





: Mr.PANKAJ

Age/Gender

: 35 Y 8 M 12 D/M

UHID/MR No

: CBEL.0000094262

Visit ID

: CINROPV202999

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9663275102 Collected

: 26/Aug/2023 10:13AM

Received

: 26/Aug/2023 01:36PM

Reported

: 26/Aug/2023 06:46PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - F	TULL BODY ANNUAL	L PLUS MALE -	2D ECHO - PAN INDIA	- FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.2	g/dL	13-17	Spectrophotometer
PCV	44.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.84	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	90.9	fL	83-101	Calculated
MCH	31.3	pg	27-32	Calculated
MCHC	34.5	g/dL	31.5-34.5	Calculated
R.D.W	15.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,820	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (E	DLC)			
NEUTROPHILS	52.1	%	40-80	Electrical Impedance
LYMPHOCYTES	35.4	%	20-40	Electrical Impedance
EOSINOPHILS	2.9	%	1-6	Electrical Impedance
MONOCYTES	9.3	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3032.22	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2060.28	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	168.78	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	541.26	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	17.46	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	204000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	19	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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: 26/Aug/2023 01:36PM : 26/Aug/2023 06:46PM

Reported Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	ARCOFEMI - MEDIWHEEL	FULL BODY ANNUAI	L PLUS MALE - 2D ECH	O - PAN INDIA - FY2324
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Test Name Result

Unit

Bio. Ref. Range

Method

Page 2 of 14



SIN No:BED230204237







: Mr.PANKAJ

Age/Gender

: 35 Y 8 M 12 D/M

UHID/MR No

: CBEL.0000094262

Visit ID

: CINROPV202999

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: 9663275102

Collected

: 26/Aug/2023 10:13AM

Received

: 26/Aug/2023 01:36PM

Reported

: 26/Aug/2023 08:18PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - F	TULL BODY ANNUAL	PLUS MALE -	2D ECHO - PAN INDIA	- FY2324	
Test Name	Result	Unit	Bio. Ref. Range	Method	

BLOOD GROUP ABO AND RH FACTOR, I	WHOLE BLOOD EDTA	
BLOOD GROUP TYPE	AB	Microplate Hemagglutination
Rh TYPE	Positive	Microplate Hemagglutination

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Patient Name : Mr.PANKAJ

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UHID/MR No : CBEL.0000094262 Visit ID : CINROPV202999

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9663275102 Collected : 26/Aug/2023 10:13AM Received : 26/Aug/2023 01:47PM

Received : 26/Aug/2023 01:47PM Reported : 26/Aug/2023 07:32PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	105	mg/dL	70-100	HEXOKINASE	
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

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

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

Ref: Marks medical biochemistry and clinical approach

HBA1C, GLYCATED HEMOGLOBIN ,	5.4	%	HPLC
WHOLE BLOOD EDTA			
ESTIMATED AVERAGE GLUCOSE (eAG),	108	mg/dL	Calculated

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324					
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 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 4. mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect decrease erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C alternative methods (Fructosamine) estimation is recommended Glycemic Control for

A: HbF > 25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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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







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Reported : 26/Aug/2023 06:49PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

DEFACTMENT OF BIOOFICEMOTICS							
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324							
Test Name	Test Name Result Unit Bio. Ref. Range Method						

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	197	mg/dL	<200	CHO-POD
TRIGLYCERIDES	196	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	42	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	155	mg/dL	<130	Calculated
LDL CHOLESTEROL	115.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	39.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.69		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 Page 6 of 14









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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name Result Unit Bio. Ref. Range Method

Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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: ARCOFEMI HEALTHCARE LIMITED

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	0.74	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.61	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	43	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	137.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.33	g/dL	6.6-8.3	Biuret
ALBUMIN	4.48	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.85	g/dL	2.0-3.5	Calculated
A/G RATIO	1.57		0.9-2.0	Calculated

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: Mr.PANKAJ

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Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9663275102 Collected

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324					
	T				
Test Name	Result	Unit	Bio. Ref. Range	Method	

