

|                                   |  |
|-----------------------------------|--|
| Patient Name : Mr.KATOCH ABHISHEK | Collected : 11/Nov/2023 09:10AM            |
| Age/Gender : 36 Y 2 M 15 D/M      | Received : 11/Nov/2023 12:59PM             |
| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 03:44PM             |
| Visit ID : CJPNOPV180635          | Status : Final Report                      |
| Ref Doctor : Dr.SELF              | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 259896          |  |

**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**

|                             |       |               |            |                                |
|-----------------------------|-------|---------------|------------|--------------------------------|
| <b>HAEMOGLOBIN</b>          | 14.7  | g/dL          | 13-17      | Spectrophotometer              |
| PCV                         | 43.80 | %             | 40-50      | Electronic pulse & Calculation |
| RBC COUNT                   | 5.15  | Million/cu.mm | 4.5-5.5    | Electrical Impedence           |
| MCV                         | 85    | fL            | 83-101     | Calculated                     |
| MCH                         | 28.5  | pg            | 27-32      | Calculated                     |
| MCHC                        | 33.6  | g/dL          | 31.5-34.5  | Calculated                     |
| R.D.W                       | 12.4  | %             | 11.6-14    | Calculated                     |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,900 | cells/cu.mm   | 4000-10000 | Electrical Impedence           |

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

|             |             |   |       |                      |
|-------------|-------------|---|-------|----------------------|
| NEUTROPHILS | <b>37.7</b> | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | <b>47.6</b> | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | <b>6.4</b>  | % | 1-6   | Electrical Impedence |
| MONOCYTES   | 8.2         | % | 2-10  | Electrical Impedence |
| BASOPHILS   | 0.1         | % | <1-2  | Electrical Impedence |

**ABSOLUTE LEUCOCYTE COUNT**

|             |        |             |           |            |
|-------------|--------|-------------|-----------|------------|
| NEUTROPHILS | 2224.3 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 2808.4 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 377.6  | Cells/cu.mm | 20-500    | Calculated |
| MONOCYTES   | 483.8  | Cells/cu.mm | 200-1000  | Calculated |
| BASOPHILS   | 5.9    | Cells/cu.mm | 0-100     | Calculated |

**PLATELET COUNT**

|   |        |                         |               |                          |
|---|--------|-------------------------|---------------|--------------------------|
| PLATELET COUNT                              | 256000 | cells/cu.mm             | 150000-410000 | Electrical impedence     |
| <b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b> | 8      | mm at the end of 1 hour | 0-15          | Modified Westgren method |

**PERIPHERAL SMEAR**

RBCs: are normocytic normochromic

WBCs: are normal in total number with relative increase in lymphocytes.

PLATELETS: appear adequate in number.

|                                   |  |
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HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH RELATIVE LYMPHOCYTOSIS.**

Kindly correlate clinically.



SIN No:BED230277166

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| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA |          |  |  |                             |
|--|----------|--|--|-----------------------------|
| BLOOD GROUP TYPE                                 | A        |  |  | Microplate Hemagglutination |
| Rh TYPE  | Positive |  |  | Microplate Hemagglutination |



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| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 01:43PM             |
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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 |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

|                                      |            |       |        |            |
|--------------------------------------|------------|-------|--------|------------|
| <b>GLUCOSE, FASTING , NAF PLASMA</b> | <b>106</b> | mg/dL | 70-100 | HEXOKINASE |
|--------------------------------------|------------|-------|--------|------------|

**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.

|   |           |       |        |            |
|---|-----------|-------|--------|------------|
| <b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b> | <b>84</b> | mg/dL | 70-140 | HEXOKINASE |
|---|-----------|-------|--------|------------|

**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.

|   |            |       |  |            |
|---|------------|-------|--|------------|
| <b>HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA</b>      | <b>5.8</b> | %     |  | HPLC       |
| <b>ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA</b> | 120        | mg/dL |  | Calculated |

**Comment:**

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



|                                   |  |
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| <b>REFERENCE GROUP</b> | <b>HBA1C %</b> |      |                 |        |
| 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:PLF02053497,PLP1386374,EDT230102264

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DEPARTMENT OF BIOCHEMISTRY

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

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LIPID PROFILE , SERUM

|                     |              |       |        |                            |
|---------------------|--------------|-------|--------|----------------------------|
| TOTAL CHOLESTEROL   | 172          | mg/dL | <200   | CHO-POD                    |
| TRIGLYCERIDES       | 55           | mg/dL | <150   | GPO-POD                    |
| HDL CHOLESTEROL     | 45           | mg/dL | 40-60  | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 127          | mg/dL | <130   | Calculated                 |
| LDL CHOLESTEROL     | <b>116.3</b> | mg/dL | <100   | Calculated                 |
| VLDL CHOLESTEROL    | 11           | mg/dL | <30    | Calculated                 |
| CHOL / HDL RATIO    | 3.83         |       | 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<br>Near Optimal 100-129  | 130 - 159       | 160 - 189 | ≥ 190     |
| HDL                 | ≥ 60                                   |                 |           |           |
| NON-HDL CHOLESTEROL | Optimal <130;<br>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 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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| LIVER FUNCTION TEST (LFT) , SERUM     |        |       |         |                    |
|---------------------------------------|--------|-------|---------|--------------------|
| BILIRUBIN, TOTAL                      | 0.60   | mg/dL | 0.3-1.2 | DPD                |
| BILIRUBIN CONJUGATED (DIRECT)         | 0.10   | mg/dL | <0.2    | DPD                |
| BILIRUBIN (INDIRECT)                  | 0.50   | mg/dL | 0.0-1.1 | Dual Wavelength    |
| ALANINE AMINOTRANSFERASE (ALT/SGPT)   | 73     | U/L   | <50     | IFCC               |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 41.0   | U/L   | <50     | IFCC               |
| ALKALINE PHOSPHATASE                  | 110.00 | U/L   | 30-120  | IFCC               |
| PROTEIN, TOTAL                        | 7.50   | g/dL  | 6.6-8.3 | Biuret             |
| ALBUMIN                               | 4.60   | g/dL  | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN                              | 2.90   | g/dL  | 2.0-3.5 | Calculated         |
| A/G RATIO                             | 1.59   |       | 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 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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| Emp/Auth/TPA ID : 259896          |  |

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            | 0.73  | mg/dL  | 0.72 – 1.18 | JAFFE METHOD             |
| UREA                  | 20.70 | mg/dL  | 17-43       | GLDH, Kinetic Assay      |
| BLOOD UREA NITROGEN   | 9.7   | mg/dL  | 8.0 - 23.0  | Calculated               |
| URIC ACID             | 7.00  | mg/dL  | 3.5–7.2     | Uricase PAP              |
| CALCIUM               | 10.00 | mg/dL  | 8.8-10.6    | Arsenazo III             |
| PHOSPHORUS, INORGANIC | 3.71  | mg/dL  | 2.5-4.5     | Phosphomolybdate Complex |
| SODIUM                | 139   | mmol/L | 136–146     | ISE (Indirect)           |
| POTASSIUM             | 5.2   | mmol/L | 3.5–5.1     | ISE (Indirect)           |
| CHLORIDE              | 105   | mmol/L | 101–109     | ISE (Indirect)           |



SIN No:SE04537382

NABL renewal accreditation under process

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

**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

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)

