

Patient Name : **CHAITANYA PANDEY**

Doctor Name : Navneet Kaur

Gender/Age : Male / 35 Y

Qualification : MBBS

Weight/Height : 103.8 Cms / 180 Kgs

Appointment Id : jr6d9hzyr5 -

**Lab Report Summary**



**Blood**

• 15 Parameters



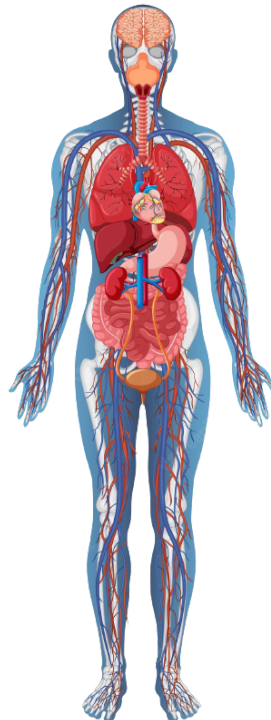
**Glands & Endocrine System**

• 4 Parameters



**Heart/Circulatory System**

• 3 Parameters



**Stomach & Liver/Digestive System**

• 10 Parameters



**Kidney/Genito-Urinary System**

• 9 Parameters

 **image**

Navneet Kaur

**Doctor's Signature**

Patient Name : **CHAITANYA PANDEY**

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Doctor Name : Navneet Kaur

Qualification : MBBS

Purpose Of Visit : Corporate Health Check  
ARCOFEMI

Current Symptoms : Headache

#### Past Medical History

#### Personal History

Diet : Vegetarian

#### Family History

Diabetics : Mother, Father

#### Lab Panel Results

#### HBA1C, GLYCATED HEMOGLOBIN

Sample Collected On : 26-08-2023

HBA1C, GLYCATED HEMOGLOBIN **5.6\*** %

0 - 0 %

ESTIMATED AVERAGE GLUCOSE (EAG) **114\*** Mg/DL

0 - 0 Mg/DL

#### LIPID PROFILE

Sample Collected On : 26-08-2023

TOTAL CHOLESTEROL **186** Mg/DL

0 - 200 Mg/DL

TRIGLYCERIDES **115** Mg/DL

50 - 150 Mg/DL

HDL CHOLESTEROL **46\*** Mg/DL

40 - 0 Mg/DL



Navneet Kaur

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NON-HDL CHOLESTEROL	<b>140*</b> Mg/DL	0 - 130 Mg/DL
LDL CHOLESTEROL	<b>117*</b> Mg/DL	0 - 100 Mg/DL
VLDL CHOLESTEROL	<b>23</b> Mg/DL	5 - 30 Mg/DL
CHOL / HDL RATIO	<b>4.04</b>	0 - 4.97

**LIVER FUNCTION TEST (LFT)**

Sample Collected On : **26-08-2023**

BILIRUBIN, TOTAL	<b>0.80</b> Mg/DL	0.2 - 1.2 Mg/DL
BILIRUBIN CONJUGATED (DIRECT)	<b>0.10</b> Mg/DL	0 - 0.3 Mg/DL
BILIRUBIN (INDIRECT)	<b>0.70</b> Mg/DL	0 - 1.1 Mg/DL
ALANINE AMINOTRANSFERASE (ALT/SGPT)	<b>102*</b> U/L	0 - 49.99 U/L
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	<b>51.0</b> U/L	17 - 59 U/L
ALKALINE PHOSPHATASE	<b>73.00</b> U/L	38 - 126 U/L
PROTEIN, TOTAL	<b>6.90</b> G/DL	6.3 - 8.2 G/DL



Navneet Kaur  
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ALBUMIN	<b>4.20</b> G/DL	3.5 - 5 G/DL
GLOBULIN	<b>2.70</b> G/DL	2 - 3.5 G/DL
A/G RATIO	<b>1.56</b>	0.9 - 2

**COMPLETE URINE EXAMINATION**

Sample Collected On : **26-08-2023**

COLOUR YELLOW	TRANSPARENCY CLEAR	URINE PROTEIN NEGATIVE	GLUCOSE NEGATIVE	URINE BILIRUBIN NEGATIVE
URINE KETONES (RANDOM) NEGATIVE	UROBILINOGEN NORMAL	BLOOD NEGATIVE	NITRITE NEGATIVE	LEUCOCYTE ESTERASE NEGATIVE
PUS CELLS 0-2 /Hpf	EPITHELIAL CELLS 0-2 /Hpf	RBC ABSENT /Hpf	CASTS ABSENT	CRYSTALS ABSENT