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	0.93	mg/dL	0.72 – 1.18	JAFFE METHOD	
UREA	19.80	mg/dL	17-43	GLDH, Kinetic Assay	
BLOOD UREA NITROGEN	9.2	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	7.16	mg/dL	3.5–7.2	Uricase PAP	
CALCIUM	8.90	mg/dL	8.8-10.6	Arsenazo III	
PHOSPHORUS, INORGANIC	2.82	mg/dL	2.5-4.5	Phosphomolybdate Complex	
SODIUM	138	mmol/L	136–146	ISE (Indirect)	
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)	
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)	

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SIN No:SE04463559









: Mr.PANKAJ

Age/Gender

: 35 Y 8 M 12 D/M

UHID/MR No

: CBEL.0000094262

Visit ID

: CINROPV202999

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

TPA ID : 9663275102

Collected

: 26/Aug/2023 10:13AM

Received

: 26/Aug/2023 01:10PM

Reported Status : 26/Aug/2023 06:49PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPA	RTMENT	OF BIOCH	FMISTRY
	VLZ I IAITIA I		

ARCOFEMI - MEDIWHEEL - FUL	L BODY ANNUAL PLUS MALE	E - 2D ECHO - PAN IN	DIA - FY2324
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Test Name	Result	Unit	Bio. Ref. Range	Method
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GAMMA GLUTAMYL TRANSPEPTIDASE	33.00	U/L	<55	IFCC	
(GGT) , SERUM			4		

Page 10 of 14



SIN No:SE04463559







Patient Name : Mr.PANKAJ

Age/Gender : 35 Y 8 M 12 D/M

UHID/MR No : CBEL.0000094262

Visit ID : CINROPV202999

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9663275102 Collected : 26/Aug/2023 10:13AM

Received : 26/Aug/2023 01:08PM Reported : 26/Aug/2023 02:04PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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)	0.77	ng/mL	0.7-2.04	CLIA		
THYROXINE (T4, TOTAL)	9.39	μg/dL	6.09-12.23	CLIA		
THYROID STIMULATING HORMONE (TSH)	2.935	μIU/mL	0.34-5.60	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	Т3	T4	FT4	Conditions
High	Low	Low	l ow	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis

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: Mr.PANKAJ

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: 26/Aug/2023 02:04PM

Status

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - F	ULL BODY ANNUAL	L PLUS MALE -	2D ECHO - PAN INDIA	- FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

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

Page 12 of 14













Patient Name : Mr.PANKAJ

Age/Gender : 35 Y 8 M 12 D/M UHID/MR No : CBEL.0000094262

Visit ID : CINROPV202999

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9663275102 Collected : 26/Aug/2023 10:12AM Received : 26/Aug/2023 02:20PM

Reported : 26/Aug/2023 03:09PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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 (CI	JE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE	F.:	NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	UNT 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

Comment:

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

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SIN No:UR2173251









: Mr.PANKAJ

Age/Gender

: 35 Y 8 M 12 D/M

UHID/MR No

: CBEL.0000094262

Visit ID

: CINROPV202999

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9663275102 Collected

: 26/Aug/2023 10:12AM

Received

: 26/Aug/2023 02:20PM

Reported

: 26/Aug/2023 07:15PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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- AKCOPENI - NIEDIWAEEL - PULL BODT ANNUAL PLUS MALE - ZD ECAO - PAN INDIA - ETZSZ	AL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	ARCOFEMI - MEDIWHEEL - FULL BODY A
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Test Name	Result	Unit	Bio. Ref. Range	Method
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IURINE GLUCOSE(POST PRANDIAL) NEGATIVE NEGATIVE Dipsti
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URINE GLUCOSE(FASTING)	NEGATIVE	NEGATIVE	Dipstick	

*** End Of Report ***

Result/s to Follow: PERIPHERAL SMEAR

Drawania Bxf Dr PRASANNA B.K.P Md.Path.Pathologist

Dr. Anita Shobha Flynn M.B.B.S MD (Pathology) Consultant Pathologist

DR. SHIVARAJA SHETT M.B.B.S, M.D(Biochemistry M.B.B.S) MD(Pathology)

