

Patient Name : Mr.NANDAKUMAR S	Collected : 26/Aug/2023 08:31AM
Age/Gender : 59 Y 9 M 3 D/M	Received : 26/Aug/2023 10:56AM
UHID/MR No : CTNA.0000202191	Reported : 26/Aug/2023 12:17PM
Visit ID : CTNAOPV181869	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : NS152999	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY	: Microscopic.
RBC MORPHOLOGY	: Predominantly normocytic normochromic RBC's noted.
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.
PLATELETS	: Adequate in number.
PARASITES	: No haemoparasites seen.
IMPRESSION	: Normocytic normochromic blood picture.
NOTE/ COMMENT	: Please correlate clinically.



SIN No:BED230203599

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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	13.1	g/dL	13-17	Spectrophotometer
PCV	37.90	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.4	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.2	fL	83-101	Calculated
MCH	29.8	pg	27-32	Calculated
MCHC	34.5	g/dL	31.5-34.5	Calculated
R.D.W	13.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,700	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	61.9	%	40-80	Electrical Impedence
LYMPHOCYTES	26.9	%	20-40	Electrical Impedence
EOSINOPHILS	2.3	%	1-6	Electrical Impedence
MONOCYTES	8.3	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2909.3	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1264.3	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	108.1	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	390.1	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	28.2	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT	177000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR				
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METHODOLOGY : Microscopic.

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WBC MORPHOLOGY : Normal in number, morphology and distribution. No abnormal cells seen.

PLATELETS : Adequate in number.

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PARASITES	: No haemoparasites seen.			
IMPRESSION	: Normocytic normochromic blood picture.			
NOTE/ COMMENT	: Please correlate clinically.			



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA

BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY



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Patient Name : Mr.NANDAKUMAR S	Collected : 26/Aug/2023 08:31AM
Age/Gender : 59 Y 9 M 3 D/M	Received : 26/Aug/2023 10:57AM
UHID/MR No : CTNA.0000202191	Reported : 26/Aug/2023 12:02PM
Visit ID : CTNAOPV181869	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 ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	100	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)	107	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 , WHOLE BLOOD EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) ,	103	mg/dL		Calculated

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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WHOLE BLOOD EDTA

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)



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DEPARTMENT OF BIOCHEMISTRY

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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	194	mg/dL	<200	CHO-POD
TRIGLYCERIDES	76	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	146	mg/dL	<130	Calculated
LDL CHOLESTEROL	130.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.2	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

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Test Name	Result	Unit	Bio. Ref. Range	Method
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Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



SIN No:SE04462894

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.89	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.75	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	38.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.20	g/dL	6.6-8.3	Biuret
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.57		0.9-2.0	Calculated



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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.89	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	29.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.70	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.60	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.80	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.7	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101–109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.00	U/L	<55	IFCC



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - 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)	0.92	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	6.66	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.849	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	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis

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DEPARTMENT OF IMMUNOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



SIN No:SPL23121388

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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.860	ng/mL	0-4	CLIA



SIN No:SPL23121388

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UHID/MR No : CTNA.0000202191	Reported : 26/Aug/2023 02:42PM
Visit ID : CTNAOPV181869	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		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		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/hpf	<10	MICROSCOPY
RBC	NIL	/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.



SIN No:UR2172661

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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - 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.MARQUESS RAJ
M.D,DipRCPath,D.N.B(PATH)
Consultant Pathologist



DR.R.SRIVATSAN
M.D.(Biochemistry)



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



Patient Name : Mr. NANDAKUMAR S

Age/Gender : 59 Y/M

UHID/MR No. : CTNA.0000202191

OP Visit No : CTNAOPV181869

Sample Collected on :

Reported on : 28-08-2023 09:52

LRN# : RAD2082428

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : NS152999

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

Normal Study.