Address:  
323/100/123, Doddathangur Village, Neeladri Main Road,  
Neeladri Nagar, Electronic city, Bengaluru,  
Karnataka - 560034



|                                   |  |
|-----------------------------------|--|
| Patient Name : Mr.KATOCH ABHISHEK | Collected : 11/Nov/2023 09:10AM            |
| Age/Gender : 36 Y 2 M 15 D/M      | Received : 11/Nov/2023 12:47PM             |
| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 02:11PM             |
| Visit ID : CJPNOPV180635          | Status : Final Report                      |
| Ref Doctor : Dr.SELF              | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 259896          |  |

**DEPARTMENT OF BIOCHEMISTRY**

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

| Test Name  | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|-----------------|--------|
| <b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b> | 52.00  | U/L  | <55             | IFCC   |



SIN No:SE04537382

NABL renewal accreditation under process

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 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

**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)

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 323/100/123, Doddathangur Village, Neeladri Main Road,  
 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka - 560034



|                                   |  |
|-----------------------------------|--|
| Patient Name : Mr.KATOCH ABHISHEK | Collected : 11/Nov/2023 09:10AM            |
| Age/Gender : 36 Y 2 M 15 D/M      | Received : 11/Nov/2023 12:48PM             |
| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 02:46PM             |
| Visit ID : CJPNOPV180635          | Status : Final Report                      |
| Ref Doctor : Dr.SELF              | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 259896          |  |

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     | ng/mL  | 0.64-1.52  | CMIA |
| THYROXINE (T4, TOTAL)             | 8.52  | µg/dL  | 4.87-11.72 | CMIA |
| THYROID STIMULATING HORMONE (TSH) | 1.050 | µIU/mL | 0.35-4.94  | CMIA |

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   |

- 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. |
| 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:SPL23159091

NABL renewal accreditation under process

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APOLLO CLINICS NETWORK

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 **1860 500 7788**  
www.apolloclinic.com

|                                   |  |
|-----------------------------------|--|
| Patient Name : Mr.KATOCH ABHISHEK | Collected : 11/Nov/2023 09:09AM            |
| Age/Gender : 36 Y 2 M 15 DM       | Received : 11/Nov/2023 01:30PM             |
| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 03:10PM             |
| Visit ID : CJPNOPV180635          | Status : Final Report                      |
| Ref Doctor : Dr.SELF              | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 259896          |  |

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           | 5.5         |  | 5-7.5       | Bromothymol Blue |
| SP. GRAVITY  | 1.025       |  | 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        | 2-3    | /hpf | 0-5              | Microscopy |
| EPITHELIAL CELLS | 1-2    | /hpf | <10              | MICROSCOPY |
| RBC              | NIL    | /hpf | 0-2              | MICROSCOPY |
| CASTS            | NIL    |      | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS         | ABSENT |      | ABSENT           | MICROSCOPY |



SIN No:UR2218184

NABL renewal accreditation under process

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 Karnataka - 560034





|                                   |  |
|-----------------------------------|--|
| Patient Name : Mr.KATOCH ABHISHEK | Collected : 11/Nov/2023 09:10AM            |
| Age/Gender : 36 Y 2 M 15 D/M      | Received : 11/Nov/2023 01:30PM             |
| UHID/MR No : CJPN.0000089206      | Reported : 11/Nov/2023 01:50PM             |
| Visit ID : CJPNOPV180635          | Status : Final Report                      |
| Ref Doctor : Dr.SELF              | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 259896          |  |

**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 \*\*\*

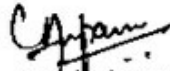
Result/s to Follow:  
PERIPHERAL SMEAR



DR.SHIVARAJA SHETTY  
M.B.B.S,M.D(Biochemistry)  
CONSULTANT BIOCHEMIST



Dr.Shobha Emmanuel  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist



Dr. Chinki Anupam  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist



SIN No:UPP015753,UF009762  
NABL renewal accreditation under process

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE

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Karnataka - 560034

 **1860 500 7788**  
www.apolloclinic.com

Name : Mr. KATOCH ABHISHEK

Age: 36 Y

Sex: M

UHID:CJPN.0000089206



OP Number:CJPNOPV180635

Bill No :CJPN-OCR-67054

Date : 11.11.2023 08:58

Address :blr

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN  
INDIA OP AGREEMENT

| 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 <i>OR TMT</i>   |            |
| 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) <i>11.30am</i>                  |            |

Dental = 22

Audiology = 21

Ophthalmology = 20

Weight = 87.5 kg

Height = 177 cm

Waist = 102 cm

Hip = 110 cm

BP = 130/90 mmHg

PP = 96 mg/dL



36years  
Male  
177cm

Asian  
87kg

Heart rate 100 bpm  
PR interval 148 ms  
QRS duration 78 ms  
QT/QTc 326/420 ms  
P-R-T axes 70 96 66

Technician: VINUTHA  
Test ind: CAD SCREENING

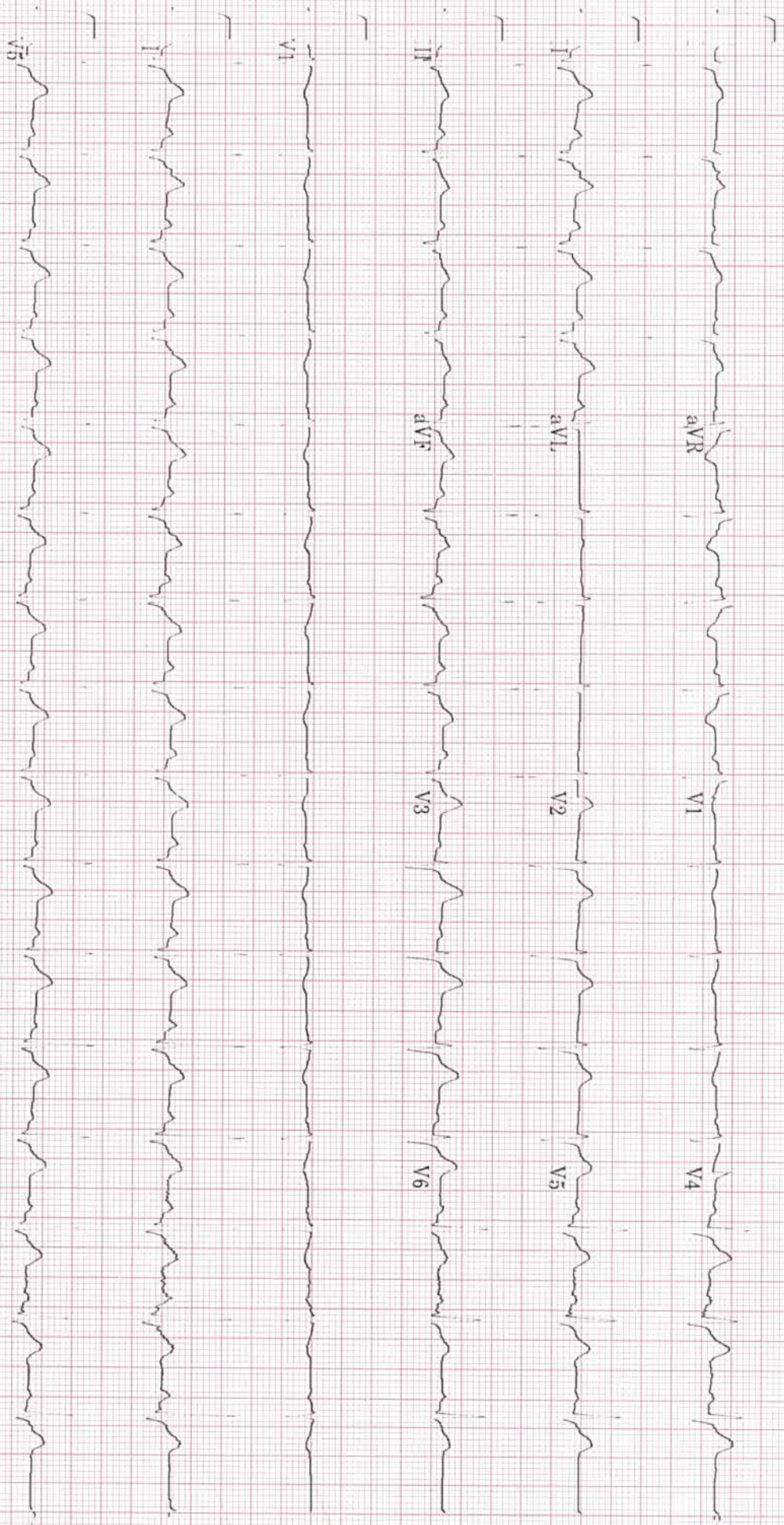
Normal sinus rhythm  
Rightward axis  
Borderline ECG