Dr.Anita Shobha Flynn CONSULTANT BIOCHEMIST Consultant Pathologist

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

Dr PRASANNA B.K.P Md.Path.Pathologist

Page 14 of 14



Name: Mr. Pankaj

Age: 35 Y

UHID:CBEL.0000094262

Address: Bangalore

Sex: M

Plan

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT

OP Number: CINROPV202999 Bill No: CINR-OCR-88060

Date : 26.08.2023 09:46

no Serive	Type/ServiceName	Department
1 ARCO	FEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - P.	AN INDIA - FY2324
1 URINI	E GLUCOSE(FASTING)	
2 GAMN	AA GLUTAMYL TRANFERASE (GGT)	
3 HbA1c	, GLYCATED HEMOGLOBIN	
4 2 D E	CHO / TMTU	
5 LIVEF	FUNCTION TEST (LFT)	
6X-RA	Y CHEST PA – W	
7 GLUC	OSE, FASTING	
8 HEMC	GRAM + PERIPHERAL SMEAR	
9 ENT C	CONSULTATION - 7	
10 FITNE	SS BY GENERAL PHYSICIAN	
11 DIET	CONSULTATION	
12 СОМЕ	LETE URINE EXAMINATION	
-13 URINI	E GLUCOSE(POST PRANDIAL)	
14 PERIP	HERAL SMEAR	
15 ECG	- 04	
16 BŁ00	D GROUP ABO AND RH FACTOR	
17 LIPID	PROFILE	
18 BODY	PMASS INDEX (BMI) — 6	
19 OPTH	AL BY GENERAL PHYSICIAN	
20 RENA	L PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
21 ULTR	ASOUND - WHOLE ABDOMEN	
-22 THYR	OID PROFILE (TOTAL T3, TOTAL T4, TSH)	
23 DENT	AL CONSULTATION — /	
24 GLUC	OSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) / 2:30	

25. Optral -5
24. Devotal-1
24. physiotherapy-/4
Andionneliy-5-B/L Normal.

9663275102,





: 26-08-2023

Department

: GENERAL

MR NO

: CBEL.0000094262

Doctor

Name

: Mr. Pankaj

Registration No

Age/ Gender

35 Y / Male Qualification

Consultation Timing:

Height:	Weight:	BMI:	Waist Circum :
Temp:	Pulse :	Resp :	B.P :

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Apollo Clinic, Indiranagar

#2012, 1st Floor, 100 Feet Road, HAL 2nd Stage, Indiranagar - 560038

Phone: (080) 2521 4614/15

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BOOK YOUR APPOINTMENT TODAY! Whatsapp Number: 970 100 3333

Toll Number

: 1860 500 7788

Website : www.apolloclinic.com

OPTHAL PRESCRIPTION

PATIENT NAME: Mr. pankay

DATE: 216 (8/23

UHID NO: 94262

AGE: 35

OPTOMETRIST NAME: Mr Gowtham M H

GENDER: \(\sigma^\cap \)

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

	RIGHT EYE			LEFT EYE				
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	0.25	0.50	170	Collo	0.00	0,250	150	Cels
Add	4000			NG	And the second s			116

PD – RE:____ LE:__

Colour Vision:

Mormal 0

Remarks:

Apollo clinic Indiranagar

Health Check up Booking Confirmed Request(bobS44450), Package Code-PKG10000309, **Beneficiary Code-60323**

Wellness: Mediwheel: New Delhi < wellness@mediwheel.in>

Fri 18-08-2023 15:35

To:Wellness: Mediwheel: New Delhi <wellness@mediwheel.in>

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



🔌 011-41195959 Email:wellness@mediwheel.in

Dear Team Mediwheel,

We have received the confirmation for Health Check up from .