Dr. RASHEED ARAFATH HIDAYATHULLAH
MBBS, DNB (RD)
Radiology



Apollo

PHYSICAL EXAMINATION

NAME	Mrs Nandakumars			DATE OF CHECK UP
AGE / GENDER	59 yrs / m.		MALE/FEMALE	
HEIGHT	165	Cm		
WEIGHT	62	Kgs		
BLOOD PRESSURE	140/80	Mm/Hg		
BMI	29.3			
WAIST				
HIP				
WAIST IF RATION				
RESPIRATORY RATE	18			
PULSE	60-	Min		
CHEST	INSPIRATION			
	EXPIRATION			

OPHTHAL EXAMINATION

COLOUR VISION

VISION	FAR VISION RIGHT	FAR VISION LEFT	NEAR VISION RIGHT	NEAR VISION LEFT	RIGHT	LEFT
WITHOUT GLASS						
WITH GLASS						
REMARKS IF ANY						

APOLLO MEDICAL CENTRE
114, Sivaprakasam Street, Pondy Bazaar,
T. Nagar, Chennai - 600 017.
Phone: 244-2424 1066 / 95001 66355

OPHTHALMOLOGY

Name	MANDAKUMAR.S	Date	26/08/23
Age	59	UHID No.	202191
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female			

OPHTHAL FITNESS CERTIFICATE

	RE	LE
DV-UCVA	: (6/18)	(6/4)
DV-BCVA	:	
NEAR VISION	: 2.50N ⁶	2.50N ⁶
ANTERIOR SEGMENT	:	
IOP	:	
FIELDS OF VISION	:	
E O M	:	
COLOUR VISION	: PLO	PLO
FUNDUS	:	
IMPRESSION	:	
ADVICE	: None on (70%)	

APOLLO MEDICAL CENTRE
11/4, Sivaprakasam Street, Pondy Bazaar,
T. Nagar, Chennai - 600 017.
Phone: 044 - 2434 1066 / 95001 88355

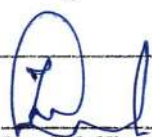
This is to certify that I have conducted the clinical examination

of Mr. Manjumar. S, 59 y/m

on 28/08/2023

After reviewing the medical history and on clinical examination it has been found that He / She is

	Tick
<ul style="list-style-type: none"> Medically Fit 	
<ul style="list-style-type: none"> Fit with restrictions / recommendations <p>Though following restrictions have been revealed, in my opinion, these are not Impediments to the job.</p> <ol style="list-style-type: none"> <u>Boutelind dyslipidaemia</u> <p>However the employee should follow the advice/medication that has been Communicated to him/her.</p> <p>Review after _____</p>	✓
<ul style="list-style-type: none"> Currently Unfit. Review after _____ _____recommended 	
<ul style="list-style-type: none"> Unfit 	

Dr. 
 Medical Officer
 The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes.

Dr. HARI. K, MBBS.,
 Apollo Family Physician
 Reg. No. 151903

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | Email ID: enquiry@apolloht.com

APOLLO CLINICS NETWORK (AMBILNADU)

Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name : Mr. NANDAKUMAR S Age : 59 Y/M
UHID : CTNA.0000202191 OP Visit No : CTNAOPV181869
Conducted By: : Dr. SRIMATHY VENKATESH Conducted Date : 28-08-2023 08:22
Referred By : SELF

CARDIOLOGY

CARDIAC STRESS TEST – (TMT)

Angina Pectoria:
NO

Previous MI:
NO

PTCA:
NO

CABG:
NO

HTN:
NO

DM:
NO

Smoking:
NO

Obesity:
NO

Lipidemia:
NO

Resting ECG Supine:
SINUS RHYTHM, NORMAL ECG

Standing:
SINUS RHYTHM, NORMAL ECG

Protocol Used:
BRUCE

Monitoring Leads:

Patient Name : Mr. NANDAKUMAR S Age : 59 Y/M
UHID : CTNA.0000202191 OP Visit No : CTNAOPV181869
Conducted By: : Dr. SRIMATHY VENKATESH Conducted Date : 28-08-2023 08:22
Referred By : SELF

12 LEADS

Grade Achieved:
100%

% HR / METS:
11.70

Reason for Terminating Test:
ACHIEVED MHR

Total Exercise Time:
09.30

Symptoms and ECG Changes during Exercise:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

0 mts:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

3 mts:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

6 mts:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

INTERPRETATION:

Rhythm:
NORMAL

S.T. Segment :
NORMAL

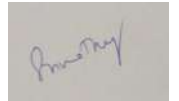
III Blood Pressure Response :
NORMAL

Patient Name : Mr. NANDAKUMAR S Age : 59 Y/M
UHID : CTNA.0000202191 OP Visit No : CTNAOPV181869
Conducted By: : Dr. SRIMATHY VENKATESH Conducted Date : 28-08-2023 08:22
Referred By : SELF

IV Fitness Response :
GOOD

Impression:
Cardiac stress analysis is NEGATIVE for inducible myocardial ischaemia
at good work load and 100% of maximum heart rate response.