(2)

Visit: MEDIWHEEL

Referred by: SELF

Unconfirmed



20 Hz 25.0 mm/s 10.0 mm/mV

4 by 2.5s - 3 rhythm lds

MAC55 010A

12SL™ V241

ARROW



Referred by: SELF  
 Test ind: CAD SCREENING

| Phase Name | Stage Name | Time in Stage | Speed (mph) | Grade (%) | Workload (METs) | HR (bpm) | BP (mmHg) | RPP (x100) |
|------------|------------|---------------|-------------|-----------|-----------------|----------|-----------|------------|
| PRETEST    | SUPINE     | 0:53          | 0.8         | 0.0       | 1.2             | 108      | 130/90    | 140        |
| EXERCISE   | STAGE 1    | 3:00          | 1.7         | 10.0      | 4.6             | 131      | 140/90    | 183        |
|            | STAGE 2    | 3:00          | 2.5         | 12.0      | 7.0             | 159      | 150/90    | 239        |
|            | STAGE 3    | 3:00          | 3.4         | 14.0      | 10.1            | 175      | 160/90    | 280        |
|            | STAGE 4    | 0:10          | 4.2         | 15.0      | 10.5            | 175      | 160/90    | 280        |
| RECOVERY   | Post       | 2:00          | ***         | ***       | 1.0             | 110      | 130/90    | 147        |

