

Physical Medical Examination Format

NAME:- <u>N. Janardhana Red</u>	DATE:- <u>22/11/23</u>
DESIGNATION:-	AGE:- <u>33/M</u>
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:- MARRIED/UNMARRIED

MEDICAL EXAMINATION

Complaints (if any)	<u>Sinus</u>
Personal /family history	<u>Father & Mother, DM+, HTN+</u>
Past Medical /Surgical	<u>Nil</u>
Sensitivity/Allergy (if any)	<u>Nil</u>
Habits	<u>Nil</u>
Occupational History	<u>Nil</u>

Height:- <u>163</u>	Weight:- <u>62</u>	BMI <u>23.3</u>	Pulse <u>100</u>
Temp:- <u>98.4</u>	SPO2 <u>99%</u>	Resp:- <u>18</u>	B.P <u>132/90</u>

Remarks

Treatment Recommended (if any):

I Hereby Certify that I have examined Mr/Ms..... N. Janardhana Red for pre-employment /periodical medical examination, I have found / not found any disease, illness, contagious illness

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

✓ Fit

N. G. Reddy
Signature Of Employee

Unfit

Dr.G. INDIRA PRIYADARSHINI
MBBS
Regd.No. 63148
Apollo Clinic, Seethammapet, Vizag
Signature & Seal Of Medical Examiner With
Registration No:-.....

Name:	Mr. NELAMSETTI JANARDHANA RAO	MR No:	CVIS.0000120178
Age/Gender:	33 Y/M	Visit ID:	CVISOPV116945
Address:	vskp	Visit Date:	22-11-2023 09:51
Location:	VISAKHAPATNAM, ANDHRA PRADESH	Discharge Date:	
Doctor:		Referred By:	SELF
Department:	LABORATORY		
Rate Plan:	VISHAKAPATNAM_06042023		
Sponsor:	ARCOFEMI HEALTHCARE LIMITED		

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
22-11-2023 12:04	100 Beats/min	132/90 mmHg	18 Rate/min	98.8 F	163 cms	62 Kgs	%	%	Years	23.34	cms	cms	cms		AHLL06520