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



Dr.
SRIMATHY
VENKATESH

Patient Name : Mr. NANDAKUMAR S

Age/Gender : 59 Y/M

UHID/MR No. : CTNA.0000202191

OP Visit No : CTNAOPV181869

Sample Collected on :

Reported on : 26-08-2023 15:21

LRN# : RAD2082428

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : NS152999

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of focal or diffuse pathology.
Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.
Wall thickness appear normal.

Pancreas and spleen appear normal. Spleen measures 9.3 cms.
Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory.
There is no evidence of sub diaphragmatic pathology or pleural effusion.
Aorta and IVC appear normal.

Right kidney measures 9.9 cms.
Left kidney measures 10.3 cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Prostate measures 4.7 x 3.0 x 2.8 cms (volume 21 cc) and shows normal echopattern.
Seminal vesicles appear normal.

Bladder is normal in contour. Both iliac fossae appear normal.

IMPRESSION:

NORMAL STUDY.

Patient Name : Mr. NANDAKUMAR S

Age/Gender : 59 Y/M



Dr. RASHEED ARAFATH HIDAYATHULLAH
MBBS, DNB (RD)
Radiology

Name: Mr. NANDAKUMAR S
Age/Gender: 59 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. VASANTHI SACHIDHANAND

MR No: CTNA.0000202191
Visit ID: CTNAOPV181869
Visit Date: 26-08-2023 08:24
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mr. NANDAKUMAR S
Age/Gender: 59 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. HARI K

MR No: CTNA.0000202191
Visit ID: CTNAOPV181869
Visit Date: 26-08-2023 08:24
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. NANDAKUMAR S
Age/Gender: 59 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. REKHA SANJAY

MR No: CTNA.0000202191
Visit ID: CTNAOPV181869
Visit Date: 26-08-2023 08:24
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. NANDAKUMAR S
Age/Gender: 59 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. T DEVI SHANMUGA PRIYA

MR No: CTNA.0000202191
Visit ID: CTNAOPV181869
Visit Date: 26-08-2023 08:24
Discharge Date:
Referred By: SELF

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:13	Beats/min	140/80 mmHg	Rate/min	F	165 cms	80 Kgs	%	%	Years	29.38	cms	cms	cms		AHLL09366

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:13	Beats/min	140/80 mmHg	Rate/min	F	165 cms	80 Kgs	%	%	Years	29.38	cms	cms	cms		AHLL09366

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:13	Beats/min	140/80 mmHg	Rate/min	F	165 cms	80 Kgs	%	%	Years	29.38	cms	cms	cms		AHLL09366

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
26-08-2023 14:13	Beats/min	140/80 mmHg	Rate/min	F	165 cms	80 Kgs	%	%	Years	29.38	cms	cms	cms		AHLL09366

**Health Check up Booking Confirmed Request(bobE44411),Package Code-PKG10000305,
Beneficiary Code-35282**

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

Fri 18-08-2023 15:57

To:nandakumar.s@bankofbaroda.co.in <nandakumar.s@bankofbaroda.co.in>

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



Mediwheel
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear MR. S NANDAKUMAR,

Please find the confirmation for following request.

Booking Date : 17-08-2023

Package Name : Arcofemi MediWheel Full Body Annual Plus Male Above 50 2D
ECHO (Metro)

Name of Diagnostic/Hospital : Apollo Clinic - T Nagar

Address of Diagnostic/Hospital : Apollo Clinic, Door No 11, 4, Sivaprakasam St, opposite to Brilliant Tutorial, Pondy Bazaar, Parthasarathi Puram, T Nagar - 600017

Contact Details : (044) 24341066/24335315 - 16 - 18 - 19 /9500166355

City : Chennai

State : Tamil Nadu

Pincode : 600017

Appointment Date : 26-08-2023

Confirmation Status : Confirmed

Preferred Time : 8:00am-8:30am

Comment : APPOINTMENT TIME 9:00AM

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.



बैंक ऑफ बड़ोदा
Bank of Baroda

नाम
Name

S. NANDAKUMAR

कर्मचारी कूट नं : 152999
E.C. No.

