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method							
Δ				-	2324		
Emp/Auth/TPA ID	: bobS44672						
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED			
Visit ID	: CANNOPV367604		Status	: Final Report			
UHID/MR No	: CANN.0000124537		Reported	: 26/Aug/2023 08:07PM			
Age/Gender	: 28 Y 7 M 25 D /M		Received	: 26/Aug/2023 06:31PM			
Patient Name	: Mr.Shubham Kumar Pri	ADARSHI	Collected	: 26/Aug/2023 08:11AM			

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA

BLOOD GROUP TYPE	В	Microplate Hemagglutination
Rh TYPE	Positive	Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.

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APOLLO CLINICS NETWORK







DEPARTMENT OF BIOCHEMISTRY					
Emp/Auth/TPA ID	: bobS44672				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CANNOPV367604	Status	: Final Report		
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 07:02PM		
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 06:24PM		
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM		

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324 Test Name Result Unit Bio, Ref, Range

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	91	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines

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.



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SIN No:PLF02018694

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APOLLO CLINICS NETWORK







DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324					
Emp/Auth/TPA ID	: bobS44672				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CANNOPV367604	Status	: Final Report		
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 05:52PM		
Age/Gender	: 37 Y 7 M 25 D/M	Received	: 26/Aug/2023 05:04PM		
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 02:34PM		

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2	89	mg/dL	70-140	HEXOKINASE

GLUCOSE, POST PRANDIAL (PP), 2	89	mg/dL	70-140	HEXOKINASE	
HOURS, SODIUM FLUORIDE PLASMA (2					
HR)					
					-

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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SIN No:PLP1362755

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APOLLO CLINICS NETWORK







Emp/Auth/TPA ID	: bobS44672		
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	: CANNOPV367604	Status	: Final Report
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 06:56PM
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 06:31PM
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL	- FULL BODY ANNU	JAL PLUS MALI	E - TMT - PAN INDIA - F	Y2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5	%	HPLC	
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	97	mg/dL	Calculated	

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 - 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 - 7
FAIR TO GOOD CONTROL	7 - 8
UNSATISFACTORY CONTROL	8 - 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.

4. 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.

5. In cases of Interference of Hemoglobin variants in HbA1C alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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Visit ID	: CANNOPV367604		Status	: Final Report		
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCAR	E LIMITED	
Emp/Auth/TPA ID	: bobS44672					
		DEPARTMENT	OF BIOCHEMISTR	Y		
A	RCOFEMI - MEDIWHEEL				2324	

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SIN No:EDT230078405

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APOLLO CLINICS NETWORK







Emp/Auth/TPA ID	: bobS44672				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CANNOPV367604	Status	: Final Report		
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 07:02PM		
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 06:24PM		
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324						
Test Name	Result	Unit	Bio. Ref. Range	Method		

LIPID PROFILE, SERUM TOTAL CHOLESTEROL 112 mg/dL <200 CHO-POD TRIGLYCERIDES 80 ma/dL <150 GPO-POD HDL CHOLESTEROL 40-60 28 mg/dL Enzymatic Immunoinhibition NON-HDL CHOLESTEROL 84 mg/dL <130 Calculated LDL CHOLESTEROL <100 68 mg/dL Calculated VLDL CHOLESTEROL 16 mg/dL <30 Calculated CHOL / HDL RATIO 4.00 0-4.97 Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

1. Measurements in the same patient on different days can show physiological and analytical variations.

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

3.Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.

4.Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.

5.As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.

6.VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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Emp/Auth/TPA ID	: bobS44672				
		DEPARTMENT O	F BIOCHEMISTR	Y	
A	RCOFEMI - MEDIWHEEL	- FULL BODY ANN	IUAL PLUS MALI	E - TMT - PAN INDIA - FY	2324
т	est Name	Result	Unit	Bio. Ref. Range	Method
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SIN No:SE04462763

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APOLLO CLINICS NETWORK







Patient Name Age/Gender	: Mr.SHUBHAM KUMAR PRIYADARSHI : 28 Y 7 M 25 D /M	Collected Received	: 26/Aug/2023 08:11AM : 26/Aug/2023 06:24PM
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 07:02PM
Visit ID	: CANNOPV367604	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS44672		

DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324 **Test Name** Unit Result Bio. Ref. Range Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.45	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.35	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	74.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.6-8.3	Biuret
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.70	g/dL	2.0-3.5	Calculated
A/G RATIO	1.63	×	0.9-2.0	Calculated

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	DEPARTMENT OF BIOCHEMISTRY							

			-				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324							
Test Name	Result	Unit	Bio. Ref. Range	Method			

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM							
CREATININE	0.89	mg/dL	0.72 – 1.18	JAFFE METHOD			
UREA	13.00	mg/dL	17-43	GLDH, Kinetic Assay			
BLOOD UREA NITROGEN	6.1	mg/dL	8.0 - 23.0	Calculated			
URIC ACID	7.20	mg/dL	3.5–7.2	Uricase PAP			
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III			
PHOSPHORUS, INORGANIC	3.10	mg/dL	2.5-4.5	Phosphomolybdate Complex			
SODIUM	140	mmol/L	136–146	ISE (Indirect)			
POTASSIUM	3.3	mmol/L	3.5–5.1	ISE (Indirect)			
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)			

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APOLLO CLINICS NETWORK





Test Name Result			Unit	Bio. Ref. Range	Method
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		DEPARTMENT O	F BIOCHEMISTR	Y	
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GAMMA GLUTAMYL TRANSPEPTIDASE	25.00	U/L	<55	IFCC
(GGT), SERUM				

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APOLLO CLINICS NETWORK







Δ	RCOFEMI - MEDIWHEEL - FULL BODY	NT OF IMMUNOLOGY	
			/
Emp/Auth/TPA ID	: bobS44672		
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	: CANNOPV367604	Status	: Final Report
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 07:35PM
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 06:23PM
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM

Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM								
TRI-IODOTHYRONINE (T3, TOTAL)	1.01	ng/mL	0.7-2.04	CLIA				
THYROXINE (T4, TOTAL)	7.23	µg/dL	6.09-12.23	CLIA				
THYROID STIMULATING HORMONE (TSH)	2.261	µIU/mL	0.34-5.60	CLIA				

Comment:

Note:

	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

TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.

TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.

Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.

Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

1	ſSH	T3	T4	FT4	Conditions
H	łigh	Low	Low	I OW	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
H	łigh	N	Ν	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.

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Low

High

N/Low

Ν

High

High





Patient Na	ime	: Mr.SHUBł	HAM KUMAR	PRIYADARSHI	Colle	ected	: 26/Aug/2023 08:11AM			
Age/Gend	ər	: 28 Y 7 M 25 D /M		Rece	eived	: 26/Aug/2023 06:	23PM			
UHID/MR	No	: CANN.00	00124537		Repo	orted	: 26/Aug/2023 07:	: 26/Aug/2023 07:35PM		
Visit ID		: CANNOP	V367604		Statu	IS	: Final Report			
Ref Doctor		: Dr.SELF			Spor	sor Name	: ARCOFEMI HEA	LTHCARE	LIMITED	
Emp/Auth/	TPA ID	: bobS446	72							
				DEPAR	TMENT OF IMM	UNOLOG	(
	A	RCOFEMI -	MEDIWH	EEL - FULL BO	DDY ANNUAL	PLUS MALI	E - TMT - PAN IND	DIA - FY2	:324	
	Te	est Name		Re	sult	Unit	Bio. Ref. Ran	ge	Method	
N/Low	Low	Low	Low	Secondary a	nd Tertiary Hyp	othyroidism	ı			
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy						
Low	Ν	Ν	Ν	Subclinical Hyperthyroidism						
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism						

Thyroiditis, Interfering Antibodies

T3 Thyrotoxicosis, Non thyroidal causes

Pituitary Adenoma; TSHoma/Thyrotropinoma

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SIN No:SPL23121300

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High

High

N

High

High

Ν

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APOLLO CLINICS NETWORK







Method

Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSHI	Collected	: 26/Aug/2023 08:11AM				
Age/Gender	: 28 Y 7 M 25 D /M	Received	: 26/Aug/2023 12:53PM				
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 01:45PM				
Visit ID	: CANNOPV367604	Status	: Final Report				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED				
Emp/Auth/TPA ID	: bobS44672						
DEPARTMENT OF CLINICAL PATHOLOGY							