PH	<b>5.5</b>	5 - 7.5
SP. GRAVITY	<b>1.020</b>	1.002 - 1.03

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

Sample Collected On : **26-08-2023**

TRI-IODOTHYRONINE (T3, TOTAL)	<b>1.17</b> Ng/ML	0.67 - 1.81 Ng/ML
THYROXINE (T4, TOTAL)	<b>10.18*</b> Mg/DL	4.66 - 9.32 Mg/DL
THYROID STIMULATING HORMONE (TSH)	<b>3.670</b> MIU/ML	0.25 - 5 MIU/ML



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**URINE GLUCOSE(FASTING)**

URINE GLUCOSE(FASTING)  
NEGATIVE

Sample Collected On : 26-08-2023

**BLOOD GROUP ABO AND RH FACTOR**

BLOOD GROUP TYPE	Rh TYPE
B	POSITIVE

Sample Collected On : 26-08-2023

**URINE GLUCOSE(POST PRANDIAL)**

URINE GLUCOSE(POST PRANDIAL)  
NEGATIVE

Sample Collected On : 26-08-2023

**GLUCOSE, FASTING**

GLUCOSE, FASTING **98** Mg/DL

70 - 100 Mg/DL

Sample Collected On : 26-08-2023

**RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)**

Sample Collected On : 26-08-2023

CREATININE **1.00** Mg/DL

0.66 - 1.25 Mg/DL

UREA **24.10** Mg/DL

19.26 - 42.8 Mg/DL

BLOOD UREA NITROGEN **11.3** Mg/DL

8 - 23 Mg/DL

URIC ACID **6.20** Mg/DL

3.5 - 8.5 Mg/DL



Navneet Kaur

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CALCIUM	<b>8.70</b> Mg/DL	8.4 - 10.2 Mg/DL
PHOSPHORUS, INORGANIC	<b>2.80</b> Mg/DL	2.5 - 4.5 Mg/DL
SODIUM	<b>141</b> Mmol/L	135 - 145 Mmol/L
POTASSIUM	<b>4.2</b> Mmol/L	3.5 - 5.1 Mmol/L
CHLORIDE	<b>103</b> Mmol/L	98 - 107 Mmol/L

**HEMOGRAM**

Sample Collected On : **26-08-2023**

TOTAL LEUCOCYTE COUNT (TLC)  
 7,340 cells/Cu.mm

HAEMOGLOBIN	<b>16.1</b> G/DL	13 - 17 G/DL
PCV	<b>47.80</b> %	40 - 50 %
RBC COUNT	<b>5.4</b> Million/Cu.mm	4.5 - 5.5 Million/Cu.mm
MCV	<b>88.4</b> FL	83 - 101 FL
MCH	<b>29.8</b> Pg	27 - 32 Pg



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MCHC	<b>33.7</b> G/DL	31.5 - 34.5 G/DL
R.D.W	<b>11.9</b> %	11.6 - 14 %
NEUTROPHILS	<b>58.8</b> %	40 - 80 %
LYMPHOCYTES	<b>30.4</b> %	20 - 40 %
EOSINOPHILS	<b>3.9</b> %	1 - 6 %
MONOCYTES	<b>5.8</b> %	2 - 10 %
BASOPHILS	<b>1.1</b> %	0 - 2 %
NEUTROPHILS	<b>4315.92</b> Cells/Cu.mm	2000 - 7000 Cells/Cu.mm
LYMPHOCYTES	<b>2231.36</b> Cells/Cu.mm	1000 - 3000 Cells/Cu.mm
EOSINOPHILS	<b>286.26</b> Cells/Cu.mm	20 - 500 Cells/Cu.mm
MONOCYTES	<b>425.72</b> Cells/Cu.mm	200 - 1000 Cells/Cu.mm



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BASOPHILS	<b>80.74</b> Cells/Cu.mm	0 - 100 Cells/Cu.mm
PLATELET COUNT	<b>222000</b> Cells/Cu.mm	150000 - 410000 Cells/Cu.mm
ERYTHROCYTE SEDIMENTATION RATE (ESR)	<b>03</b> Mm At The End Of 1 Hour	0 - 15 Mm At The End Of 1 Hour