जारीकर्ता प्राधिकारी
Issuing Authority



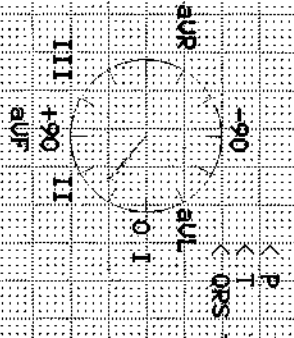
धारक के हस्ताक्षर
Signature of Holder

Male

AGE: 59

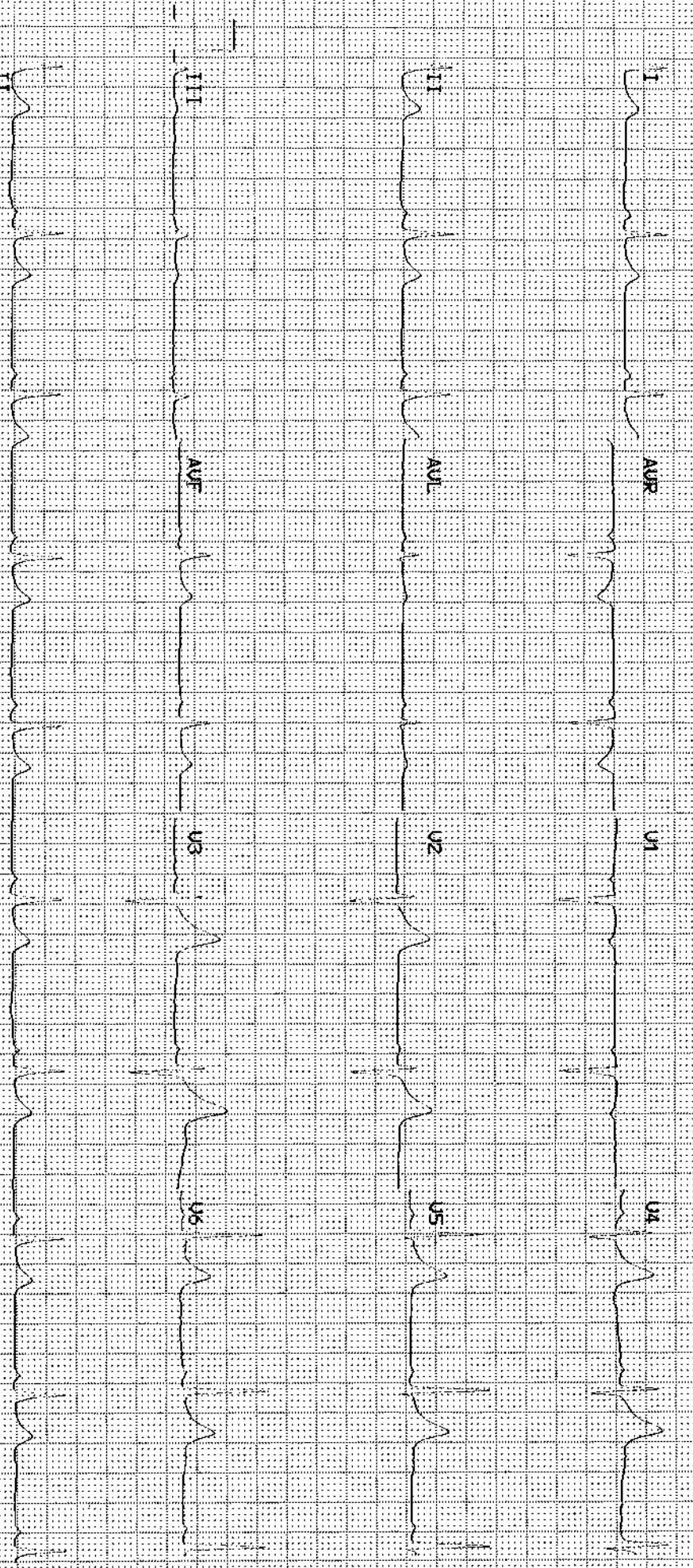
Measurement Results:

QRS	90 ms
QT/QTcB	412 / 390 ms
PR	142 ms
P	100 ms
RR/PP	1084 / 1110 ms
P/QRS/T	38 / 42 / 41 degrees



Interpretation:
 12SL - Interpretation:
 Sinus bradycardia
 otherwise normal ECG

Unconfirmed report.



Patient Name	: Mr. NANDAKUMAR S	Age	: 59 Y/M
UHID	: CTNA.0000202191	OP Visit No	: CTNAOPV181869
Reported By:	: Dr. HARI K	Conducted Date	: 26-08-2023 14:57
Referred By	: SELF		

ECG REPORT

Impression:

SINUS BRADYCARDIA

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



Dr. HARI K