





Patient Name	: Mr.KIRAN KUMAR B	Collected	: 29/Mar/2023 11:22AM
Age/Gender	: 49 Y 9 M 21 D/M	Received	: 29/Mar/2023 02:10PM
UHID/MR No	: CASR.0000100543	Reported	: 29/Mar/2023 03:30PM
Visit ID	: CASROPV203286	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 06153		

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

HAEMOGLOBIN	12.6	g/dL	13-17	Spectrophotometer
PCV	38.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.31	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	88.9	fL	83-101	Calculated
MCH	29.3	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	16.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,170	cells/cu.mm	4000-10000	Electrical Impedanc
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	58.9	%	40-80	Electrical Impedanc
LYMPHOCYTES	28	%	20-40	Electrical Impedanc
EOSINOPHILS	3.7	%	1-6	Electrical Impedanc
MONOCYTES	8.9	%	2-10	Electrical Impedanc
BASOPHILS	0.5	%	<1-2	Electrical Impedanc
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3634.13	Cells/cu.mm	2000-7000	Electrical Impedanc
LYMPHOCYTES	1727.6	Cells/cu.mm	1000-3000	Electrical Impedanc
EOSINOPHILS	228.29	Cells/cu.mm	20-500	Electrical Impedanc
MONOCYTES	549.13	Cells/cu.mm	200-1000	Electrical Impedanc
BASOPHILS	30.85	Cells/cu.mm	0-100	Electrical Impedanc
PLATELET COUNT	279000	cells/cu.mm	150000-410000	Electrical impedenc
ERYTHROCYTE SEDIMENTATION RATE (ESR)	17	mm at the end of 1 hour	0-15	Modified Westergre
ERIPHERAL SMEAR				

WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

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SIN No:BED230079777

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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 (W 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)







Visit ID : CASROPV2032 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 06153		
Visit ID : CASROPV2032	Sponsor N	ame : ARCOFEMI HEALTHCARE LIMITED
	86 Status	: Final Report
UHID/MR No : CASR.0000100	543 Reported	: 29/Mar/2023 06:52PM
Age/Gender : 49 Y 9 M 21 D/M	Received	: 29/Mar/2023 02:10PM
Patient Name : Mr.KIRAN KUMA	AR B Collected	: 29/Mar/2023 11:22AM

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

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	А		Microplate technology
Rh TYPE	Positive		Microplate technology

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

GLUCOSE, FASTING , NAF PLASMA	104	mg/dL	70-100	HEXOKINASE

Comment:		
As per American Diabetes Guidelines		
Fasting Glucose Values in mg/d L	Interpretation	
<100 mg/dL	Normal	
100-125 mg/dL	Prediabetes	
≥126 mg/dL	Diabetes	

GLUCOSE, POST PRANDIAL (PP), 2	142	mg/dL	70-140	HEXOKINASE
HOURS , NAF PLASMA				

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	7.2	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	160	mg/dL	Calculated
Comment:			
Reference Range as per American Diabetes Ass	ociation (ADA)	•	

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7

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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	

AT RISK (PREDIABETES)	5.7 - 6.4
DIAGNOSING 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.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. 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. Fructosamine may be used as an alternate measurement of glycemic control

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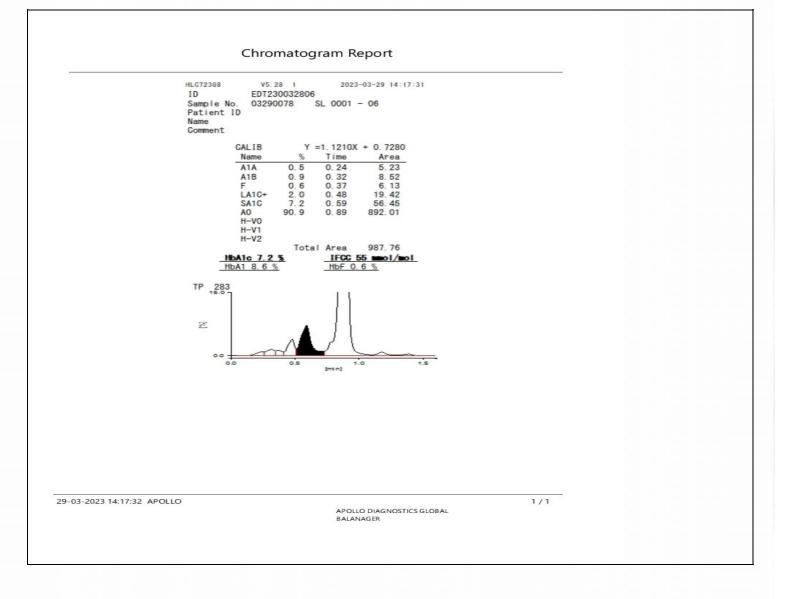






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: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
: 06153		
	: 49 Y 9 M 21 D/M : CASR.0000100543 : CASROPV203286 : Dr.SELF	: 49 Y 9 M 21 D/M Received : CASR.0000100543 Reported : CASROPV203286 Status : Dr.SELF Sponsor Name