**GAMMA GLUTAMYL TRANFERASE (GGT)**

Sample Collected On : **26-08-2023**

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT)	<b>22.00</b> U/L	15 - 73 U/L
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**GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)**

Sample Collected On : **26-08-2023**

GLUCOSE, POST PRANDIAL (PP), 2 HOURS	<b>132</b> Mg/DL	70 - 140 Mg/DL
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**Radiology Test**

Radiology Reports Are Available Separately For Your Reference If Applicable

 **image**

Navneet Kaur

**Doctor's Signature**



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Qualification : MBBS

#### Physical Examination

##### Vitals

Weight : 180 Kgs  
Height : 103.8 Cms  
BMI : 167.06 BMI  
Pulse : 84 BPM  
SpO2 : 97 %  
Temperature : 98.4 F

##### Physical Exam

Pallor : No  
Icterus : No  
Cyanosis : No  
Clubbing : No  
Koilonychia : No  
Edema : No

##### Cardiovascular System

Rhythm : Regular  
Systolic(Mm Of Hg) : 128  
Diastolic(Mm Of Hg) : 80  
Heart Sounds : S1S2+

##### Respiratory System

Breath Sounds : Normal

#### Work Life Style

Type Of Work : Low Activity  
Exposure To Computer : High

 image

Navneet Kaur

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### Happiness Score

Sleeping Well : Inadequate  
Stress At Home : No  
Stress At Work : Mild

### Wellness Prescription

Advice On Physical Activity : Exercise  
Yoga/Relaxation Exercises

Advice On Diet : Low Cholesterol

### Follow Up And Review Plan

Follow Up : Liver Function Tests - After 2 Months

### Medications

Medication	Dosage	When To Take	Frequency	Start Date	End Date
TAB URMED	300 MG	After Food	Twice Daily	08/27/2023	10/31/2023
Tayo-60K 6000 IU Oral Tablet	1	After Food	Once Daily	08/27/2023	11/30/2023



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### Risk Scores

#### Apollo Hospitals Thank You For Your Consent

Based On Current Parameters, Personal & Family History, AI Enabled Tools Derive Health Risk Scores To Alert Participant On His/Her Likely Predisposition To A Disease To Aid Early Detection & Early Medical Intervention To Mitigate The Risk.

#### AICVD Risk Score **High Risk**

Report Name	Risk Score	Acceptable Score
Risk Of Heart Disease	30	4

Info: Your Likelihood To Cardiovascular Disease Is Higher (2x) To Other People Of Your Age & Gender In Next 10 Years

Note: The Risk Category Is Determined Through The Ratio Between Patient Score And Acceptable Score At Multiple Decimal Points. The Outputs Are Shown In Whole Numbers.

#### Pre-Diabetes Risk Score **High Risk**

Report Name	Risk Score
Prediabetes	10.0


Note: The Risk Status Is Computed With The Machine Learning Algorithm And Categorised Based On The Individual's Chances Of Prediabetes / Diabetes. It Also Provides A Score Based On The Probability Of The Risk Status.



Navneet Kaur

**Doctor's Signature**



<b>Name</b> : Mr. CHAITANYA PANDEY	<b>Age</b> : 35 Y	<b>UHID</b> :SCHI.0000014840
<b>Address</b> : FLAT C-2 ALIGARH	<b>Sex</b> : M	
<b>Plan</b> : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT		<b>OP Number</b> :SCHIOPV20591
		<b>Bill No</b> :SCHI-OCR-7920
		<b>Date</b> : 26.08.2023 09:54

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 ✓ 1st Op	
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) ✓ 12:30	

Height:.....	180cm
Weight:.....	103.8kg
B.P:.....	128/80
Pulse:.....	84/min

Sp02 - 97

use Katty III  
Sp02 100

-hepatic - eye  
fistula 2019

.....	Pulse:.....
.....	B.P:.....
.....	Weight:.....
.....	Height:.....

From: Wellness : MedilWheel : New Delhi <wellness@medilwheel.in>  
 Sent: 25 August 2023 11:21  
 To: Corporate Apollo Clinic <corporate@apolloclinic.com>  
 Cc: Customer Care : MedilWheel : New Delhi <customercare@medilwheel.in>; Network : MedilWheel : New Delhi <network@medilwheel.in>; Deepak <deepak@apolloclinic.com>  
 Subject: Health checkup booking no. 35 (Annual)

Dear Team

Please find the attached health checkup booking file and confirm the same.