NO REXAL

11/11/23

Technician: VINUTHA

Unconfirmed

MAC55 010A



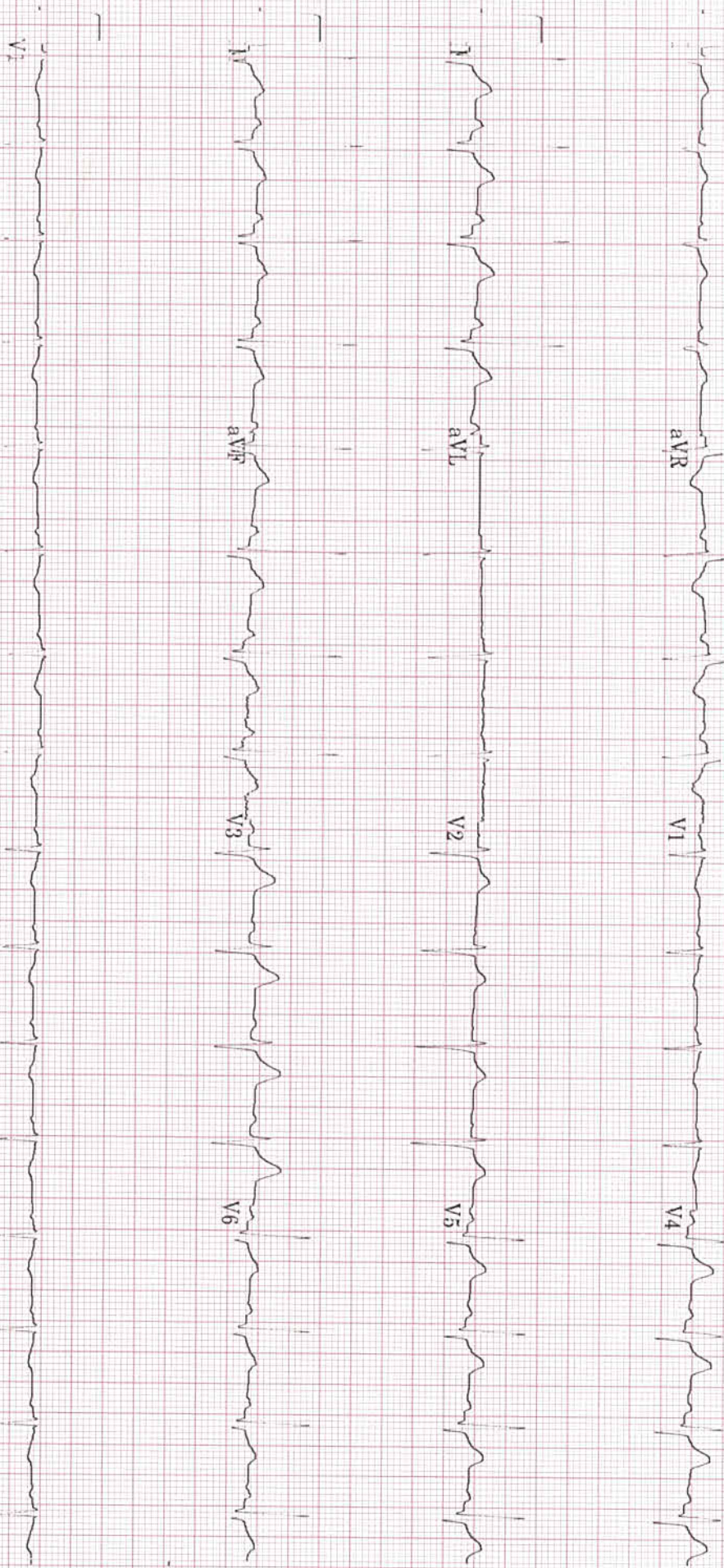
ID: G:JPN89206  
Visit: MEDIWHEEL

11-Nov-2023  
10:17:23

98bpm  
BP: 130/90

PRETEST  
SUPINE  
0:34

BRUCE  
\*\*\*mph  
\*\*.\*%



40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S 50Hz HR 46

4 by 2.5s + 1 rhythm 1d

MAC55 010A

ARRW r2



ID: GJPN89205  
Visit: MED/HEEL

11-Nov-2023  
10:20:33

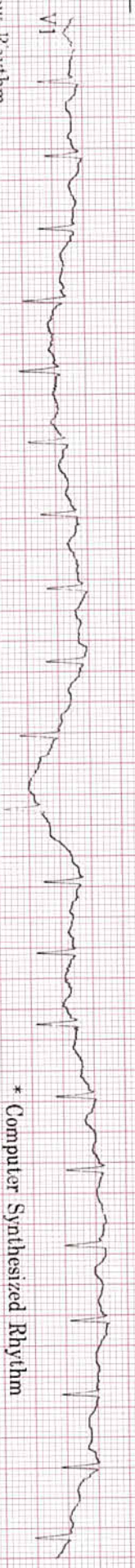
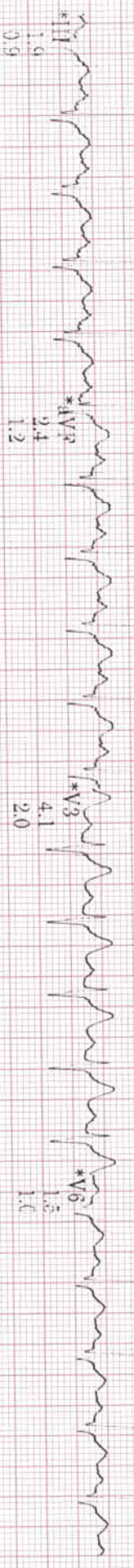
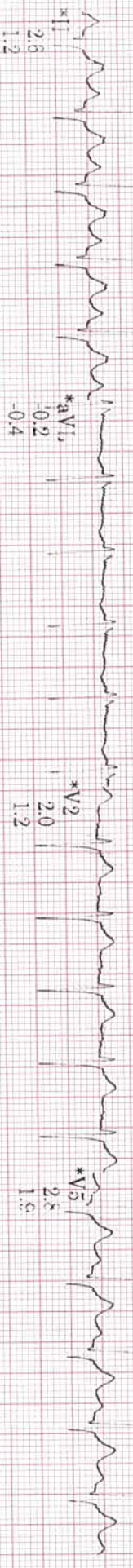
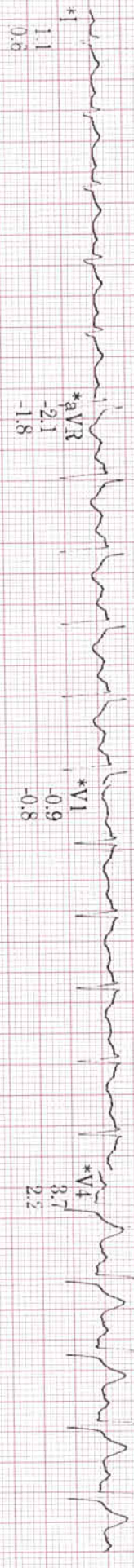
127bpm  
BP: 140/90

EXERCISE  
STAGE 1  
2:50

BRUCE  
1.7mph  
10.0%

ST @ 10mm/mV  
80ms postJ

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm  
40 Hz 25.0 mm/s 10.0 mm/mV  
A-H-S 50Hz HR 46  
\* Computer Synthesized Rhythm  
MAC55 010A



D: GIPN89206  
Vist: MEDIWHEEL

11-Nov-2023  
10:23:32

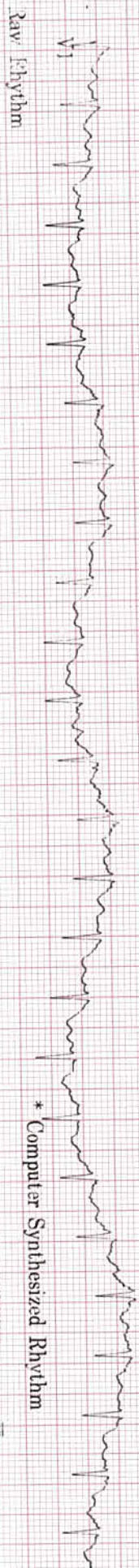
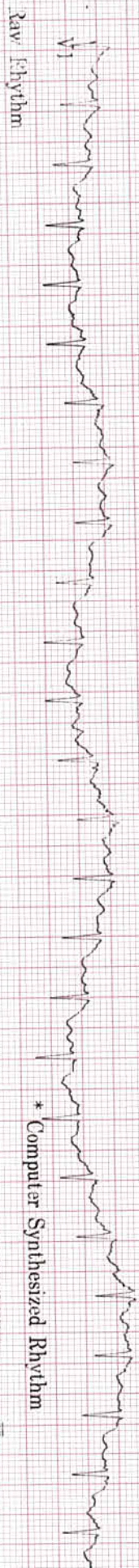
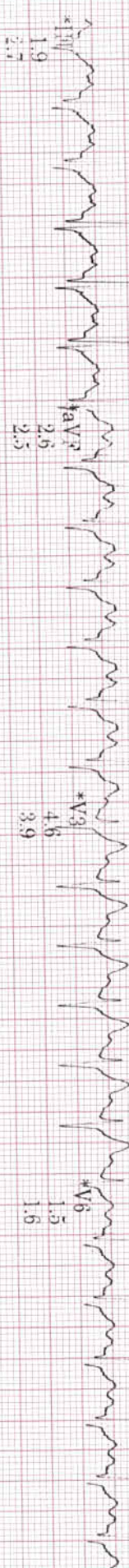
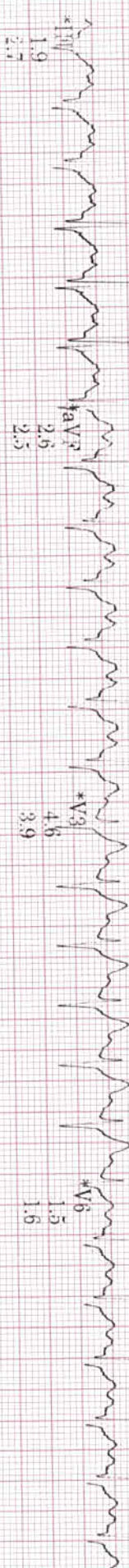
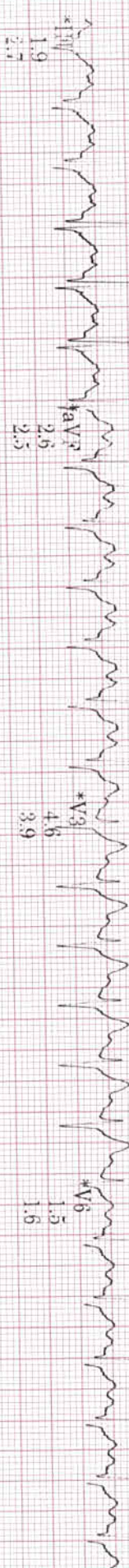
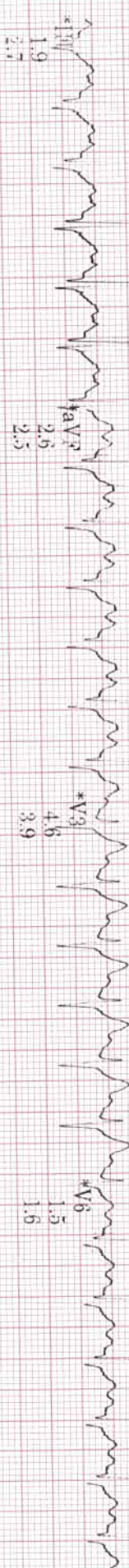
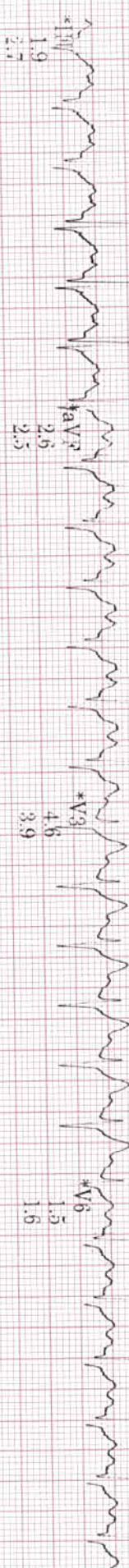
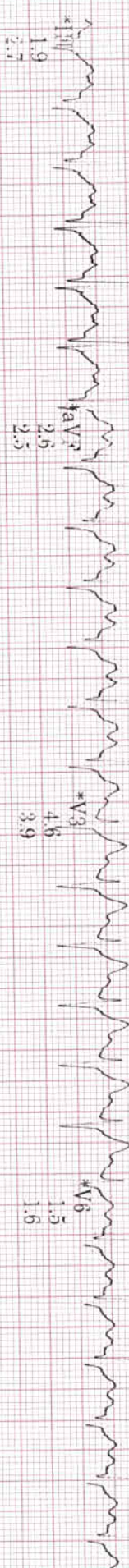
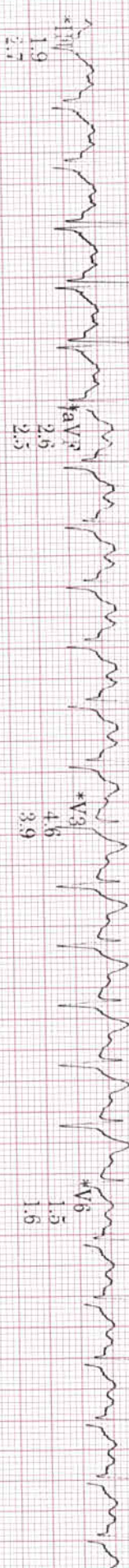
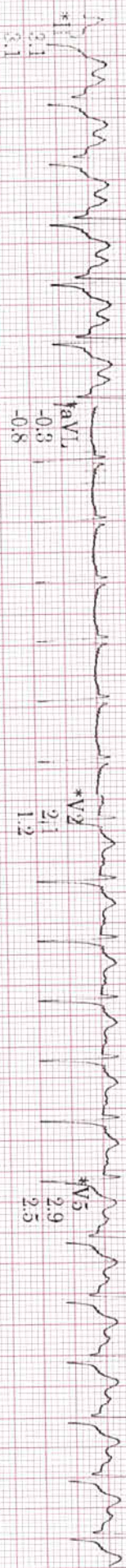
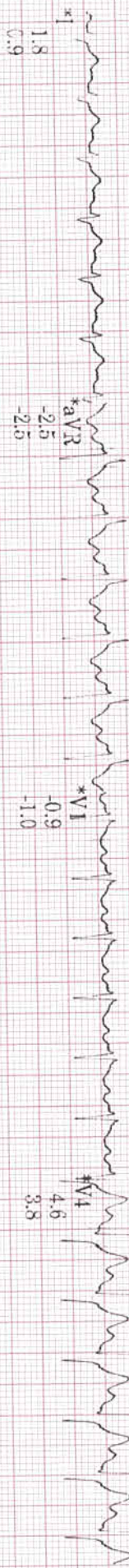
155bpm  
Bp: 150/90