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



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SIN No:PLF01952294,PLP1316863,EDT230032806

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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					

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	169	mg/dL	<200	CHO-POD
TRIGLYCERIDES	255	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	121	mg/dL	<130	Calculated
LDL CHOLESTEROL	70	mg/dL	<100	Calculated
VLDL CHOLESTEROL	51	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.52		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	\geq 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	\geq 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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SIN No:SE04335408

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ARCOFEMI - MEDIWHEEL - F	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	0.69	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.58	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	83.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.61	g/dL	6.6-8.3	Biuret
ALBUMIN	3.57	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.04	g/dL	2.0-3.5	Calculated
A/G RATIO	1.17		0.9-2.0	Calculated

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1860 **500** 7788

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Test Name Result Unit Bio. Ref. Range Method				

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	2.67	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic	
UREA	29.20	mg/dL	17-43	GLDH, Kinetic Assay	
BLOOD UREA NITROGEN	13.6	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	8.40	mg/dL	3.5–7.2	Uricase PAP	
CALCIUM	8.85	mg/dL	8.8-10.6	Arsenazo III	
PHOSPHORUS, INORGANIC	3.40	mg/dL	2.5-4.5	Phosphomolybdate Complex	
SODIUM	138	mmol/L	136–146	ISE (Indirect)	
POTASSIUM	5.5	mmol/L	3.5–5.1	ISE (Indirect)	
CHLORIDE	108	mmol/L	101–109	ISE (Indirect)	

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GAMMA GLUTAMYL TRANSPEPTIDASE	35.00	U/L	<55	IFCC	
(GGT), SERUM					

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SIN No:SE04335408

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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

Address: A-12, # 1-9-71/A/12/b, Rishab Heights, Rukminipuri Housing Colony, A S Rao Nagar, Hyderabad, Telangana, India - 500062

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 | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (W 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)







DEPARTMENT OF IMMUNOLOGY				
Emp/Auth/TPA ID	: 06153			
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Visit ID	: CASROPV203286	Status	: Final Report	
UHID/MR No	: CASR.0000100543	Reported	: 29/Mar/2023 03:21PM	
Age/Gender	: 49 Y 9 M 21 D/M	Received	: 29/Mar/2023 02:13PM	
Patient Name	: Mr.KIRAN KUMAR B	Collected	: 29/Mar/2023 11:22AM	

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

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

• •				
TRI-IODOTHYRONINE (T3, TOTAL)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.01	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.384	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m.In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hypothyroidism,TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active. 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

Page	10	of	12
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SIN No:SPL23053080

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Patient Name	: Mr.KIRAN KUMAR B	Collected	: 29/Mar/2023 10:58AM
Age/Gender	: 49 Y 9 M 21 D/M	Received	: 29/Mar/2023 01:56PM
UHID/MR No	: CASR.0000100543	Reported	: 29/Mar/2023 05:50PM
Visit ID	: CASROPV203286	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 06153		

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

PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
рН	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	POSITIVE ++		NEGATIVE	PROTEIN ERROR OF
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	TRACE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	1-2	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2088208

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Address: A-12, # 1-9-71/A/12/b, Rishab Heights, Rukminipuri Housing Colony, A S Rao Nagar, Hyderabad, Telangana, India - 500062

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 | Jundapal | Kundapalhalli | Koramangala | Sarijapur 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)







DEPARTMENT OF CLINICAL PATHOLOGY			
Emp/Auth/TPA ID	: 06153		
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Visit ID	: CASROPV203286	Status	: Final Report
UHID/MR No	: CASR.0000100543	Reported	: 29/Mar/2023 02:42PM
Age/Gender	: 49 Y 9 M 21 D/M	Received	: 29/Mar/2023 01:57PM
Patient Name	: Mr.KIRAN KUMAR B	Collected	: 29/Mar/2023 11:22AM

Test Name	Result	Unit	Bio. Ref. Range	Method

URINE GLUCOSE(POST PRANDIAL) NEGATIVE NEGATIVE Dipstick URINE GLUCOSE(FASTING) NEGATIVE NEGATIVE Dipstick

Result/s to Follow: PERIPHERAL SMEAR

DR SHALINI SINGH M.B.B.S, MD Consultant Pathologist

Dr.SRINIVAS N.S.NORI

M.B.B.S,M.D(PATHOLOGY)

CONSULTANT PATHOLOGIST



Dr E.Maruthi Prasad MSc,PhD(Biochemistry) Consultant Biochemist *** End Of Report ***

por Dr. RAJESH BATTINA

Dr. RAJESH BATTINA PhD. (Biochemistry) Consultant Biochemist

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M.B.B.S, M.D(Pathology) Consultant Pathologist

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SIN No:UPP014491,UF008218

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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)

A-12, # 1-9-71/A/12/b, Rishab Heights, Rukminipuri Ho A S Rao Nagar, Hyderabad, Telangana, India - 500062



Patient Name	: Mr. Kiran Kumar B	Age/Gender	: 49 Y/M
UHID/MR No.	: CASR.0000100543	OP Visit No	: CASROPV203286
Sample Collected on	:	Reported on	: 30-03-2023 13:33
LRN#	: RAD1962895	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 06153		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

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

Right kidney : 102x44mm Normal in size and shows small anechoic cortical cyst in the upper pole measuring **19x16mm**

Left kidney : 90x43mm Normal in size and shows small anechoic cortical cyst in the upper pole measuring 10x12mm

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

Prostate is normal in size and echo texture.No evidence of necrosis/calcification seen.