Thanks & Regards  
 Lav Gupta

S. No.	APPOINTMENT ID	BOOKING ID	EMPLOYEE NAME	AGE	GENDER	EMAIL	CONTACT NO.	APPOINTMENT DATE	CLINIC NAME	CLINIC CITY	APPOINTMENT TIME	APPOINTMENT STATUS	REMARKS
1	Arcotem/160654504	Anupam Pandey		31	Female	chaitanya.pandey@bankofbaroda.com	9916565455	26-08-2023	Apollo Spc DELHI	Delhi	9:00 AM	R-2, Netral	Confirmed at 9:00 Am
2	Arcotem/160654503	MR. PANDEY CHAITANYA		32	Male	chaitanya.pandey@bankofbaroda.com	9916565455	26-08-2023	Apollo Spc DELHI	Delhi	9:00 AM	R-2, Netral	Confirmed at 9:00 Am

22/08/23

Mr. Chaitanya Pand

3574

10/9/16 - R  
9/6/16

(Eglasses)

NCIP 19  
14 mm - L

Bypass  
40 - R  
Fositech (R)

10/11

Ref R - 3.0 / 0.5 x 45 - C/L  
L - 4.0 - C/L

Pres Same as Ref

Iris seems ok. Lath edge  
SIL - (R)

C/L - (R) as f

Adv. - Osmotic Eye Drop

- Refr. Examined by @ for Lathice

(R)

26/08/23 →

Ms. Anupam Pandey -  
31 Yrs / F ✓

C/C: Regular Dental Check up .

M/H: N.R .

PDH :- N.R .

O/E :- → Calculus +  
Stains present .

→ Generalised Spacing

→ Pericoronitis + 8 .

Advised :- Scaling →

- Anterior + 8 .



## DIGITAL X-RAY REPORT

NAME: CHAITANYA	DATE: 26.08.2023
UHID NO : 14840	AGE: 35YRS/ SEX: M

### X-RAY CHEST PA VIEW

Both the lung fields show no active parenchymal pathology.

Both the costophrenic angles are clear.

Heart size is normal.

Both the domes of diaphragm are normal.

Bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY

Please correlate clinically and with lab investigations

  
**DR. MONICA CHHABRA**  
Consultant Radiologist

Dr. MONICA CHHABRA  
Consultant Radiologist  
DMC No. 18744  
Apollo Spectra Hospitals  
New Delhi-110019

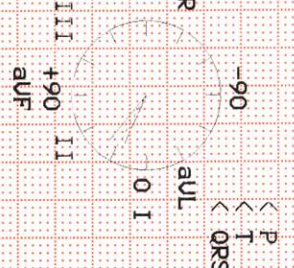


Measurement Results

QRS	98 ms
QT/QTcB	356 / 426 ms
PR	174 ms
P	106 ms
RR/PP	700 / 700 ms
P/QRS/T	30 / 40 / 25 degrees
STc/QTcSPD	10 / 10 ms
Sokolow	1.4 mV
NK	12

