Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:35AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , *WHOLE BLOOD EDTA*

SIN No:BED230217048

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

GSTIN: 29AADCA0733E1Z3
Address: 22, 23, 24, 25/101/3, Sree Rama Layout, BNR Complex, OPP.RBI Layout, JP Nagar, 7th Phase, Bengaluru, Karnataka

1860 500 7788
www.apolloclinic.com

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:35AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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*				
HAEMOGLOBIN	16.1	g/dL	13-17	Spectrophotometer
PCV	48.70	%	40-50	Electronic pulse & Calculation
RBC COUNT	**5.6**	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	87	fL	83-101	Calculated
MCH	28.7	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	13.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	**11,900**	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	66.4	%	40-80	Electrical Impedance
LYMPHOCYTES	25.2	%	20-40	Electrical Impedance
EOSINOPHILS	**0.9**	%	1-6	Electrical Impedance
MONOCYTES	6.9	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	**7901.6**	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2998.8	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	107.1	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	821.1	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	71.4	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	391000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	06	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.
W.B.C: Are increased in number with predominance of neutrophils.
Platelets: Adequate and are seen in singles and clumps.
Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH NEUTROPHILIC

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:35AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method

LEUCOCYTOSIS.

SIN No:BED230217048

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

GSTIN: 29AADCA0733E1Z3
Address: 22, 23, 24, 25/101/3, Sree Rama Layout, BNR Complex, OPP.RBI Layout, JP Nagar, 7th Phase, Bengaluru, Karnataka

1860 500 7788
www.apolloclinic.com

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:35AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF HAEMATOLOGY

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	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

SIN No:BED230217048

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 12:53PM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 02:05PM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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*	**103**	mg/dL	70-100	GOD - POD

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:
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)*	**149**	mg/dL	70-140	GOD - POD

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 ,	4.6	%		HPLC

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 12:53PM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 02:05PM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
WHOLE BLOOD EDTA				
ESTIMATED AVERAGE GLUCOSE (eAG) , *WHOLE BLOOD EDTA*	85	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.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
3. 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.
4. 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.
5. 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.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 12:53PM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 02:05PM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method

SIN No:PLF02024850,PLP1367197,EDT230082846

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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	**213**	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	**155**	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	**36**	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	**177**	mg/dL	<130	Calculated
LDL CHOLESTEROL	**146**	mg/dL	<100	Calculated
VLDL CHOLESTEROL	**31**	mg/dL	<30	Calculated
CHOL / HDL RATIO	**5.92**		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.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method

SIN No:SE04476130

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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	**1.80**	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	**0.50**	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	**1.30**	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	**62**	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	41.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	122.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	**8.60**	g/dL	6.3-8.2	Biuret
ALBUMIN	5.00	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	**3.60**	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		0.9-2.0	Calculated

SIN No:SE04476130

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	24.80	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.80	mg/dL	3.5-8.5	Uricase
CALCIUM	9.90	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.00	mg/dL	2.5-4.5	PMA Phenol
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	5.0	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	106	mmol/L	98 - 107	Direct ISE

SIN No:SE04476130

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , *SERUM*	68.00	U/L	15-73	Glyclyclycine Nitoranalide

SIN No:SE04476130

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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)	1.50	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	9.93	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.750	µIU/mL	0.35-4.94	CMIA

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

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

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

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

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

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 10:12AM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 11:31AM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method

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:SPL23128353

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 01:49PM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 02:50PM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , *URINE*				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		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	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:UR2180756

Patient Name	: Mr.TANIKONDA MALLIKHARJUN	Collected	: 09/Sep/2023 08:43AM
Age/Gender	: 36 Y 0 M 30 D/M	Received	: 09/Sep/2023 01:49PM
UHID/MR No	: CMYS.0000057872	Reported	: 09/Sep/2023 02:50PM
Visit ID	: CMYSOPV117340	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 167186		

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 *****

Dr. PAVAN KUMAR M
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:UPP015457,UF009418