

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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

SIN No:BED230203549

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF HAEMATOLOGY

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

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

HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	15.7	g/dL	13-17	Spectrophotometer
PCV	46.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.87	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	83	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	13.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,800	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	71.1	%	40-80	Electrical Impedence
LYMPHOCYTES	19	%	20-40	Electrical Impedence
EOSINOPHILS	2.2	%	1-6	Electrical Impedence
MONOCYTES	7.6	%	2-10	Electrical Impedence
BASOPHILS	0.1	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	6256.8	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1672	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	193.6	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	668.8	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	8.8	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT	151000	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

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



SIN No:BED230203549

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

SIN No:BED230203549

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 12:43PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	103	mg/dL	70-100	GOD - POD
--------------------------------------	------------	-------	--------	-----------

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:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	115	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.

Ref: Marks medical biochemistry and clinical approach

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	103	mg/dL		Calculated

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 12:43PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF BIOCHEMISTRY

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

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

Comment:

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

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

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



SIN No:PLF02018755,PLP1362884,EDT230078443

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	118	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	63	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	39	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	79	mg/dL	<130	Calculated
LDL CHOLESTEROL	66.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.03		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.



SIN No:SE04462844

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohi.com | Email ID: enquiry@apollohi.com, Ph No: 040-4904 7777, Fax No: 4904 7744

GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethammampeta,
Visakhapatnam, Andhra Pradesh



APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF BIOCHEMISTRY

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

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

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	28	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	38.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	69.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.20	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.32		0.9-2.0	Calculated



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 TEST (RFT/KFT) , SERUM				
CREATININE	1.10	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	35.90	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	16.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.50	mg/dL	3.5-8.5	Uricase
CALCIUM	8.70	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.00	mg/dL	2.5-4.5	PMA Phenol
SODIUM	145	mmol/L	135-145	Direct ISE
POTASSIUM	4.5	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	107	mmol/L	98 - 107	Direct ISE

SIN No:SE04462844

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 (GGT) , SERUM	11.00	U/L	15-73	Glycylglycine Nitoranalide

SIN No:SE04462844

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:41PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF IMMUNOLOGY

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

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-iodothyronine (T3, TOTAL)	1.11	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	76.40	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.130	µIU/mL	0.3-4.5	CLIA

Comment:

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:41PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF IMMUNOLOGY

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

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

N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

SIN No:SPL23121351

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017



APOLLO CLINICS NETWORK

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:39PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:23PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	3-4	/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

Comment:

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



SIN No:UR2172616

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethammapeta,
Visakhapatnam, Andhra Pradesh



APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) **Andhra Pradesh:** Vizag (Seethamma Peta) **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla) **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) **Uttar Pradesh:** Ghaziabad (Indrapuram) **Gujarat:** Ahmedabad (Satellite) **Punjab:** Amritsar (Court Road) **Haryana:** Faridabad (Railway Station Road)


Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:39PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:23PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	Dipstick

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



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



Patient Name	: Mr. P Sai Kishore	Age/Gender	: 33 Y/M
UHID/MR No.	: CVIS.0000118239	OP Visit No	: CVISOPV113670
Sample Collected on	:	Reported on	: 26-08-2023 15:19
LRN#	: RAD2082351	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 8985355838		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus/ hydronephrosis seen on either side.

Right kidney : 10.6 x 4.9 cm

Left kidney : 10.8 x 4.3 cm

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate :Normal in size and echo texture.No evidence of necrosis/calcification seen. its volume 14 cc

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-

No significant abnormality detected.

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

Patient Name : Mr. P Sai Kishore

Age/Gender : 33 Y/M

This is only a screening test.



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name : Mr. P Sai Kishore

Age/Gender : 33 Y/M

UHID/MR No. : CVIS.0000118239

OP Visit No : CVISOPV113670

Sample Collected on :

Reported on : 26-08-2023 12:38

LRN# : RAD2082351

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 8985355838

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Name: Mr. P Sai Kishore
Age/Gender: 33 Y/M
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ABHIJEET VISHWAS GHATGE

MR No: CVIS.0000118239
Visit ID: CVISOPV113670
Visit Date: 26-08-2023 08:11
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. P Sai Kishore
Age/Gender: 33 Y/M
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ABHIJEET SINGH SACHAN