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	

PHYSICAL EXAMINATION						
COLOUR	PALE STRAW		PALE YELLOW	Visual		
TRANSPARENCY	CLEAR		CLEAR	Visual		
рН	6.0		5-7.5	DOUBLE INDICATOR		
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue		
BIOCHEMICAL EXAMINATION						
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF		
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		
BLOOD	NEGATIVE		NEGATIVE	Peroxidase		
NITRITE	NEGATIVE		NEGATIVE	Diazotization		
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE		
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	·				
PUS CELLS	1-3	/hpf	0-5	Microscopy		
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY		
RBC	NIL	/hpf	0-2	MICROSCOPY		
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY		
CRYSTALS	ABSENT		ABSENT	MICROSCOPY		

Comment:

1.Biochemical Examination of urine sample was performed by reflectance photometry and confirmed by alternative methods. 2.The samples are assessed for integrity and adequacy before processing.



1860

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500 7788

SIN No:UR2172552

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory. Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Apolio Health and Lifestyle Limited (CIN - UB5110TG2000PLC115819) Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 www.apoliohl.com [Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK Address: D No.30, F – Block 2nd Avenue, Anna Nagar East, Chennai.600 102, Phome - 044-26224504 / 05

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	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method											
Δ		PARTMENT OF CL			2324							
Emp/Auth/TPA ID	: bobS44672											
Ref Doctor	: Dr.SELF		Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED								
Visit ID	: CANNOPV367604		Status	: Final Report								
UHID/MR No	: CANN.0000124537		Reported	: 26/Aug/2023 06:54PM								
Age/Gender	: 37 Y 7 M 25 D/M		Received									
Patient Name	: Mr.SHUBHAM KUMAR PRI	ADARSHI	Collected	: 26/Aug/2023 02:34PM								

URINE GLUCOSE(POST PRANDIAL)

NEGATIVE

NEGATIVE

Dipstick

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SIN No:UPP015391

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APOLLO CLINICS NETWORK







Dipstick

NEGATIVE

Т	est Name F	Result Unit	Bio. Ref. Range	e Method							
A	RCOFEMI - MEDIWHEEL - FULL	BODY ANNUAL PLUS MAL	E - TMT - PAN INDIA - FY	2324							
	DEPART	IENT OF CLINICAL PATHO	LOGY								
Emp/Auth/TPA ID	: bobS44672										
Ref Doctor	: Dr.SELF	Sponsor Name	Sponsor Name : ARCOFEMI HEALTHCARE LI								
Visit ID	: CANNOPV367604	Status	: Final Report								
UHID/MR No	: CANN.0000124537	Reported	: 26/Aug/2023 01:35PM								
Age/Gender	: 28 Y 7 M 25 D /M	Received	Received : 26/Aug/2023 12:52PM								
Patient Name	: Mr.SHUBHAM KUMAR PRIYADARSI	H Collected	: 26/Aug/2023 08:11AM	26/Aug/2023 08:11AM							

URINE GLUCOSE(FASTING)

*** End Of Report ***

NEGATIVE

DR.R.SRIVATSAN M.D.(Biochemistry)

Dr THILAGA

M.B.B.S, M.D(Pathology) **Consultant Pathologist**

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SIN No:UF009336

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APOLLO CLINICS NETWORK



Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age/Gender	: 37 Y/M
UHID/MR No.	: CANN.0000124537	OP Visit No	: CANNOPV367604
Sample Collected on	:	Reported on	: 26-08-2023 16:51
LRN#	: RAD2082322	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS44672		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver is normal in size and shows fatty changes (Grade -I) Intra and extra hepatic biliary passages are not dilated. Gall bladder appears normal with no evidence of calculus.Wall thickness appear normal.

Pancreas and spleen appear normal.Spleen measures 11.0cms.

Portal and splenic veins appear normal.No evidence of ascites or lymphadenopathy.

Diaphragmatic movements are satisfactory.