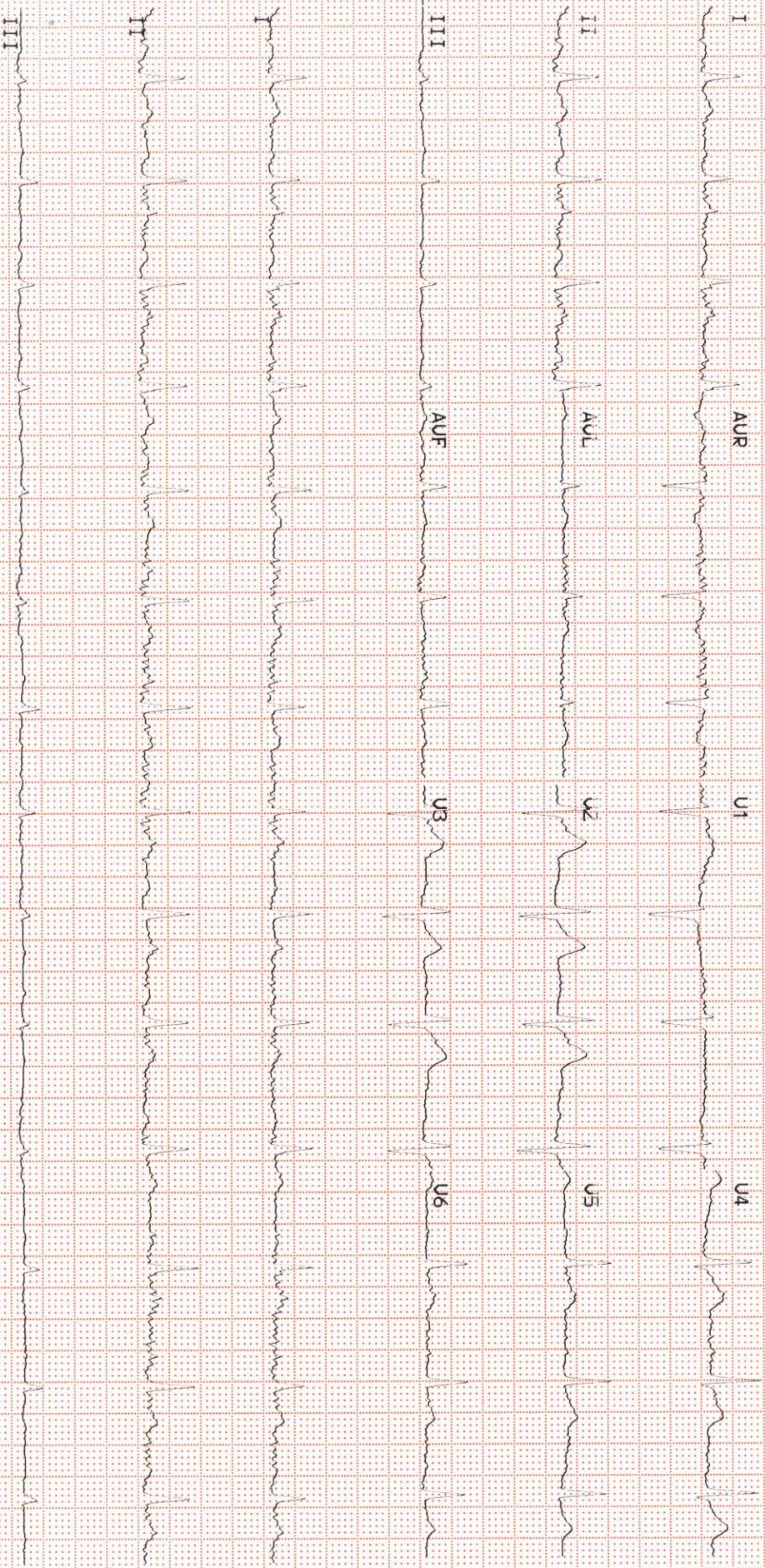
Interpretation

normal ECG



*Handwritten signature*

Unconfirmed report.



<b>NAME :</b>	<b>CHAITANYA PANDEY</b>	<b>AGE/SEX:</b>	<b>35</b>	<b>YRS./M</b>
<b>UHID :</b>	<b>14840</b>			
<b>REF BY :</b>	<b>APOLLO SPECTRA</b>	<b>DATE:-</b>	<b>26.08.2023</b>	

### **ULTRASOUND WHOLE ABDOMEN**

**Liver:** Appears normal in size, and shows increased parenchymal echogenicity which is most likely due to fatty changes. Intrahepatic biliary radicles are not dilated. CBD and portal vein are normal in calibre.

**Gall Bladder:** is not seen-- Post operative status.

**Pancreas and Spleen:** Appears normal in size and echotexture.

**Both Kidneys:** are normal in size, shape, and echopattern. The parenchymal thickness is normal and cortico-medullary differentiation is well maintained. Pelvicalyceal systems are not dilated. No calculus or mass lesion is seen. Ureter is not dilated.

**Urinary Bladder:** is moderately distended and shows no obvious calculus or sediments. Bladder wall thickness is normal.

**Prostate:** normal in size, weight 20.3 Gms. It is normal in echotexture with no breach in the capsule.

No free fluid seen.