MR No: CVIS.0000118239
Visit ID: CVISOPV113670
Visit Date: 26-08-2023 08:11
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. P Sai Kishore
Age/Gender: 33 Y/M
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. AISHWARYA MALLADI

MR No: CVIS.0000118239
Visit ID: CVISOPV113670
Visit Date: 26-08-2023 08:11
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. P Sai Kishore
Age/Gender: 33 Y/M
Address: vskp
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ABHIJEET SINGH SACHAN

MR No: CVIS.0000118239
Visit ID: CVISOPV113670
Visit Date: 26-08-2023 08:11
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:41	90 Beats/min	120/80 mmHg	18 Rate/min	98.6 F	173 cms	84 Kgs	%	%	Years	28.07	cms	cms	cms		AHLL06520

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:41	90 Beats/min	120/80 mmHg	18 Rate/min	98.6 F	173 cms	84 Kgs	%	%	Years	28.07	cms	cms	cms		AHLL06520

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:41	90 Beats/min	120/80 mmHg	18 Rate/min	98.6 F	173 cms	84 Kgs	%	%	Years	28.07	cms	cms	cms		AHLL06520

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:41	90 Beats/min	120/80 mmHg	18 Rate/min	98.6 F	173 cms	84 Kgs	%	%	Years	28.07	cms	cms	cms		AHLL06520

Physical Medical Examination Format

NAME:- <u>Ms. P. Sai Kiran</u>	DATE:- <u>26/8/23</u>
DESIGNATION:-	AGE:- <u>33 yrs</u>
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:-MARRIED/UNMARRIED

MEDICAL EXAMINATION

Complaints (if any)	<u>Nil</u>
Personal /family history	<u>Nil</u>
Past Medical /Occupational History	<u>Nil</u>
Sensitivity/Allergy (if any)	<u>Nil</u>
Heart	<u>Normal</u>
Any other Conditions	<u>Nil</u>

Height:- <u>173</u>	Weight:- <u>84</u>	BMI <u>28.1</u>	Pulse <u>90</u>
Temp:- <u>98.6</u>	Pulse <u>90</u>	Resp:- <u>18</u>	B.P <u>120/80</u>

Remarks

Treatment Recommended (if any):

I Hereby Certify that I have examined Mr/Ms. P. Sai Kiran for pre-employment

/periodical medical examination, I have found / not found any disease, illness, contagious illness

I Certify That Employee Is Medically..... fit

Fit

Unfit

Temporarily Unfit

Signature Of Employee

Dr. G. INDIRA PRIYADARSHINI
MBBS
Signature & Seal Of Medical Examiner With
Apollo Family Physician
Registration No. 63148
Seethammempet, Vizag

Patient Name	: Mr. P Sai Kishore	Age	: 33 Y M
UHID	: CVIS.0000118239	OP Visit No	: CVISOPV113670
Reported on	: 26-08-2023 12:38	Printed on	: 26-08-2023 12:38
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:26-08-2023 12:38

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name	: Mr. P Sai Kishore	Age	: 33 Y M
UHID	: CVIS.0000118239	OP Visit No	: CVISOPV113670
Reported on	: 26-08-2023 15:18	Printed on	: 26-08-2023 15:19
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus/ hydronephrosis seen on either side.

Right kidney : 10.6 x 4.9 cm

Left kidney : 10.8 x 4.3 cm

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate :Normal in size and echo texture.No evidence of necrosis/calcification seen. its volume 14 cc

There is no evidence of ascites/ pleural effusion seen.

Patient Name : Mr. P Sai Kishore
UHID : CVIS.0000118239
Reported on : 26-08-2023 15:18
Adm/Consult Doctor :

Age : 33 Y M
OP Visit No : CVISOPV113670
Printed on : 26-08-2023 15:19
Ref Doctor : SELF

IMPRESSION:-

No significant abnormality detected.

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

This is only a screening test.

Printed on:26-08-2023 15:18

---End of the Report---

Aruna Pebbili
Dr. ARUNA PEBBILI
DMRD Radiology
Radiology


Patient Name	: Mr. P Sai Kishore	Age	: 33 Y/M
UHID	: CVIS.0000118239	OP Visit No	: CVISOPV113670
Conducted By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 26-08-2023 14:59
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.9 CM
LA (es)	3.3 CM
LVID (ed)	3.4 CM
LVID (es)	2.7 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	0.9 CM
EF	62.00%
%FD	33.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID 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:0.9m/sec.
MF:E > A
AF:1.0m/sec.