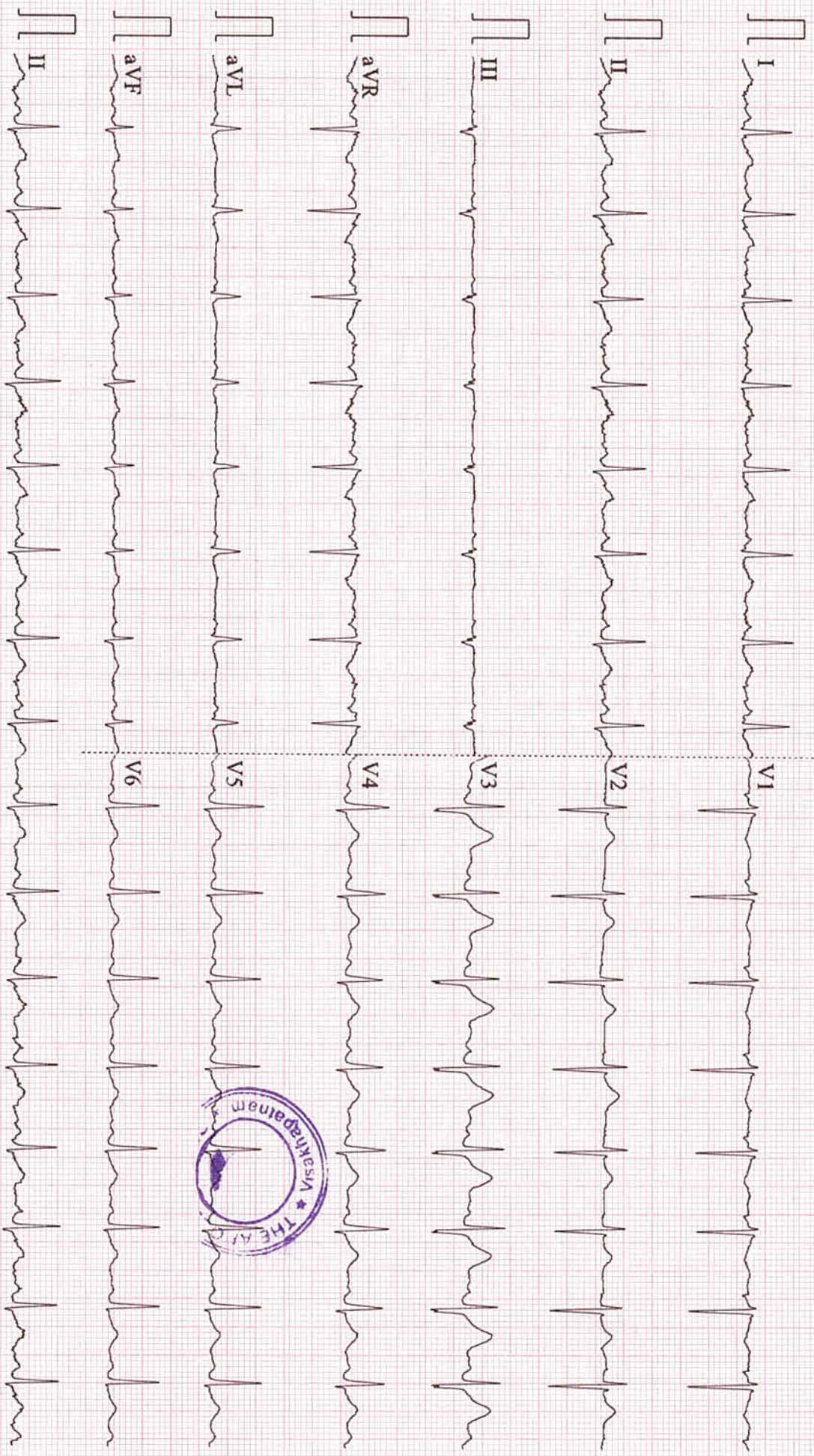


ID: 120178
n janardhana rao
Male 33Years
Req. No. :

22-11-2023 10:17:52
HR : 100 bpm
P : 90 ms
PR : 118 ms
QRS : 82 ms
QT/QTcBz : 338/436 ms
P/QRS/T : 45/21/41 °
RV5/SV1 : 0.890/0.998 mV

Diagnosis Information:
Sinus tachycardia
Normal ECG except for rate

Report Confirmed by:



Patient Name	: Mr. NELAMSETTI JANARDHANA RAO	Age	: 33 Y/M
UHID	: CVIS.0000120178	OP Visit No	: CVISOPV116945
Reported By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 22-11-2023 13:52
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 100 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

Patient Name	: Mr. NELAMSETTI JANARDHANA RAO	Age	: 33 Y M
UHID	: CVIS.0000120178	OP Visit No	: CVISOPV116945
Reported on	: 22-11-2023 14:48	Printed on	: 22-11-2023 14:48
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:22-11-2023 14:48

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name	: Mr. NELAMSETTI JANARDHANA RAO	Age	: 33 Y M
UHID	: CVIS.0000120178	OP Visit No	: CVISOPV116945
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DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

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

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

Right kidney : 10.9 x 4.9 cm

Left kidney : 11 x 5.1 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 16 cc

There is no evidence of ascites/ pleural effusion seen.



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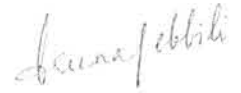
IMPRESSION:-
FATTY INFILTRATION OF LIVER.

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

This is only a screening test.

Printed on:22-11-2023 14:52

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name: M. NEELAMSETTI JANARDHANA RAO

Collected: 22/Nov/2023 09:54AM

R

PERIPHERAL BLOOD SMEAR

RBCs ARE NORMAL
TLC, DLC WITHIN NORMAL RANGE
PLATELETS ARE ABSENT
NO HEMOPARASITIC



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UHID/MR No : CVIS.0000120178	Reported : 22/Nov/2023 03:37PM
Visit ID : CVISOPV116945	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7710908987	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	16.8	g/dL	13-17	Spectrophotometer
PCV	46.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.50	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	89	fL	83-101	Calculated
MCH	30.3	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	13.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,800	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	58.3	%	40-80	Electrical Impedence
LYMPHOCYTES	31.6	%	20-40	Electrical Impedence
EOSINOPHILS	3.2	%	1-6	Electrical Impedence
MONOCYTES	6.7	%	2-10	Electrical Impedence
BASOPHILS	0.2	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4547.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2464.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	249.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	522.6	Cells/cu.mm	200-1000	Calculated
BASOPHILS	15.6	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	220000	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				



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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Visit ID : CVISOPV116945	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

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

- 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)	150	mg/dL	70-140	GOD - POD
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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.

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	123	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

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Test Name	Result	Unit	Bio. Ref. Range	Method
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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)



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	279	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	129	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	48	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	231	mg/dL	<130	Calculated
LDL CHOLESTEROL	205.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	25.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.81		0-4.97	Calculated

Comment:

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

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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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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)	73	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	124.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	8.10	g/dL	6.3-8.2	Biuret
ALBUMIN	4.20	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.08		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP.
- Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:

- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.70	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	18.60	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	8.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.30	mg/dL	3.5-8.5	Uricase
CALCIUM	9.60	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.00	mg/dL	2.5-4.5	PMA Phenol
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	3.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98 - 107	Direct ISE



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	42.00	U/L	15-73	Glycylglycine Nitoranalide



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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)	1.28	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	72.10	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	1.660	µIU/mL	0.3-4.5	CLIA

Comment:

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

1. 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.
2. 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.
3. 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.
4. 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.
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