Beneficiary

Name

: PANKAJ

Beneficiary Code: 60323 Member Relation: Spouse

Provider Name : Apollo Clinic - Indiranagar

Provider Code : DIA1000420DIA1015

Plot 2012,1st floor, Above vision express, Next to Starbucks, 100 feet **Address**

road, HAL 2nd stage, Indiranagar - 560038

City : Bangalore

State : Karnataka

Pincode : 560038

Email

Contact Details : (080) 2521 4614 - 15

Package Name : Arcofemi MediWheel Full Body Annual Plus Male 2D ECHO (Metro)

Comment : APPOINTMENT TIME 9:00AM

Booking Date : 17-08-2023

Appointment

Date

: 26-08-2023

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:





शेष्ट पहचान द्वाधिकरण

Identification Authority of India Government of India

नामांकन क्रमांक Enrolment No.: 1047/10045/75902

Pankaj Kumar Gautam

पंकज कुमार गौतम S/O Durga Prasad

S/O Durga Prasad HQUSF NO. A- 659- A GIRI MARG MANDAWALI, FAZALPUR Mandawali Shakarbur

Delhi 110092



UC 01589375 5 IN Ref No.:4I2B3E9X-1589375



आपका आधार क्रमांक / Your Aadhaar No. :

5752 4948 4883

आधार — आम आदमी का अधिकार



भारत सरकार — GOVERNMENT OF INDIA



पंकज कुमार गौतम Pankaj Kumar Gautam

जन्म वर्ष / Year of Birth : 1987 पुरुष / Male

5752 4948 4883



) NATION TO BE AND AREA TO STATE AND A

आधार — आम आदमी का अधिकार

Male 177 cm 78 kg

35 yrs Indian Meds:

2:41:08pm

Medical History: Test Reason:

Technician: Test Type: Ref. MD: Ordering MD:

Comment:

BRUCE: Exercise Time 09:32

Max HR: 162 bpm 87 % of max predicted 185 bpm HR at rest: 56

Maximum Workload: 11.90 METS

Arrhythmia: PSVC:4 Max. ST: -2.40 mm, -1.71 mV/s in II; EXERCISE STAGE 3 7:30

ST/HR index: 1.08 µV/bpm

ST/HR slope: 0.95 µV/bpm (V5)

HR reserve used: 82 %

HR recovery: 36 bpm

VE recovery: 0 VE/min

ST/HR hysteresis: 0.051 mV (I)

QRS duration: BASELINE: 86 ms, PEAK EX: 84 ms, REC: 84 ms

Reasons for Termination: Target heart rate achieved

Summary:

Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise:

Conclusion: GOOD EFFORT TOLERANCE

NORMAL HR AND BP RESPONSE

NO ANGINA AND ARRYTHMIA DURING TEST

STRESS TEST IS NEGATIVE FOR THE EXRCISE INDUCIBLE ISCHEMIA

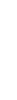
Location: * 0 *

RECOVERY	EXERCISE	PRETEST
STAGE 4	HYPERV. WARM-UP STAGE 1: STAGE 2 STAGE 3	SUPINE STANDING
00:33 03:03	00:41 00:25 03:00 03:00 03:00	Time in Stage 00:31 00:15
4.20 0.00	0.00 1.00 1.70 2.50 3.40	Speed [mph] 0.00 0.00
0.00	0.00 0.00 10.00 12.00	Grade [%] 0.00
1.0	1.0 1.2 4.6 7.0	Workload [METS]
162 101	57 54 58 120	HR [bpm]
155/95 159/100	118/80	BP [mmHg]
23250 25110 16059	11564 16560	RPP [mmHg*bp
0 0	0000	VE [/min] 0
-1.20 -1.15 -1.05	-1.35 -1.35 -1.35 -1.30	STLevel II [mm]
>		Comment

Phase Name

Stage Name

Time



Attending MD:

GE CardioSoft V7.0 (10)