### **IMPRESSION: FATTY CHANGES IN LIVER GRADE II-III**

**Please correlate clinically and with lab. Investigations.**

  
DR. MONICA CHHABRA  
Consultant Radiologist

DR. MONICA CHHABRA  
Consultant Radiologist  
DM No. 18744  
Apollo Spectra Hospitals  
New Delhi-110019

Patient Name : Mr. CHAITANYA PANDEY Age : 35 Y/M  
 UHID : SCHI.0000014840 OP Visit No : SCHIOPV20591  
 Conducted By: : Dr. MUKESH K GUPTA Conducted Date : 26-08-2023 15:46  
 Referred By : SELF

**MITRAL VALVE**

Morphology AML-**Normal**/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming.  
 PML-**Normal**/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.  
 Subvalvular deformity Present/**Absent**. Score : \_\_\_\_\_  
 Doppler Normal/Abnormal E>A **E≥A**  
 Mitral Stenosis Present/**Absent** RR Interval \_\_\_\_\_ msec  
 EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg MVA \_\_\_\_\_ cm<sup>2</sup>  
 Mitral Regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

**TRICUSPID VALVE**

Morphology **Normal**/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.  
 Doppler **Normal**/Abnormal RR interval \_\_\_\_\_ msec.  
 Tricuspid stenosis Present/**Absent** MDG \_\_\_\_\_ mmHg  
 EDG \_\_\_\_\_ mmHg  
 Tricuspid regurgitation : **Absent**/Trivial/Mild/Moderate/Severe Fragmented signals  
 Velocity \_\_\_\_\_ msec. Pred. RVSP=RAP+ \_\_\_\_\_ mmHg

**PULMONARY VALVE**

Morphology **Normal**/Atresia/Thickening/Doming/Vegetation.  
 Doppler **Normal**/Abnormal. Level  
 Pulmonary stenosis Present/**Absent** Pulmonary annulus \_\_\_\_\_ mm  
 PSG \_\_\_\_\_ mmHg  
 Pulmonary regurgitation **Absent**/Trivial/Mild/Moderate/Severe  
 Early diastolic gradient \_\_\_\_\_ mmHg. End diastolic gradient mmHg

**AORTIC VALVE**

Morphology **Normal**/Thickening/Calcification/Restricted opening/Flutter/Vegetation  
 No. of cusps 1/2/3/4  
 Doppler **Normal**/Abnormal Level  
 Aortic stenosis Present/**Absent** Aortic annulus \_\_\_\_\_ mm  
 PSG \_\_\_\_\_ mmHg  
 Aortic regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

Measurements	Normal Values	Measurements	Normal values
Aorta	2.8 (2.0 – 3.7cm)	LA es	3.4 (1.9 – 4.0cm)
LV es	2.7 (2.2 – 4.0cm)	LV ed	4.5 (3.7 – 5.6cm)
IVS ed	1.0 (0.6 – 1.1cm)	PW (LV)	0.9 (0.6 – 1.1cm)
RV ed	(0.7 – 2.6cm)	RV Anterior wall	(upto 5 mm)
LVVd (ml)		LVVs (ml)	
EF	60% (54%-76%)	IVS motion	<b>Normal</b> /Flat/Paradoxical


**CHAMBERS :**

LV **Normal**/Enlarged/**Clear**/Thrombus/Hypertrophy  
 Contraction **Normal**/Reduced  
 Regional wall motion abnormality **Absent**  
 LA **Normal**/Enlarged/**Clear**/Thrombus  
 RA **Normal**/Enlarged/**Clear**/Thrombus  
 RV **Normal**/Enlarged/**Clear**/Thrombus

## PERICARDIUM

### COMMENTS & SUMMARY

- v Normal LV systolic function
- v No RWMA, LVEF=60%
- v No AR,PR,MR & TR
- v No I/C clot or mass
- v Good RV function
- v Normal pericardium
- v No pericardial effusion

  
*Dr. M K Gupta*  
*M.B.B.S, MD,FIACM*  
*Senior Consultant Cardiologist*

Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:32AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 04:14PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**DEPARTMENT OF HAEMATOLOGY**

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

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

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Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:32AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 04:14PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**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**

<b>HAEMOGLOBIN</b>	16.1	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	47.80	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.4	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	88.4	fL	83-101	Calculated
MCH	29.8	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	11.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,340	cells/cu.mm	4000-10000	Electrical Impedance