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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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mr.NELAMSETTI JANARDHANA RAO	Collected : 22/Nov/2023 09:54AM
Age/Gender : 33 Y 6 M 0 D/M	Received : 22/Nov/2023 02:35PM
UHID/MR No : CVIS.0000120178	Reported : 22/Nov/2023 03:35PM
Visit ID : CVISOPV116945	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7710908987	

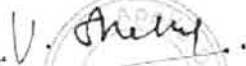
DEPARTMENT OF CLINICAL PATHOLOGY

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

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

Result/s to Follow:
GLUCOSE (FASTING) - URINE



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



Patient Name	: Mr. NELAMSETTI JANARDHANA RAO	Age	: 33 Y/M
UHID	: CVIS.0000120178	OP Visit No	: CVISOPV116945
Conducted By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 22-11-2023 16:34
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.7 CM
LA (es)	3.2 CM
LVID (ed)	3.9 CM
LVID (es)	2.2 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	1.0 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

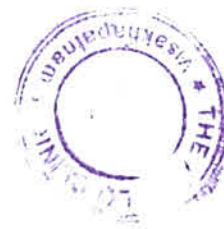
LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES:

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



IMPRESSION:

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

Dr. SHASHANKA
CHUNDURI

Exception Letter for CAP

Date: 22/11/23

Client Name: N. Janardhana Rao

Gender - male

UHID: 120178

We are Not delivered service due to not interested for stool examination and remaining tests he will come on 23/11/23

SERVICE Gyn check & stool sample, one consultation.

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

Regards,

EMP Name: *[Signature]*

Apollo clinic,

Vizag.

Client Name:

Signature: *[Signature]*

Ph no:

RE: Health Check-up Booking No.1 (Annual)

Corporate Apollo Clinic <corporate@apolloclinic.com>

Use: 11/22/2023 1:08:14

To:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Cc:Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>;Network : Mediwheel : New Delhi <network@mediwheel.in>;deepak <deepak.c@apolloclinic.com>;Vizag Apolloclinic <vizag@apolloclinic.com>

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at Vizag Apollo clinic on 22nd Nov'23 at 08:30 AM.

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

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

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 clinic 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.

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

Clinic Address: The Apollo Clinic Vizag Sheethampeta, 50-81-1/2, Plot 5, Sheethampeta, Visakhapatnam 530016

Contact No: (0891) 258 5511 - 2, 254 8818.

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.

Thanks & Regards,

Varalaxmi.G | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: corporate@apolloclinic.com | www.apolloclinic.com |

From: Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Sent: Tuesday, November 21, 2023 1:01 PM

To: Corporate Apollo Clinic <corporate@apolloclinic.com>

Cc: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>; Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>

Subject: Health Check-up Booking No.1 (Annual)

Dear Team,

Please note the following Health Check-up Booking and confirm the same.

S. No.	Company Name	PACKAGE NAME	Booking ID	EMP-NAME	AGE	GENDER	EMAIL	CONTACT NO	Appointment Date	Appointment Time	CLINIC NAME	CLINIC STATE
1	Arcofemi/Mediwheel/MALE/FEMALE	Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO	bobE50638	MR. NELAMSETTI JANARDHANA RAO	33	Male	janacee71@gmail.com	7710908987	22-11-2023	9:00 AM	Apollo Clinic, VIZAG	Andhra Pradesh

Thanks & Regards



Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030

Ph No. 011-41195959

Email : customercare@mediwheel.in; | Web: www.mediwheel.in

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If the disclaimer can't be applied, attach the message to a new disclaimer message.



बैंक ऑफ बड़ौदा
Bank of Baroda



नाम निजामशेट्टी जनार्दन राव
Name N. JAMSETTI JANARDHANA RAO

कर्मचारी कुटुम्ब
E. C. No. 105892

Dy. General Manager
जारीकर्ता
Issuing Authority

N. Janardhan R.
धारक के हस्ताक्षर
Signature of Holder

N. Janardhan R.





Name: **MV. N. JANARDHANA RAO**

Gender: **M** Age: **33**

Test Done Date: **23/11/23**

OPHTHALMOLOGY SCREENING REPORT

VISION : **(OD) 6/6 (OS) 6/6** *eg lenses*

DISTANCE : **nb nb**

NEAR VISION : **nb nb**

COLOUR VISION : **WNL -**

ANT.SEGMENT : **WNL**

Conjunctiva : **clear**

Cornea : **clear**

Pupil : **R/K/K**

FUNDUS : **WNL**

IMPRESSION :

[Signature]
Signature

Ph:0891-2585511/12

Dr. N. MUKUNDA RAO

MBBS.,MS

ENT CONSULTANT

Reg. No. AMC17481

Patient Name:

Age/Sex:

M 33

Date:

23/11/23

Dr. N. Mukunda Rao

For Attention checkup

O/E

Both Ears
Nose
Throat } NAD

History with clinically
E Tuning fork.

Nil ENT.