Exercise Test / 12-Lead Report

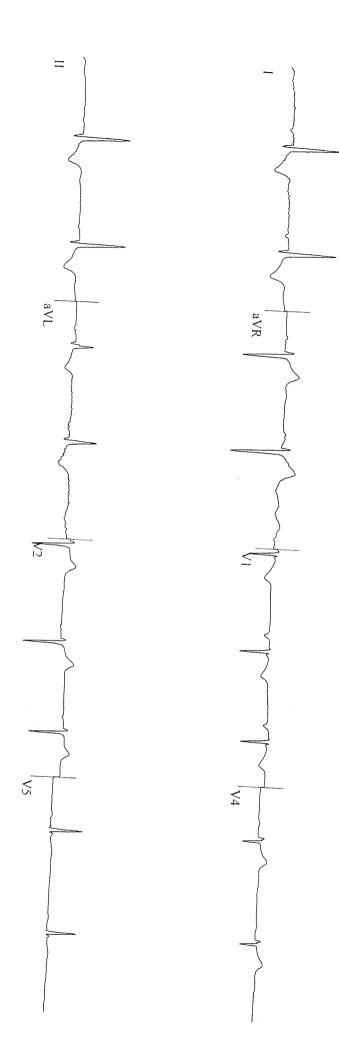
APOLLO CLINIC

Male 177 cm 78 kg 35 yrs Indian

64 bpm

PRETEST SUPINE 00:14

BRUCE 0.0 mph 0.0 %



П

aVF

Y3

4٧

Male 177 cm 78 kg 35 yrs Indian

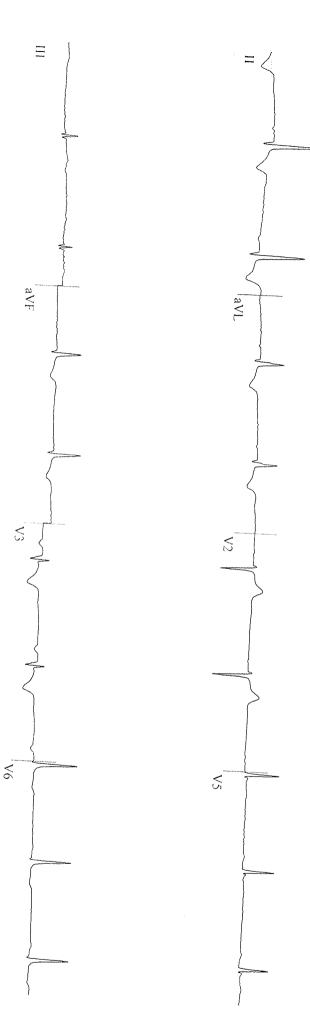
56 bpm

Exercise Test / 12-Lead Report PRETEST STANDING 00:32

BRUCE 0.0 mph 0.0 %

APOLLO CLINIC

aVR \leq ٧<u>4</u>



GE CardioSoft V7.0 (10) 25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(I.V6)