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

NEUTROPHILS	58.8	%	40-80	Electrical Impedance
LYMPHOCYTES	30.4	%	20-40	Electrical Impedance
EOSINOPHILS	3.9	%	1-6	Electrical Impedance
MONOCYTES	5.8	%	2-10	Electrical Impedance
BASOPHILS	1.1	%	<1-2	Electrical Impedance

**ABSOLUTE LEUCOCYTE COUNT**

NEUTROPHILS	4315.92	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2231.36	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	286.26	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	425.72	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	80.74	Cells/cu.mm	0-100	Electrical Impedance

**PLATELET COUNT**

PLATELET COUNT	222000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
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**ERYTHROCYTE SEDIMENTATION RATE (ESR)**

ERYTHROCYTE SEDIMENTATION RATE (ESR)	03	mm at the end of 1 hour	0-15	Modified Westergren
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**PERIPHERAL SMEAR**

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:32AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 04:14PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**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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**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



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 12:34PM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 01:22PM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:28PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**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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<b>GLUCOSE, FASTING , NAF PLASMA</b>	98	mg/dL	70-100	GOD - POD
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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.

<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	132	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.

Ref: Marks medical biochemistry and clinical approach





Patient Name	: Mr.CHAITANYA PANDEY	Collected	: 26/Aug/2023 10:09AM
Age/Gender	: 35 Y 2 M 5 D/M	Received	: 26/Aug/2023 03:27PM
UHID/MR No	: SCHI.0000014840	Reported	: 26/Aug/2023 04:43PM
Visit ID	: SCHIOPV20591	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: SAFSZFDG		

**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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Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 03:27PM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 04:43PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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>HBA1C, GLYCATED HEMOGLOBIN ,</b> <i>WHOLE BLOOD EDTA</i>	5.6	%		HPLC
<b>ESTIMATED AVERAGE GLUCOSE (eAG) ,</b> <i>WHOLE BLOOD EDTA</i>	114	mg/dL		Calculated

**Comment:**

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

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

Note: Dietary preparation or fasting is not required.

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

Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
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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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Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:30AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

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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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	186	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	115	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	46	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	<b>140</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>117</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	23	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.04		0-4.97	Calculated

Comment:

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

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

- 1.Measurements in the same patient on different days can show physiological and analytical variations.
- 2.NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3.Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4.Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5.As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6.VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:30AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**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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**LIVER FUNCTION TEST (LFT) , SERUM**

BILIRUBIN, TOTAL	0.80	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	<b>102</b>	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	51.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	73.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	6.90	g/dL	6.3-8.2	Biuret
ALBUMIN	4.20	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.70	g/dL	2.0-3.5	Calculated
A/G RATIO	1.56		0.9-2.0	Calculated



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:30AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20591	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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**RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM**

CREATININE	1.00	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	24.10	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.20	mg/dL	3.5-8.5	Uricase
CALCIUM	8.70	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	2.80	mg/dL	2.5-4.5	PMA Phenol
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direct ISE



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:30AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20591	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
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	22.00	U/L	15-73	Glycylglycine Nitoranalide



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:29AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 07:31PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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**THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM**

TRI-IODOTHYRONINE (T3, TOTAL)	1.17	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	<b>10.18</b>	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	3.670	µIU/mL	0.25-5.0	ELFA

**Comment:**

**Note:**

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

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

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

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

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

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



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 11:29AM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 07:31PM
Visit ID : SCHIOPV20591	Status : Final Report
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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
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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



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 12:36PM
UHID/MR No : SCHI.0000014840	Reported : 26/Aug/2023 03:39PM
Visit ID : SCHIOPV20591	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SAFSZFDG	

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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**COMPLETE URINE EXAMINATION (CUE) , URINE**

**PHYSICAL EXAMINATION**

COLOUR	YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		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	0-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-2	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

**Comment:**

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



Patient Name : Mr.CHAITANYA PANDEY	Collected : 26/Aug/2023 10:09AM
Age/Gender : 35 Y 2 M 5 D/M	Received : 26/Aug/2023 12:36PM
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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
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<b>URINE GLUCOSE(POST PRANDIAL)</b>	NEGATIVE		NEGATIVE	Dipstick
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Result is rechecked. Kindly correlate clinically

<b>URINE GLUCOSE(FASTING)</b>	NEGATIVE		NEGATIVE	Dipstick
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**\*\*\* End Of Report \*\*\***



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Consultant Pathologist