IMPRESSION:-Grade 1 Fatty Liver.

Bilateral Grade 2 Renal Parenchymal Changes (L>R) Small Cystic Lesions In Both Kidneys As Explained Above Advised **RFT** correlation.



Dr. PRAVEEN BABU KAJA Radiology

Patient Name	: Mr. Kiran Kumar B
UHID	: CASR.0000100543
Conducted By:	: Dr. T NAVEEN
Referred By	: SELF

Age OP Visit No Conducted Date : 49 Y/M : CASROPV203286 : 30-03-2023 13:05

2D-ECHO WITH COLOUR DOPPLER

Dimensions:	
Ao (ed)	3.2 CM
LA (es)	3.3 CM
LVID (ed)	5.4 CM
LVID (es)	3.7 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	1.1 CM
EF	59 %
%FD	31 %
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL

MITRAL -E: 0.9 m/sec A: 1.0 m/sec PJV- 0.8 m/sec AJV-1.0 m/sec

Patient Name	: Mr. Kiran Kumar B	Age	: 49 Y/M
UHID	: CASR.0000100543	OP Visit No	: CASROPV203286
Conducted By:	: Dr. T NAVEEN	Conducted Date	: 30-03-2023 13:05
Referred By	: SELF		

TJV- 0.6 m/sec

IMPRESSION;

NO CHAMBERS ENLARGEMENT.

NO RWMA.

GOOD LV/ RV FUNCTION.

GRADE 1 DIASTOLIC DYSFUNCTION.

NO MR/ AR/ TR.

NO CLOTS/ VEGETATION

NO PERICARDIAL EFFUSION.

Patient Name	: Mr. Kiran Kumar B	Age	: 49 Y/M
UHID	: CASR.0000100543	OP Visit No	: CASROPV203286
Conducted By:	: Dr. T NAVEEN	Conducted Date	: 30-03-2023 13:05
Referred By	: SELF		

Dr. T NAVEEN



Patient Name	: Mr. Kiran Kumar B	Age/Gender	: 49 Y/M
UHID/MR No.	: CASR.0000100543	OP Visit No	: CASROPV203286
Sample Collected on	:	Reported on	: 29-03-2023 18:00
LRN#	: RAD1962895	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 06153		

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. PRAVEEN BABU KAJA Radiology

Name:	Mr. Kiran Kumar B
Age/Gender:	49 Y/M
Address:	kapra
Location:	HYDERABAD, TELANGANA
Doctor:	
Department:	GENERAL
Rate Plan:	AS RAO NAGAR_03122022
Sponsor:	ARCOFEMI HEALTHCARE LIMITED

<u>Vitals:</u>

Data	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kas)	Body Fat Percentage (%)		Body Age (Years)		Waist Circum (cms)		Waist	Waist & Hip Ratio	User
29-03-2023 18:57		140/100 mmHg	20 Rate/min	98.6 F	182 cms	90 Kgs	%	%	Years	27.17	cms	cms	cms		AHLL09496

MR No: Visit ID: Visit Date: Discharge Date: Referred By: CASR.0000100543 CASROPV203286 29-03-2023 10:53

SELF





Τo,

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY						
NAME	KIRAN KUMAR BOLARAM					
DATE OF BIRTH	08-06-1973					
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	25-03-2023					
BOOKING REFERENCE NO.	22M157854100051122S					
SPOUSE DETAILS						
EMPLOYEE NAME	MS. GITTA MADHAVI LATHA					
EMPLOYEE EC NO.	157854					
EMPLOYEE DESIGNATION	BRANCH HEAD					
EMPLOYEE PLACE OF WORK	RAICHUR,UDAYNAGAR					
EMPLOYEE BIRTHDATE	29-05-1975					

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **21-03-2023** till **31-03-2023**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years)
	and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

Referred By	: SELF		
Reported By:	: Dr. MRINAL .	Conducted Date	: 29-03-2023 12:22
UHID	: CASR.0000100543	OP Visit No	: CASROPV203286
Patient Name	: Mr. Kiran Kumar B	Age	: 49 Y/M

ECG REPORT

Observation :-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 90 beats per minutes.
- 3. No pathological Q wave or ST changes seen.
- 4. Normal P,QRS waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement seen

Impression:

NORMAL SINUS RHYTHM.

T INVERSIONS IN V5,V6,

TO CORRELATE CLINICALLY.

----- END OF THE REPORT -----



Dr. MRINAL .