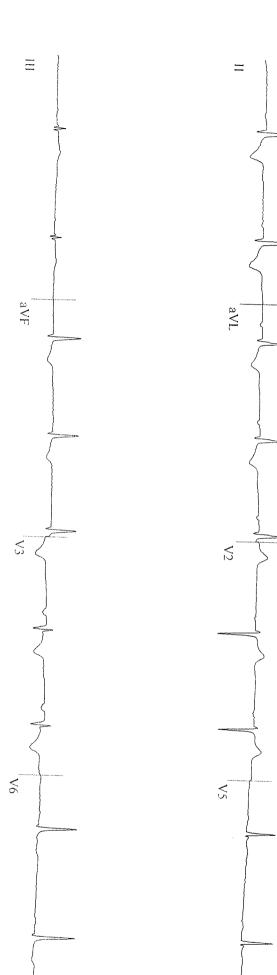
Start of Test: 2:41:08pm

Page 2

56 bpm

APOLLO CLINIC

aVR ¥4



MR PANKAJ,
Patient ID: 94262
'26.08.2023 M
2:42:40pm 35

Male 177 cm 78 kg 35 yrs Indian

Exercise Test / 12-Lead Report PRETEST

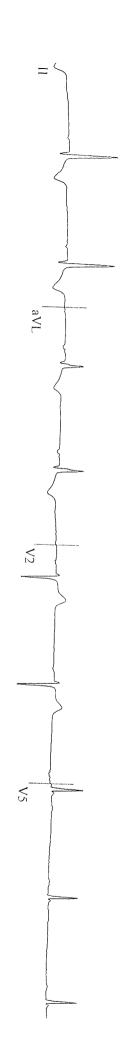
56 bpm

WARM=WP 01:27

BRUCE 0.0 mph 0.0 %

APOLLO CLINIC

aVR **4**



GE CardioSoft V7.0 (10) 25 mm/s = 10 mm/mV = 50 Hz = 0.05 = 40 Hz = FRF= HR(LV6)

aVF

\<u>\</u>2

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Start of Test: 2:41:08pm

Page 4

Patient ID: 94262 26.08.2023 M 2:45:46pm 35

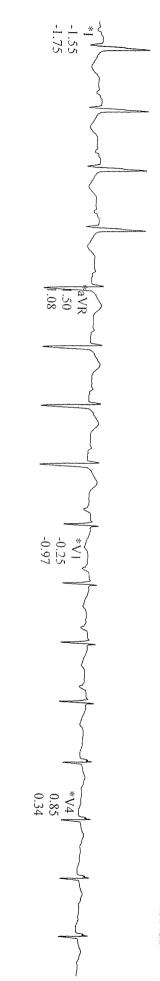
Male 177 cm 78 kg 35 yrs Indian

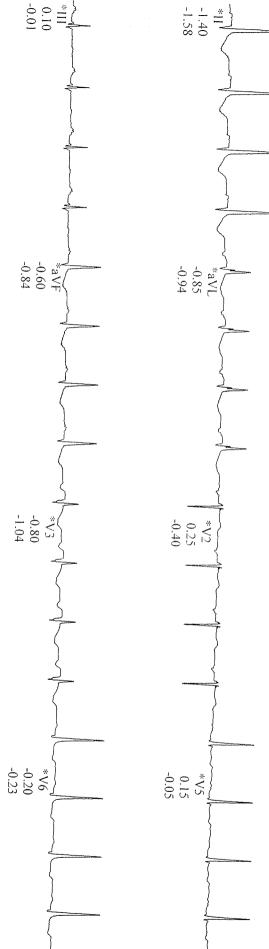
96 bpm

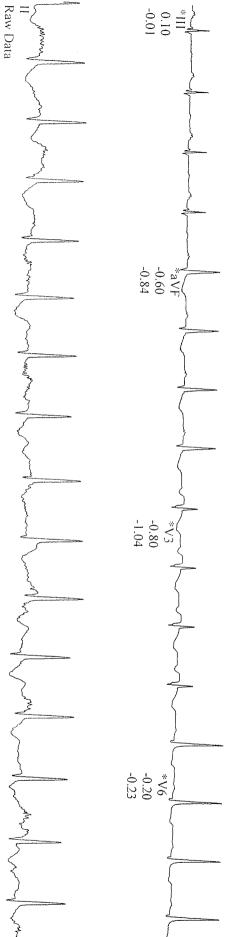
EXERCISE STAGE I 02:50

BRUCE 1.7 mph 10.0 %

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







Start of Test: 2:41:08pm

GE CardioSoft V7.0 (10) 25 mm/s ±10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(1,V6) Raw Data 0.85 -0.45 -0.63 -1.35 -1.25 • MR PANKAJ, Patient ID: 94262 26.08.2023 N 2:48:46pm 3: Male 177 cm 78 kg 35 yrs Indian *aVF 0.20 -0.10 *aVL -1.15 -1.18 0.90 0.25 117 bpm 138/85 mmHg Exercise Test / Linked Medians EXERCISE STAGE 2 05:50 -0.65 -1.33 *V2 -0.46 *VI -0.20 -1.23 Amounter Symphosized Knychilds BRUCE 2.5 mph 12.0 % ₹V6 -0.85 -0.70 -0.60 -0.32 0.20 0.01 Lead ST Level (mm) ST Slope (mV/s) APOLLO CLINIC