There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 11.3 x 4.9 cms.Left kidney measures 10.4 x 4.8 cms. Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation

Prostate measures 2.3 x 2.9 x 2.6 cms volume9 cc and shows normal echopattern. Seminal vesicles appear normal. Bladder is normal in contour. **IMPRESSION:** *FATTY LIVER -GRADE -I

> Dr. PRAVEENA SHEKAR T MBBS, DMRD, FAGE Radiology



Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age/Gender	: 37 Y/M
UHID/MR No.	: CANN.0000124537	OP Visit No	: CANNOPV367604
Sample Collected on	:	Reported on	: 26-08-2023 13:11
LRN#	: RAD2082322	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS44672		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

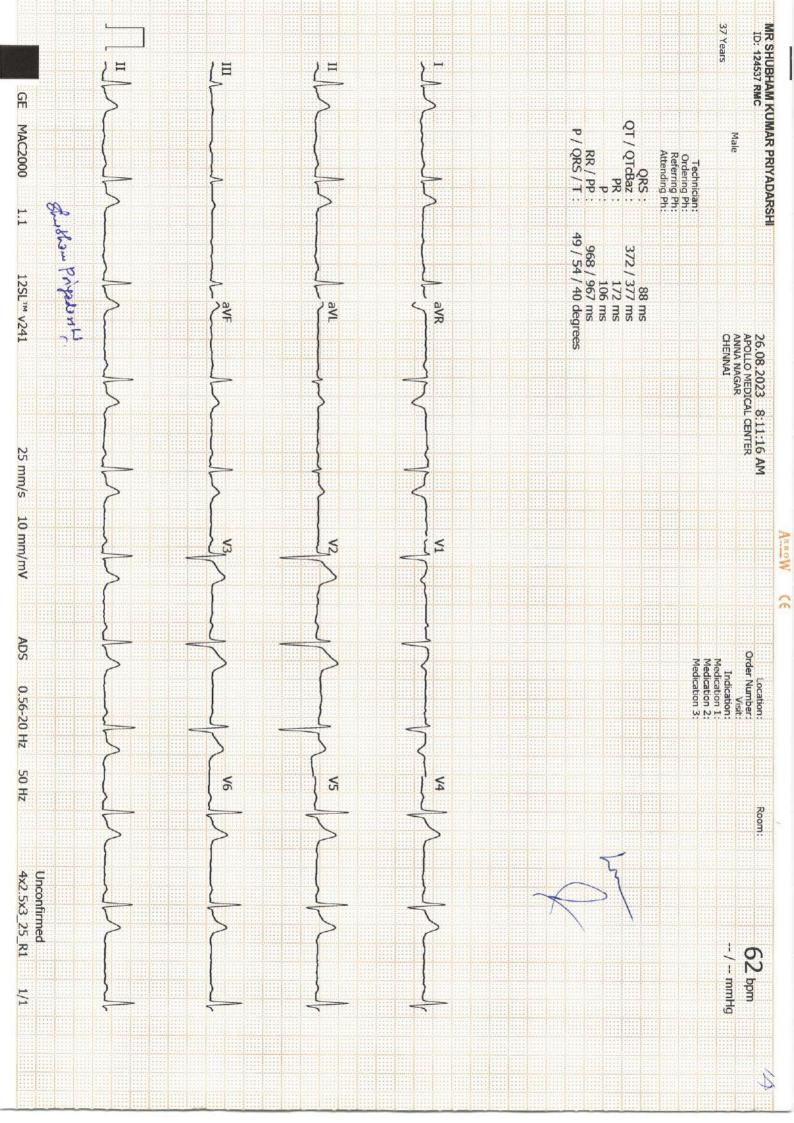
Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION: *NO SIGNIFICANT ABNORMALITY DETECTED.

> Dr. PRAVEENA SHEKAR T MBBS, DMRD, FAGE Radiology





To,

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	OF HEALTH CHECK UP BENEFICIARY
NAME	SHUBHAM KUMARPRIYADARSHI
DATE OF BIRTH	01-01-1995
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	26-08-2023
BOOKING REFERENCE NO.	23S178939100066894S
	SPOUSE DETAILS
EMPLOYEE NAME	MS. KUMARI SHIKHA
EMPLOYEE EC NO.	178939
EMPLOYEE DESIGNATION	CREDIT
EMPLOYEE PLACE OF WORK	CHENNAI, CHOOLAIMEDU
EMPLOYEE BIRTHDATE	04-10-1994

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **19-08-2023** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheet (Arcoferni Healthcare Limited))



रीक ऑफ बहीदा Bank of Baroda





28/08/2023

Mr. Su	bham kumo	vo Poryadarsh	· 28/M.
Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	8.P:

General Examination / Allergies History

Rx. Patient advind [OPG], complete Scaling, RCT & an FPD.