IMPRESSION:

NORMAL CARDIAC SIZE.
NO RWMA .
NORMAL LV SYSTOLIC FUNCTION.
NO PERICARDIAL EFFUSION.
LVEF:62%



ID: 118239

P SAI KISHORE

Male 33Years

Req. No. :

26-08-2023 11:36:32

HR : 90 bpm

P : 100 ms

PR : 142 ms

QRS : 86 ms

QT/QTcBz : 330/404 ms

P/QRS/T : 53/49/24 °

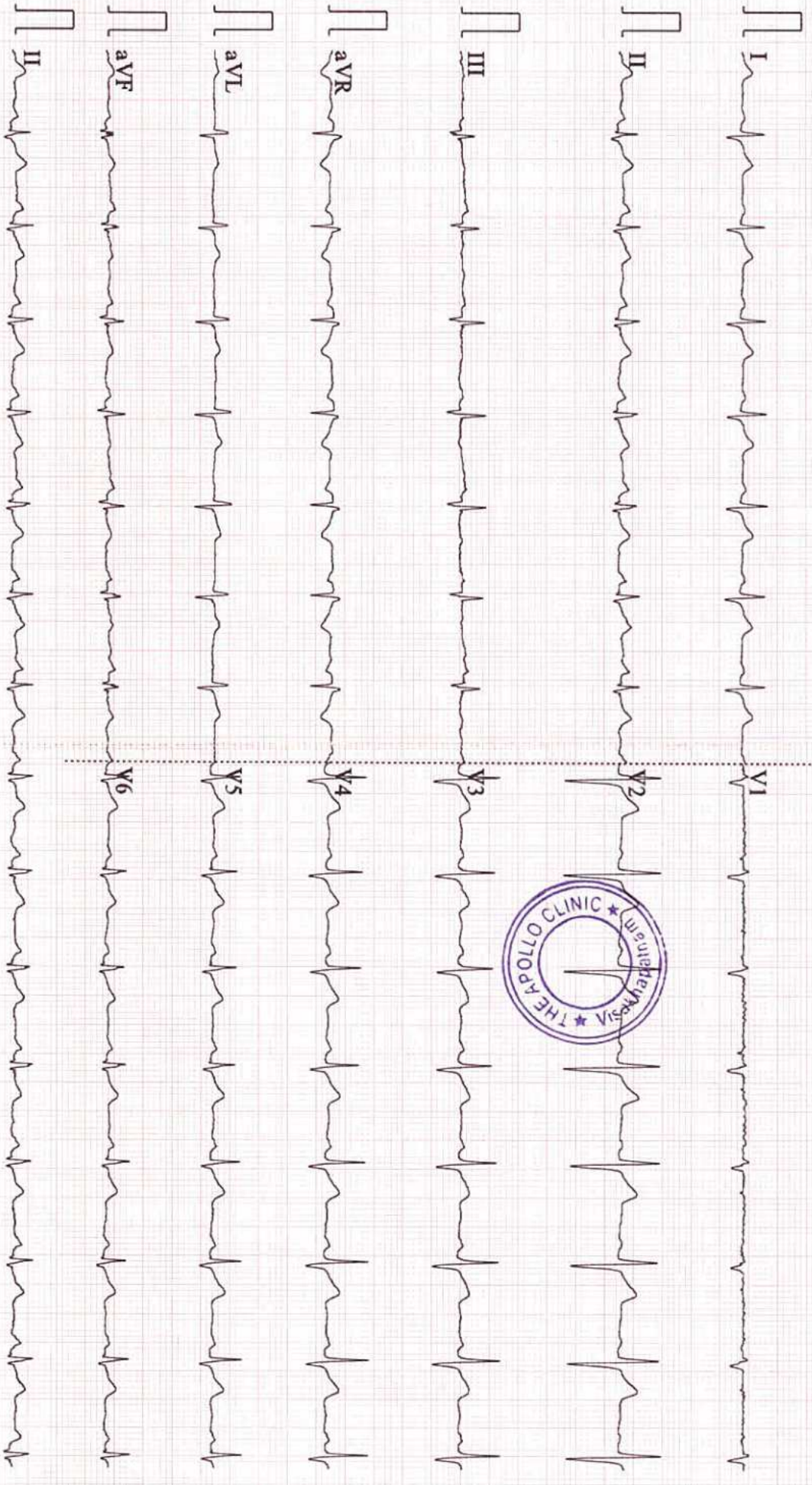
RV5/SV1 : 0.497/0.233 mV

Diagnosis Information:

Sinus rhythm

Normal ECG

Report Confirmed by:



Dr. N. MUKUNDA RAO

MBBS.,MS

ENT CONSULTANT

Reg. No. AMC17481

Patient Name: Mr Sai Kiran Age/Sex: M 33Yr Date: 26/8/20

For routine check

O/E Both Ears
Nose / ADAD
Throat

Hearing well clinically
ETF

NO ENT

NO ENT
←



Patient Name	: Mr. P Sai Kishore	Age	: 33 Y/M
UHID	: CVIS.0000118239	OP Visit No	: CVISOPV113670
Reported By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 26-08-2023 14:40
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 90 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



Name: Mr. P Sai Kishore
 Age/Gender: 33 Y/M
 Address: vskp
 Location: VISAKHAPATNAM, ANDHRA PRADESH
 Doctor:
 Department: LABORATORY
 Rate Plan: VISHAKAPATNAM_06042023
 Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CVIS.0000118239
 Visit ID: CVISOPV113670
 Visit Date: 26-08-2023 08:11
 Discharge Date:
 Referred By: SELF

Vitals:

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:41	90 Beats/min	120/80 mmHg	18 Rate/min	98.6 F	173 cms	84 Kgs	%	%	Years	28.07	cms	cms	cms		AHLL06520



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF HAEMATOLOGY

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

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

HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	15.7	g/dL	13-17	Spectrophotometer
PCV	46.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.87	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	83	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	13.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,800	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	71.1	%	40-80	Electrical Impedance
LYMPHOCYTES	19	%	20-40	Electrical Impedance
EOSINOPHILS	2.2	%	1-6	Electrical Impedance
MONOCYTES	7.6	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	6256.8	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1672	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	193.6	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	668.8	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	8.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	151000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:28PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 FACTOR , WHOLE BLOOD EDTA

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



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 12:43PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	103	mg/dL	70-100	GOD - POD
-------------------------------	-----	-------	--------	-----------

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:

- The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
- Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	115	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.

Ref: Marks medical biochemistry and clinical approach

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	103	mg/dL		Calculated

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 12:43PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF BIOCHEMISTRY

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

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

Comment:

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

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

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	118	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	63	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	39	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	79	mg/dL	<130	Calculated
LDL CHOLESTEROL	66.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.03		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.



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF BIOCHEMISTRY

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

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

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	28	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	38.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	69.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.20	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.32		0.9-2.0	Calculated



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 TEST (RFT/KFT) , SERUM

CREATININE	1.10	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	35.90	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	16.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.50	mg/dL	3.5-8.5	Uricase
CALCIUM	8.70	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.00	mg/dL	2.5-4.5	PMA Phenol
SODIUM	145	mmol/L	135-145	Direct ISE
POTASSIUM	4.5	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	107	mmol/L	98 - 107	Direct ISE



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:14PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 01:45PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 (GGT) , SERUM	11.00	U/L	15-73	Glycylcysteine Nitoranalide



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:41PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF IMMUNOLOGY

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

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-iodothyronine (T3, TOTAL)	1.11	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	76.40	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.130	µIU/mL	0.3-4.5	CLIA

Comment:

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.

Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:17PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:41PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

DEPARTMENT OF IMMUNOLOGY

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

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

N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyotropinoma



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:39PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:23PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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 (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.010		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	3-4	/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

Comment:

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



Patient Name : Mr.P SAI KISHORE	Collected : 26/Aug/2023 08:24AM
Age/Gender : 33 Y 3 M 14 D/M	Received : 26/Aug/2023 12:39PM
UHID/MR No : CVIS.0000118239	Reported : 26/Aug/2023 02:23PM
Visit ID : CVISOPV113670	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 8985355838	