Start of Test: 2:41:08pm

Page 6

• MR PANKAJ,
Patient ID: 94262
26.08.2023
2:51:46pm 3:

Male 177 cm 35 yrs Indian

78 kg

Exercise Test / Linked Medians

EXERCISE STAGE 3 08:50

150 bpm 155/95 mmHg

BRUCE 3.4 mph 14.0 %

APOLLO CLINIC

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

-1.15 -0.34 -0.55 -0.61 *aVL 0.00 -0.42 *aVR 0.80 0.03 10.50 -1.04 0.44

0.50 0.03

-1.00 -0.06

GE CardioSoft V7.0 (10) 25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(1.V6)

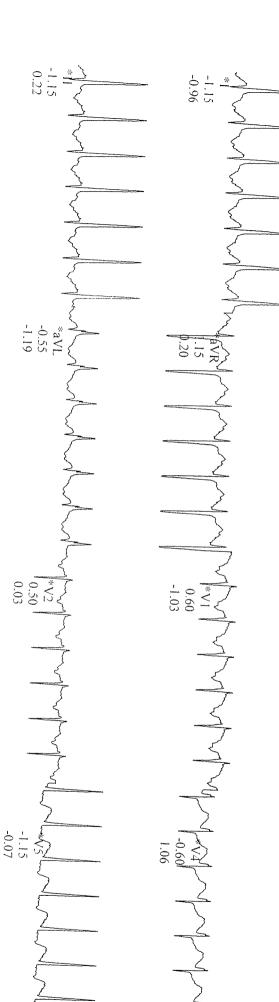
Start of Test: 2:41:08pm

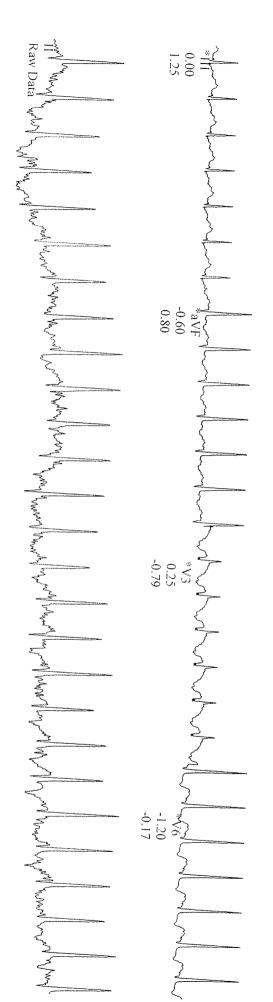
*Computer Synthesized Rhythms

BRUCE 4.2 mph 16.0 %

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

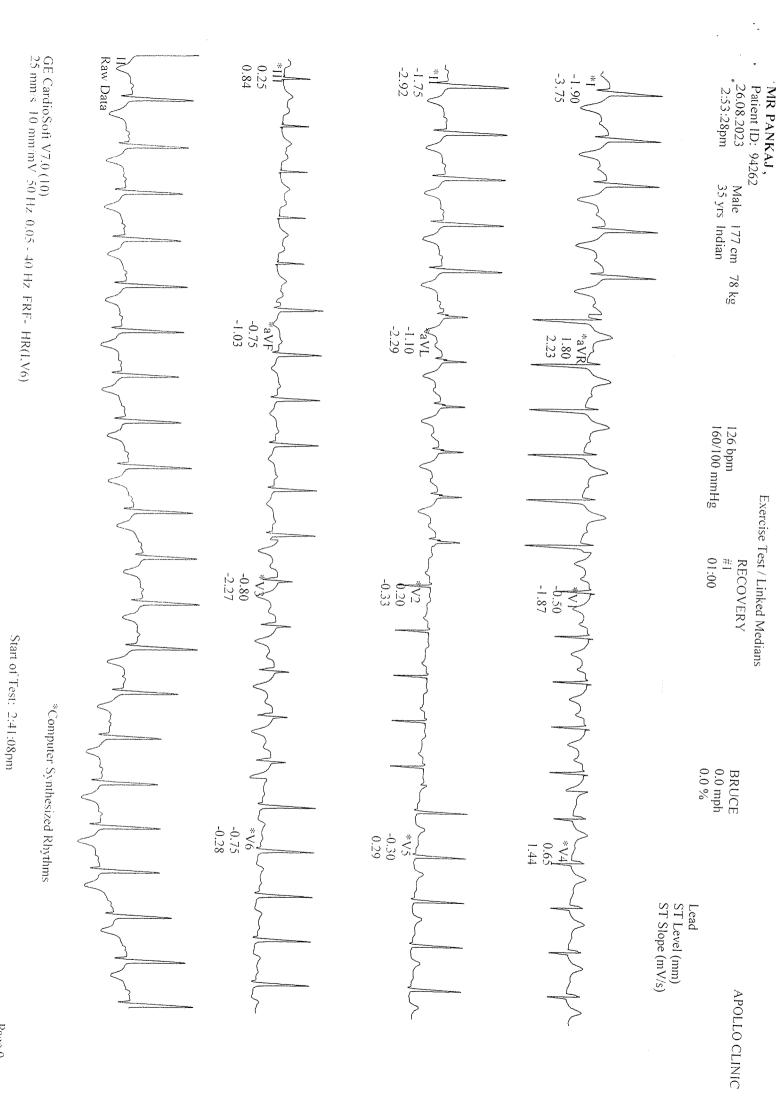
APOLLO CLINIC





*Computer Synthesized Rhythms

Start of Test: 2:41:08pm



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2:55:28pm

Male 177 cm 35 yrs Indian

1 78 kg

100 bpm 159/100 mmHg

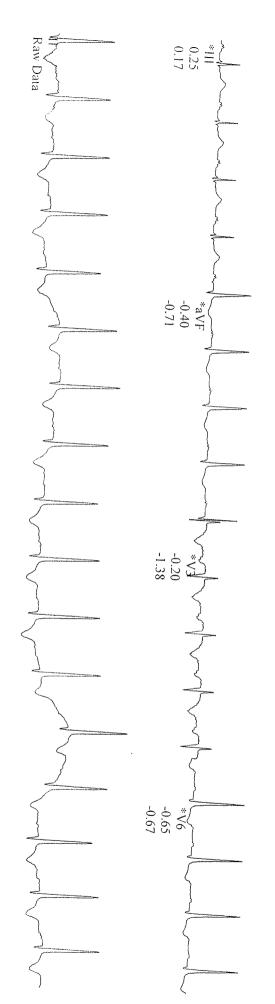
Exercise Test / Linked Medians RECOVERY #1 03:00

BRUCE 0.0 mph 0.0 %

APOLLO CLINIC