Follow up date:

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

Apollo HOSPITALS	HALMOLOGY	Expertise. Closer to you.
Name: Subharn Kumar Occupation: PriyadAnshi Age: 28 y. Sex: Male Femaie Address: Ph:	Date: 26812 Ref. Physician: Copies to:	

REPORT ON OPHTHALMIC EXAMINATION

History:	New	
Present Complaint:	Noc.	
ON EXAMINATION:	RE	LE
Ocular Movements :		
Anterior Segment :	Crea	Thee
Intra-Ocular-Pressure :	v nu	
Visual Acuity: D.V. :	N	N
Without Glass :		
With Glass :	616	616
N.V. :	~ (8	
Visual Fields :	A.F. 4	NG.
Fundus :	NG	
Impression :	Frid	Rid.
Advice :	Inu	line of a
Colour Vision :	N	N
Online appointments: www.apolloclinic.com	To book an appointment 1860 500 7788	Follow us on Barnut





ENT check up

Height:	Weight:		BMI:	Waist Circum:
Temp:	Pulse:		Resp:	B.P:
eneral Examinatio	n / Allergies			
istory		XL L	a delitat	EDS P
		NO U	omphints snoring	EDS D. wt sain
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		OFE	GIT ton	1.
		1-	411 ton	D113.
				1 0
		Into	Chr. Tonsill	ibs / ? osas.
				AB
	2			
	-			
		Follow up date:		Doctor Signature & Stamp

In case of emergency, Please call 1066 or come directly to emergency room of the hospital Apollo Health and Lifestyle Limited To book an appointment **1860 500 7788**

GE CardioS										RECOVERY				EAERUISE	EXENCIÓ		PRETEST		Phase Name							26.08.2023 12:39:51pm	MR SHUI Patient ID
CardioSoft V6 73 (2)										Ŷ		STAGE 4	STAGE 3	CTAGE 1			SUPINE		ie Stage Name		Comment:	Technician:	Ref. MD:	Medical History:	Test Reason	n Male n 28yrs Indian Meds:	MR SHUBHAM KUMAR PRIYADARSHI, Patient ID 124537 RMC
										04:03	00:05	03:00	03:00	03:00	00:19	00:03	80:00	in Stage	Time			Test Type:	Ordering MD:	tory:		Г	RIYADARSH
										0.00	5.00	4.20	3.40	1./U	1.00	0.00	0.00	(mph)	Speed								І ,
I Inconfirmed										0.00	15.00	13.00	11.00	0.00	0.00	0.00	0.00		CV.								
irmed										1.0			8.7 8.7				1.0	(METS) (I									Tabular Summary
										99 120/8			144 140/80	120		83	120	u) (n	HR BP			IND	Con	Arrh	Max	BRU Max Max	nmary
										/80 11880			0 0160				0.200	(mm	RPP			INDUCIBLE MYOCARDIAL ISCHEMIA	ons for Term	ythmia: PVC:4	ST: -0.50 mm	BRUCE: Total Exercise Time 12:04 Max HR: 173 bpm 90% of max pred Max BP: 150/90 mmHg BP at rest: Maximum Workload: 11.90 METS	
											3	ω.		- o	0	•	Ð	0	VE			CARDIAL IS	IMPRESSIO	, PSVC:3, J	, 0.00 mV/s	rcise Time 12 90% of max nHg BP at r d: 11.90 MET	
		Engrand	2 10							0.35	0.20	0.35	-0.20	0.00	0.00	-0.10	-0 10		ST Level Comment			SCHEMIA	Conclusion: FINAL IMPRESSION: TMT IS NEGATIVE POOPTIVE FOR	Arrhythmia: PVC:4, PSVC:3, PERR:1, ESC:1, PCAP:1	in III; EXERCISE ST/	dicted 192 bpm 120/80 Max R	
MICRO MED CHARTS		3/																	- ~ ~ ~ ~	X		A PLACE AND A PLAC	ENDORTHIVE END	AP:I	AGE 3 08:30	HR at rest: 84 UPP: 25350 mmHg*bpn	APOLLO MEDICAL CENTRE
CHARTS																										L	AL CENTRE

C _

GE CardioSoft V6.73 (2)