EXERCISE  
STAGE 2  
5:50

BRUCE  
2.5mph  
12.0%

ST @ 10mm/mV  
80ms postJ

Lead  
ST(mm)  
Slope(mV/s)



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

MAC55 010A

II



ID: GJPN89206  
Visit: MED/WHEEL

11-Nov-2025  
10:26:32

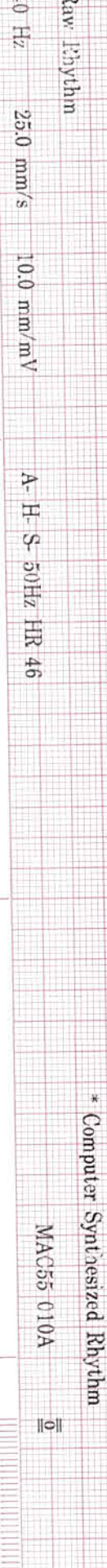
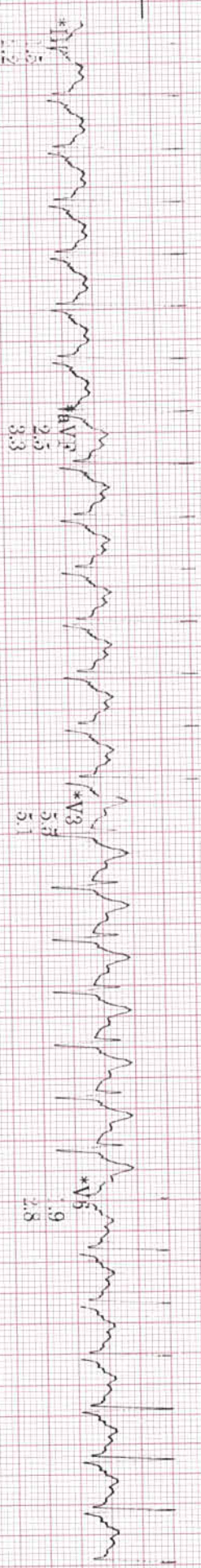
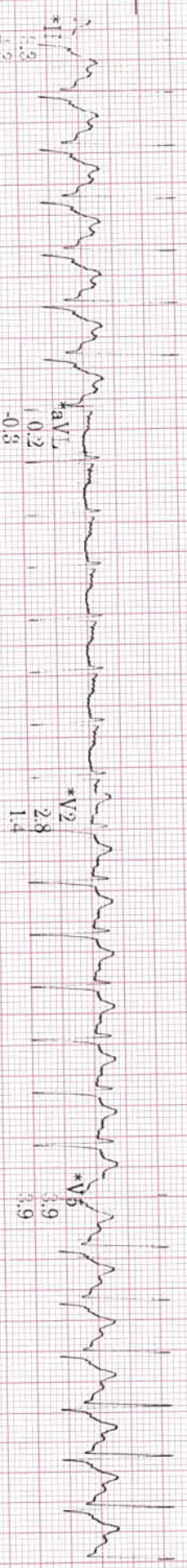
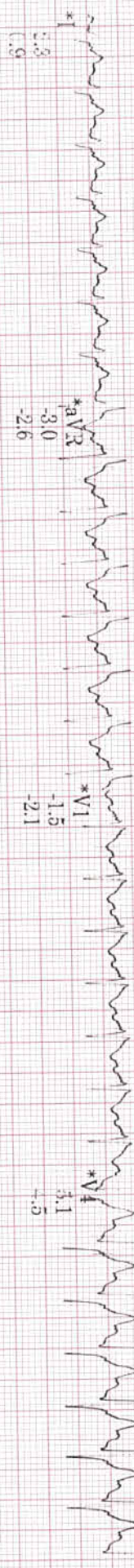
176bpm  
BP: 160/90

EXERCISE  
STAGE 3  
8:50

BRUCE  
3.4mph  
14.0%

ST @ 10mm/mV  
30ms postJ

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm  
40 Hz 25.0 mm/s 10.0 mm/mV  
A-H-S-50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010A