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

-1.00 -1.59 -1.30 -1.78 *\d\/L -0.75 -1.14 *aVR 1.15 1.06 -0.25 0.25 0.0p *V5 -0.45 -0.23 0.25 0.54



GE CardioSoft V7.0 (10) 25 mm/s = 10 mm/mV = 50 Hz = 0.05 - 40 Hz = FRF- HR(LV6)

*Computer Synthesized Rhythms

Start of Test: 2:41:08pm



Patient Name : Mr. Pankaj Age/Gender : 35 Y/M

UHID/MR No.

: CBEL.0000094262

Sample Collected on

LRN#

: RAD2083031

Ref Doctor Emp/Auth/TPA ID

: SELF

: 9663275102

OP Visit No

: CINROPV202999

Reported on

: 26-08-2023 17:17

Specimen

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. DHANALAKSHMI B MBBS, DMRD

Radiology



: 26-08-2023 13:59

Patient Name : Mr. Pankaj Age/Gender : 35 Y/M

UHID/MR No. : CBEL.0000094262 **OP Visit No** : CINROPV202999

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

Reported on

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern.

: 9663275102

No free fluid or lymphadenopathy is seen.

IMPRESSION:

Sample Collected on

Emp/Auth/TPA ID

NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.

Dr. DHANALAKSHMI B

MBBS, DMRD

Radiology