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	Dipstick

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

V. Snehal

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



Name : Mr. P Sai Kishore

Age: 33 Y

UHID:CVIS.0000118239

Sex: M



Address : vskp

OP Number:CVISOPV113670

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Bill No :CVIS-OCR-61969

Date : 26.08.2023 08:12

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	HbA1c, GLYCATED HEMOGLOBIN	
4	2 D ECHO	
5	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA	
7	GLUCOSE, FASTING	
8	HEMOGRAM + PERIPHERAL SMEAR	
9	ENT CONSULTATION	
10	FITNESS BY GENERAL PHYSICIAN	
11	DIET CONSULTATION	
12	COMPLETE URINE EXAMINATION	
13	URINE GLUCOSE(POST PRANDIAL)	
14	PERIPHERAL SMEAR	
15	ECG	
16	BLOOD GROUP ABO AND RH FACTOR	
17	LIPID PROFILE	
18	BODY MASS INDEX (BMI)	
19	OPHTHAL BY GENERAL PHYSICIAN	
20	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
21	ULTRASOUND - WHOLE ABDOMEN	
22	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
23	DENTAL CONSULTATION	
24	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

Exception Letter for CAP

Date: 26/8/23

Client Name: P. Sai kishore

Gender - male

UHID: 118239

We are Not delivered service due to late

SERVICE eye checkup

So that we are unable to close all reports, once client visited again will close.

Regards,

EMP Name: Y. Jyothi



Apollo clinic,

Vizag.

Client Name: P. sai kishore

Signature:

Ph no:


 ಭಾರತ ಸರ್ಕಾರ
 Government of India

 ಸಿ.ಎಸ್. ಕಿಶೋರ್ ಪಾಟೀಲ್
 S. Kishore Patankuri
 ಜನ್ಮ ತಾರೀಖು: 12/05/1990
 ಸ್ವರೂಪ: MALE
 Issue Date: 04/01/2019
 Download Date: 30/03/2021
 6782 4479 8742
 VID : 9197 1543 9503 7307
 ನಾ ಆಧಾರ್, ನಾ ಗುರಿಂಪು


 ಬೆಂಕ ಆಂಥ ಬಡೋಡಾ
 Bank of Baroda
 ನಾಮ : ಬೆಹರಾ ಮಧುರಿ ಪ್ರಿಯಾಂಕಾ
 Name : BEHARA MADHURI PRIYANKA
 ಕರ್ಮಚಾರಿ ಕೂಡ ಕ್ರ. 198665
 E.C. No.

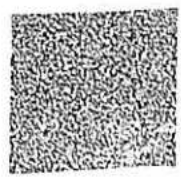
 ಸಹಿ
 P. M. Priyanka
 ಹಿರಕೆ ತಾ. ಬೆಹರಾ
 Signature of Holder
 Issuing Authority




 ಭಾರತ ಸರ್ಕಾರ
 Government of India

 ಆಧಾರ್
 ಭಾರತ ವಿಶ್ವ ಗುರುಂಪು
 Unique Identification Authority of India

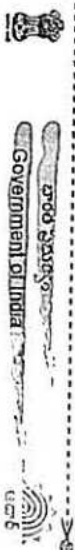
ಸಂಖ್ಯೆ / Enrollment No. : 2E24/02115/03942
 To
 Behara Madhuri Priyanka
 ದಿವಾ ಬಾಡು ಬೀದಿ
 C/O Behara Ramana Murthy,
 F-301, Hema Enclave,
 Simachalam Road,
 Near Simhadri Hospital,
 Srinivasa Nagar,
 VTC, Visakhapatnam (Rural), PO: Simachalam,
 Sub District: Visakhapatnam (rural), District: Visakhapatnam,
 State: Andhra Pradesh, PIN Code: 530028.
 Mobile: 6300753434
 14082203
 17/06/2013
 KF140822033F1



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
5032 5485 7199
 ನಾ ಆಧಾರ್, ನಾ ಗುರಿಂಪು



ಭಾರತ ಸರ್ಕಾರ
 Government of India
 ಭಾರತ ವಿಶ್ವ ಗುರುಂಪು
 Unique Identification Authority of India
 ಸಂಖ್ಯೆ / ID: 5032 5485 7199
 ಸ್ವರೂಪ / Gender: Female



5032 5485 7199
 ನಾ ಆಧಾರ್, ನಾ ಗುರಿಂಪು

17/06/2013

Your Apollo order has been confirmed

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

Wed 8/16/2023 1:17 PM

To:madhuripriyanka50@gmail.com <madhuripriyanka50@gmail.com>

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

Dear sai kishore ,,

Namaste Team,

Greetings from Apollo Clinics.

With regards to the below request the below appointment is scheduled at **VIZAG clinic** on **2023-08-26 at 08:15-08:20**.

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:

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

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