Unconfirmed

MICRO MED CHARTS

MR SHUBHAM KUMA Patient ID 124537 RMC 26.08.2023 12:39:51pm	MR SHUBHAM KUMAR PRIYADARSHI, Patient ID 124537 RMC 26.08.2023 12:39:51pm	RSHI,	Selected Medians Report	dians Report		APC	APOLLO MEDICAL CENTRE
BASELINE EXERCISE 0:01 83 bpm 120/80 mmHg	MAX. ST EXERCISE 8:30 146 bpm 146/80 mmHg	PEAK EXERCISE EXERCISE 12:05 173 bpm	TEST END RECOVERY 3:56 100 bpm 120/80 mmHg	BASELINE EXERCISE 0:01 83 bpm 120/80 mmHg	MAX. ST EXERCISE 8:30 146 bpm 146 mmHg	PEAK EXERCISE EXERCISE 12:05 173 bpm	TEST END RECOVERY 3:56 100 bpm 120/80 mmHg
	10.75			0.00	VI-~~W	VI-+W++-	0.25 VI-~~h/}
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	л (ЧИХ) 0.30 1.76	II W 0.75 2.46		V2 2.15 1.37	V2_~~	V2 - 4 2.55 4.49	V24//T \ 1.55 0.46
0.00 0.59	0.59		лл	V3	V3-V/M 1.60	V3 2.55 4.61	V3-4/1
avr 110	avr.1/1/	av a 1	-0.65 -1.37	V4 ~ /// 1.45 1.76	V4-V	2.15 3.94	V4
avr	-0.29	0.15 0.20	avi-1,22	$v_{s} \rightarrow h / \lambda$	0.75 2.06	V5 1:30 3:29	V5~1/11 1.26
aVF 44	aVF	avr W	aVF 0.55 1.72	0.60 0.99	V6 0.15 1.40	v6 0.60 2.83	V6-444
E CardioSoft V6 Jmm/mV 50Hz	GE CardioSoft V6.73 (2) 10mm/mV 50Hz 0.01-20Hz S+ HEART V5.4		Unconfirmed		Attending MD:	Julying	MICRO MED CHARTS

- 1

Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age	: 37 Y/M
UHID	: CANN.0000124537	OP Visit No	: CANNOPV367604
Conducted By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 26-08-2023 15:52
Referred By	: SELF		

CARDIOLOGY

CARDIAC STRESS TEST – (TMT)

Angina Pectoria:		
NO		
Danai ana MI.		
Previous MI:		
NO		
PTCA:		
NO		
CABG:		
NO		
HTN:		
NO		
DM:		
NO		
Smoking:		
NO		
Obesity:		
NO		
Lipidemia:		
NO		
Resting ECG Supine:		
NORMAL		
Standing:		
NORMAL		
Protocol Used:		
BRUCE		
Monitoring Leads:		
12 LEADS		

Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age	: 37 Y/M
UHID	: CANN.0000124537	OP Visit No	: CANNOPV367604
Conducted By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 26-08-2023 15:52
Referred By	: SELF		

Grade Achieved: 15.00

% HR / METS: 11.9

Reason for Terminating Test: HEART RATE ATTAINED

Total Exercise Time: 12:04

Symptoms and ECG Changes during Exercise: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

0 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

3 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

6 mts: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

INTERPRETATION:

Rhythm: NORMAL

S.T. Segment : NORMAL

III Blood Pressure Response : NORMAL

IV Fitness Response : GOOD

Impression: Cardiac stress analysis is NEGATIVE for inducible myocardial ischaemia

Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age	: 37 Y/M
UHID	: CANN.0000124537	OP Visit No	: CANNOPV367604
Conducted By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 26-08-2023 15:52
Referred By	: SELF		

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

Dr. ARULNITHI AYYANATHAN

Apollo Health and Lifestyle Limited

(CIN - U85110TN2000PLC046089) Regd. Office: 19 Bishop Gardens, R A Puram, Chennai 600 028, Tamil Nadu, India | Email ID: info@apollohl.com

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Patient Name	: Mr. SHUBHAM KUMAR PRIYADARSHI	Age	: 37 Y/M
UHID	: CANN.0000124537	OP Visit No	: CANNOPV367604
Reported By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 26-08-2023 17:12
Referred By	: SELF		

ECG REPORT

Observation :-

- Normal Sinus Rhythm.
 Heart rate is 62 beats per minutes.

Impression:

NORMAL RESTING ECG.

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

Dr. ARULNITHI AYYANATHAN