II



D: GJPN89206  
Visit: MED:WHEEL

11-Nov-2023  
10:26:53

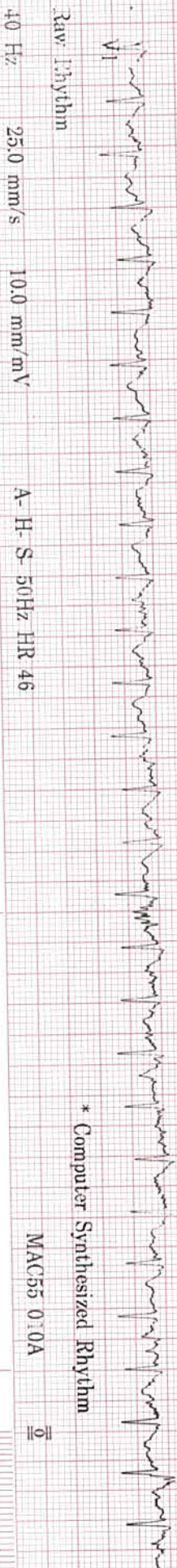
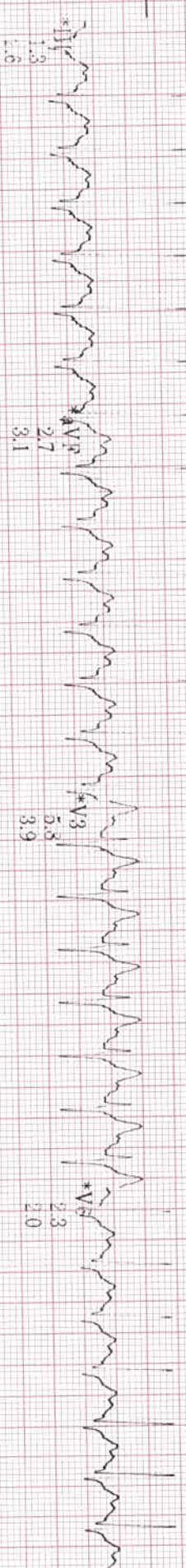
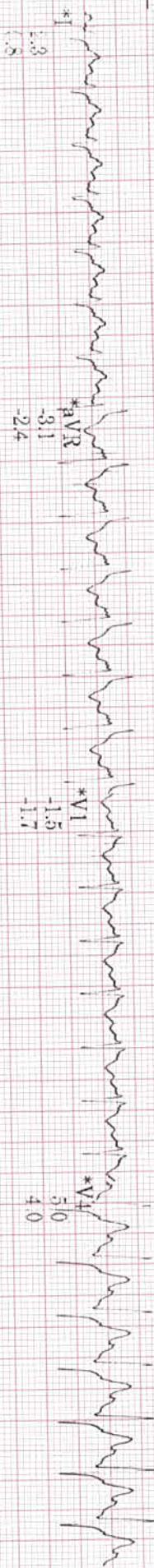
175bpm  
BP: 160/90

EXERCISE  
STAGE 4  
9:10

BRUCE  
4.2mph  
16.0%

ST @ 10mm/mV  
80ms postJ

Lead  
ST(mV)  
Slope(mV/s)





D: GJPN89206  
Vist: MEDIWHEEL

11-Nov-2023  
10:27:53

133bpm  
BP: 160/90

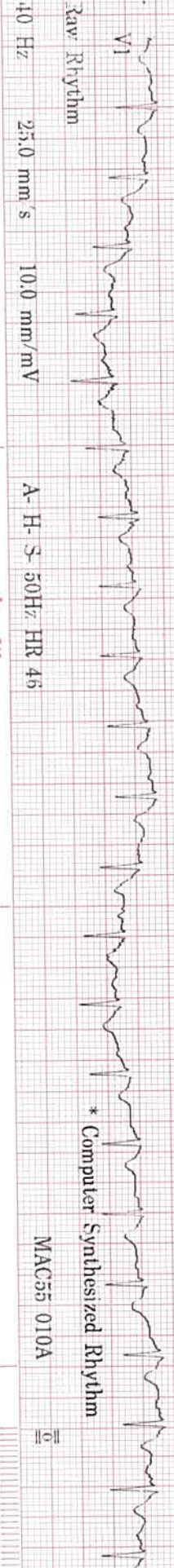
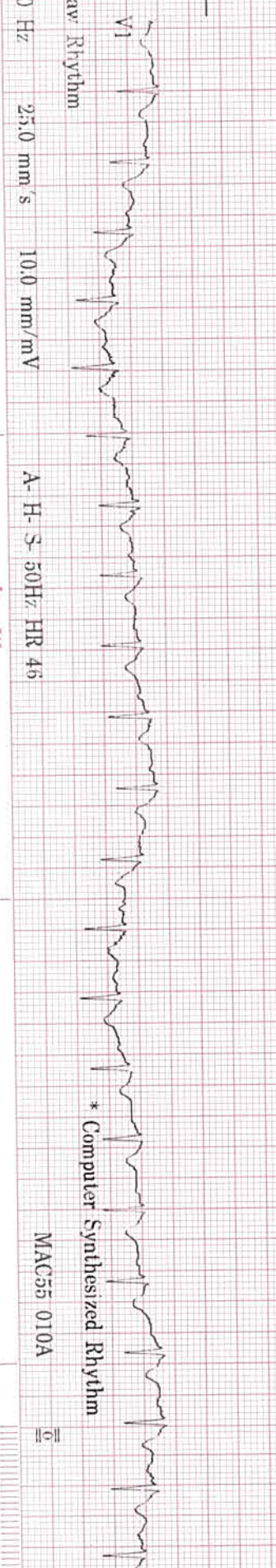
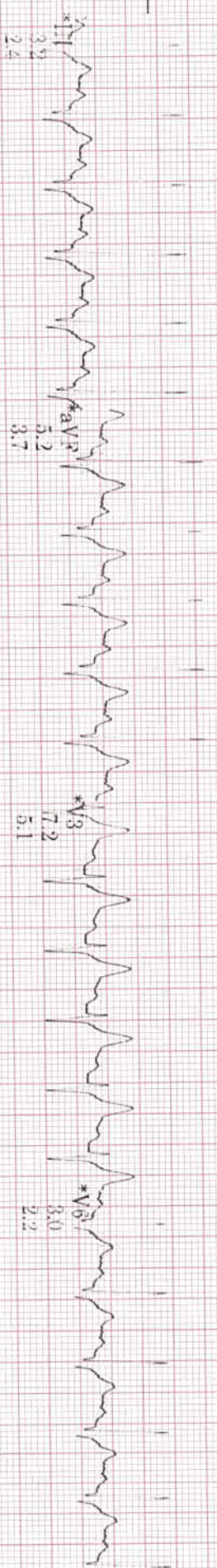
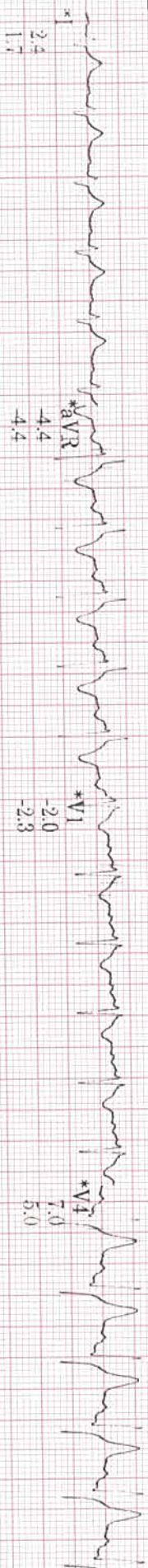
ST @ 10mm/mV  
80ms postJ

RECOVERY

Post  
1:00

BRUC  
\*\*\*mph  
\*\*\*%

Lead  
ST(mm)  
Slope(mV/s)





M. KATOCH, ABHIJEEK

SELECTED MEDIAN REPORT

Dr. JPN89206  
Vishal MEDWHEEL

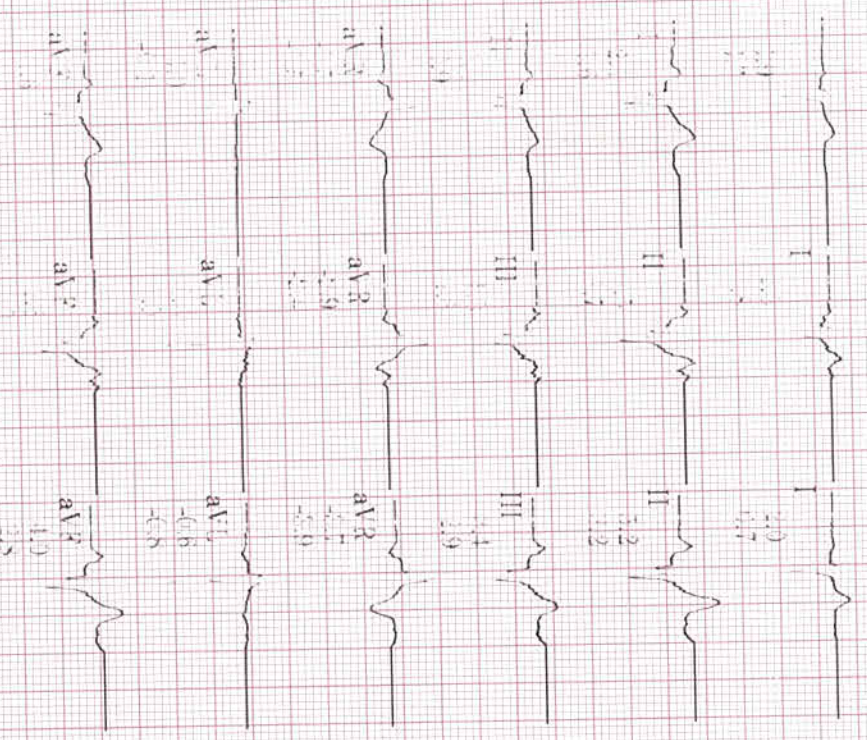
11 Nov 2023  
01:35:10

33 years  
177 cm  
Asian  
87 kg

Male

Referred by: SELF  
Test: Ind. CAD SCREENING

| BASELINE<br>EXERCISE     | PEAK<br>EXERCISE         | TEST END<br>RECOVERY     |
|--------------------------|--------------------------|--------------------------|
| HR: 103bpm<br>BP: 150/90 | HR: 175bpm<br>BP: 160/90 | HR: 113bpm<br>BP: 150/90 |

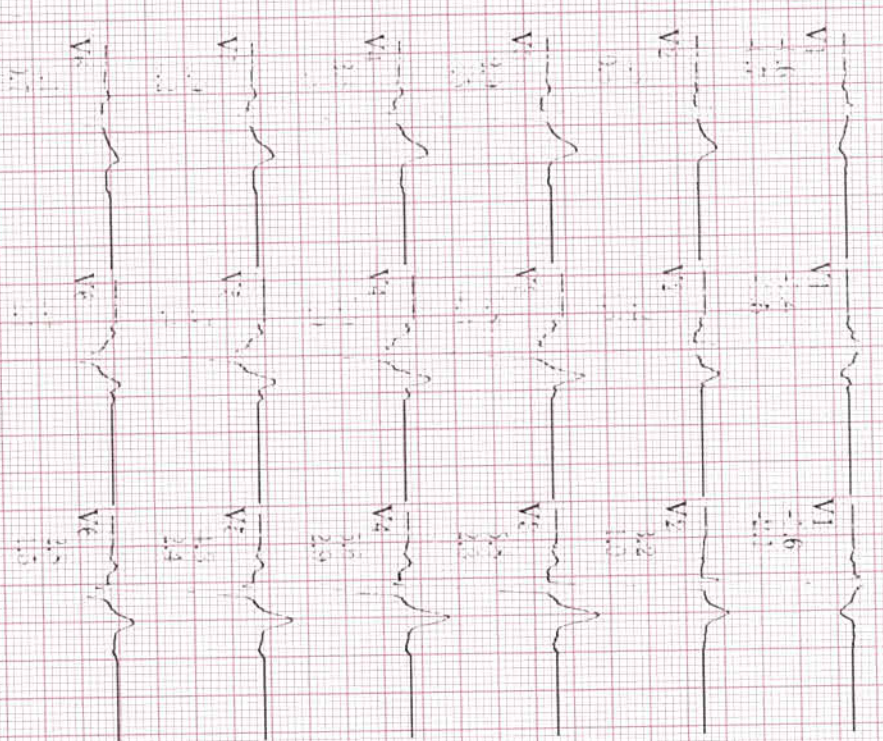


Technician: VINUTHA

RRUG-1  
Max HR: 177bpm 96% of max predicted 184bpm  
Max EP: 160/90  
Maximum workload: 10.3 METS  
Total Exercise time: 9:11

Reason for Termination:  
Comments: GOOD EFFORT AND TOLERANCE  
NORMAL HR/BP RESPONSE  
NO ANGINA AND ARRHYTHMIA NOTED  
NO SIGNIFICANT ST-T CHANGES SEEN  
\*  
TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

| BASELINE<br>EXERCISE     | PEAK<br>EXERCISE         | TEST END<br>RECOVERY     |
|--------------------------|--------------------------|--------------------------|
| HR: 108bpm<br>BP: 150/90 | HR: 175bpm<br>BP: 160/90 | HR: 113bpm<br>BP: 150/90 |



Lead confirmed

MAC55 010A

25.0 mm/s  
10.0 mm/mV  
100hz

Lead  
ST(mm)  
Slope(mV/s)



BRUCE

Total Exercise time: 9:10

25.0 mm/s

ID: GJPN89206  
Visit: MEDIWHEEL

Max HR: 177bpm 96% of max predicted 184bpm  
Max BP: 160/90

10.0 mm/mV  
100hz

11-Nov-2023 177cm  
10:16:30 36years 87kg  
Asian Male

Maximum workload: 10.3METS

Referred by: SELF  
Test ind: CAD SCREENING

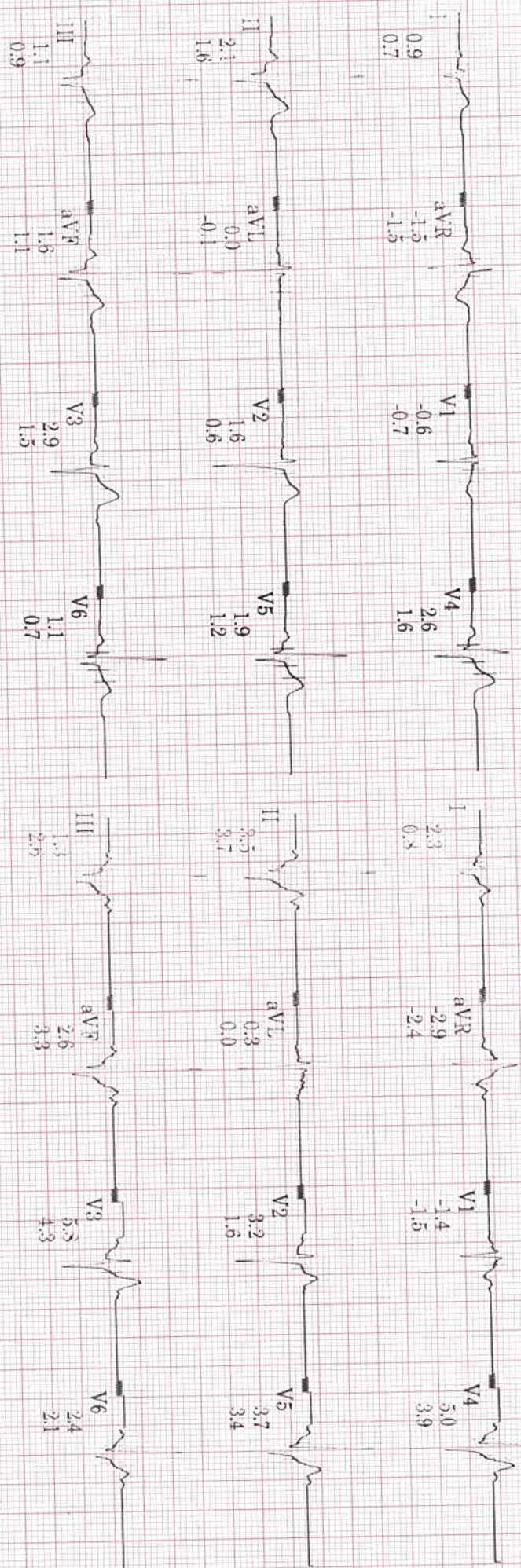
Reason for Termination:  
Comments: GOOD EFFORT AND TOLERANCE  
NORMAL HR BP RESPONSE  
NO ANGINA AND ARRHYTHMIA NOTED  
NO SIGNIFICANT ST-T CHANGES SEEN  
\* TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

BASELINE  
EXERCISE STAGE 1 12METS  
0:00 108bpm BP: 130/90  
ST @ 10mm/mV 80ms postJ

Lead ST(mm) Slope(mV/s)

EXERCISE STAGE 4 10.3METS  
9:10 173bpm BP: 160/90  
ST @ 10mm/mV 80ms postJ

PEAK  
Lead ST(mm) Slope(mV/s)



Technician: VINUTHA

Unconfirmed

MAC55 010A



Kavoch Abishek .

11/11/2023

36/M

- ENT Check -

- Dry cough ? Dust exposure

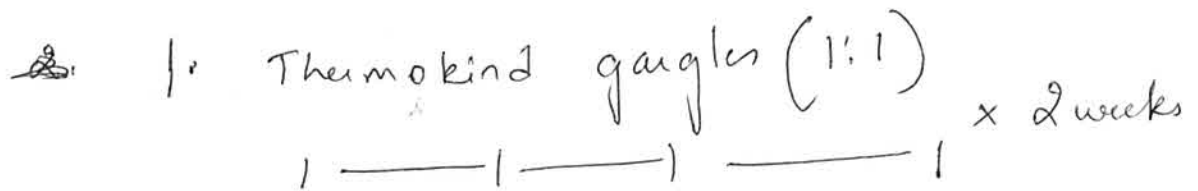
D/er

Grabs DNS to (R) = Spur

B/L ITH .

Th/Ears NAD .

X:-



Septoplasty + B/L Turbinoplasty ↓ GA

Dr Swasth.



# DENTAL SCRIPT



Date: 11/11/23

Patient ID: CSPN-0000089206 MHC

Patient Name: Katoch Abhishek Age: 36 Sex: Male  Female

Main Complaint: Regular dental check up.

Medical History: —

Drug Allergy: —

Medication currently taken by the Guest: —

Initial Screenign Findings:

Dental Caries: 8 / (Pit)

Missing Teeth:

Impacted Teeth:

Attrition / Abrasion:

Bleeding:

Pockets / Recession:

Calculus / Stains:

Mobility:

Restored Teeth:

Non - restorable Teeth for extraction /  
Root Stumps:

Malocclusion:

Others:

Advice:- Restoration done wrt  $\frac{1}{7|7}$

Doctor Dr. Sijo



|                            |                       |                    |                    |
|----------------------------|-----------------------|--------------------|--------------------|
| <b>Patient Name</b>        | : Mr. KATOCH ABHISHEK | <b>Age/Gender</b>  | : 36 Y/M           |
| <b>UHID/MR No.</b>         | : CJPN.0000089206     | <b>OP Visit No</b> | : CJPNOPV180635    |
| <b>Sample Collected on</b> | :                     | <b>Reported on</b> | : 11-11-2023 10:41 |
| <b>LRN#</b>                | : RAD2148256          | <b>Specimen</b>    | :                  |
| <b>Ref Doctor</b>          | : SELF                |                    |                    |
| <b>Emp/Auth/TPA ID</b>     | : 259896              |                    |                    |

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**LIVER** : Normal in size and increased in echotexture. No focal lesion seen.

No intra hepatic biliary / venous radicular dilation.

CBD and Main Portal vein appear normal.PV-10 mm.

**GALL BLADDER** : Well distended. Normal in internal contents. Wall Thickness is normal.

**SPLEEN** : Normal in size and echotexture. No focal lesion was seen.

**PANCREAS** : Appeared normal to the visualized extent.

**KIDNEYS** : Both kidneys are normal in size, shape and outlines Cortico medullary delineation is maintained. No Hydronephrosis / No calculi.

Right kidney measures: 11.5 x 2.2cm.

Left kidney measures : 12.8 x 2.4 cm.

**URINARY BLADDER** : Well distended. Normal in internal contents. Wall thickness is normal.

**PROSTATE**: Normal in size and echotexture.

Prostate measures :3.6 x 2.8 x 3.0 cms. Volume- 16cc.

No free fluid is seen in the peritoneum. No lymphadenopathy.

**IMPRESSION : GRADE I FATTY LIVER OTHERWISE NORMAL STUDY .**

Please Note :No preparation done before scanning.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.





**Patient Name** : Mr. KATOCH ABHISHEK

**Age/Gender** : 36 Y/M

---

**Dr. KUSUMA JAYARAM**  
MBBS,DMRD  
Radiology



**Patient Name** : Mr. KATOCH ABHISHEK

**Age/Gender** : 36 Y/M

**UHID/MR No.** : CJPN.0000089206

**OP Visit No** : CJPNOPV180635

**Sample Collected on** :

**Reported on** : 11-11-2023 10:24

**LRN#** : RAD2148256

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 259896

---

**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. KUSUMA JAYARAM**

**MBBS,DMRD**

Radiology



अभियेक कटोच  
Abhishek Katoch  
जन्म तिथि/ DOB: 27/08/1987  
पुरुष / MALE

7764 2928 9129

आधार-आम आदमी का अधिकार





प्रति,

समन्वयक,  
Mediwheel (Arcofemi Healthcare Limited)  
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

|                                    | कर्मचारी विवरण      |
|------------------------------------|---------------------|
| नाम                                | MR. KATOCH ABHISHEK |
| क.कू.संख्या                        | 104994              |
| पदनाम                              | JOINT MANAGER       |
| कार्य का स्थान                     | ATTIBELE            |
| जन्म की तारीख                      | 27-08-1987          |
| स्वास्थ्य जांच की प्रस्तावित तारीख | 08-10-2023          |
| बुकिंग संदर्भ सं.                  | 23D104994100071434E |

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **07-10-2023** से **31-03-2024** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



Health Check up Booking Confirmed Request(bobE49589),Package Code-  
PKG10000309, Beneficiary Code-59285

Mediwheel <wellness@mediwheel.in>

Mon 11/6/2023 3:08 PM

To:Abhishek Katoch <ABHISHEK.KATOCH@bankofbaroda.com>  
Cc:customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक  
THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLIC

011-41195959

Email:wellness@mediwheel.in

Dear MR. KATOCH ABHISHEK,

Please find the confirmation for following request.

**Booking Date** : 31-10-2023  
**Package Name** : Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO (Metro)  
**Name of Diagnostic/Hospital** : Apollo Clinic - JP Nagar  
**Address of Diagnostic/Hospital** : House List No. 22, BNR Complex, Sree Rama Layout, Opp: RBI Layout, JP Nagar 7th Phase, Kothanur Village, Uttarahalli Hobli, JP nagar - 560078  
**Contact Details** : (080) 41289521 / 6309937245  
**City** : Bangalore  
**State** : Karnataka  
**Pincode** : 560078  
**Appointment Date** : 11-11-2023  
**Confirmation Status** : Confirmed  
**Preferred Time** : 8:00am-8:30am  
**Comment** : APPOINTMENT TIME 9:00AM

**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

Health Check up Booking Confirmed Request(bobE49589),Package Code-  
PKG10000309, Beneficiary Code-59285

Mediwheel <wellness@mediwheel.in>

Mon 11/6/2023 3:08 PM

To:Abhishek Katoch <ABHISHEK.KATOCH@bankofbaroda.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>

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