

Name

: Mr. Bharath Darla Venkateshwarlu

Age: 37 Y

Sex: M

Address: Bangalore

Plan :

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

UHID:CINR.0000163192

OP Number: CINROPV219866

Bill No :CINR-OCR-94216

Date : 24.02.2024 08:28

Sno	Serive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - I	
	GAMMA GLUTAMYL TRANFERASE (GGT)	
يُسس،	2 D ECHO	1110
	LIVER FUNCTION TEST (LFT)	
	GLUCOSE, FASTING	THE PARTY OF THE P
	HEMOGRAM + PERIPHERAL SMEAR	
Ć	DIET CONSULTATION	
	COMPLETE URINE EXAMINATION	
8	URINE GLUCOSE(POST PRANDIAL)	
ç	PERIPHERAL SMEAR	
	ECG	
11	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
<u>j</u> 2	DENTAL CONSULTATION	
143	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
	URINE GLUCOSE(FASTING)	
15	HINTE, GLYCATED HEMOGLOBIN	
46	X-RAY CHEST PA - 10	
17	ENT CONSULTATION	
18	FITNESS BY GENERAL PHYSICIAN	
19	BŁOOD GROUP ABO AND RH FACTOR	
	LIPID PROFILE	
24	BODY MASS INDEX (BMI)	
	OPTHAL BY GENERAL PHYSICIAN	
-23	ULTRASOUND - WHOLE ABDOMEN — 3	
	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

Audio - 708/_



Mrs. Bharath Darla.



374 JH 12. Peathona. Eut Surgeon.

Height:	161	Weight:	75.4	BMI:	29.1	Waist Circum: 104
Temp:	04.80k	Pulse :	68 bln.	Resp :	18b/n	B.P: 100 60

General Examination / Allergies History

Clinical Diagnosis & Management Plan

B/ (ests / The Infact-Nose! DIVS to (B) Somatic) Mulsa- Normal.

Throat (D) Junp's Chrically ear, nose, throat-examination without normal. Lan Es

> Dr. PRATHIMA NEBS, M.S., Reg No. 69241

Follow up date:

Doctor Signature

Phone: (080) 2521 4614/15

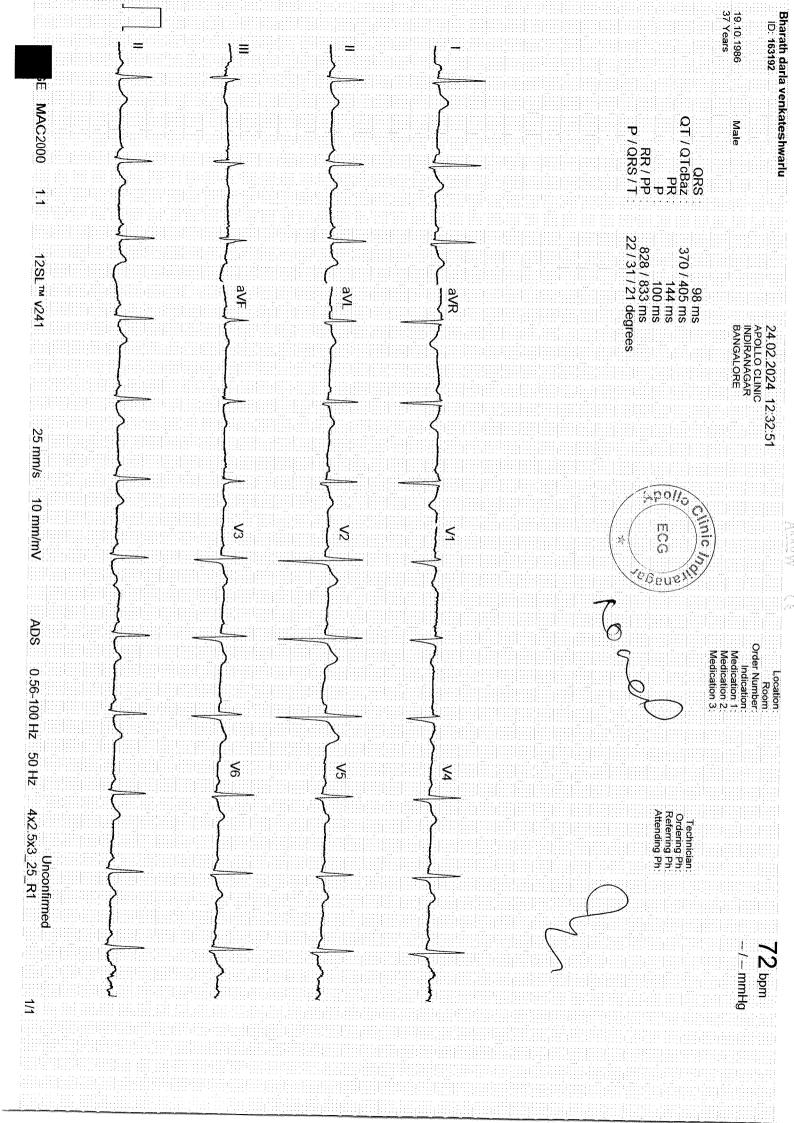
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: www.apolloclinic.com







NAME: MR BHARATH D V	AGE/SEX: 37Y/M	OP NUMBER: 163192
Ref By : SELF	DATE: 24-02-2024	

M mode and doppler measurements:

CM	CM	M/sec	,
AO: 2.7	IVS(D): 0.9	MV: E Vel: 0.5	A Vel : 0.4
LA: 2.9	LVIDD(D): 4.2	AV Peak: 0.8	
	LVPW(D): 1.1	PV peak: 0.7	
	IVS(S): 1.3		
·	LVID(S): 2.8		
	LVEF: 60%		
	LVPW(S): 1.2		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal .
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium: Health and Lifestyle Limited	Normal

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016. Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com





IVC:	Normal
Others	

IMPRESSION:

Normal cardiac chamber and valves

No Regional wall motion abnormality

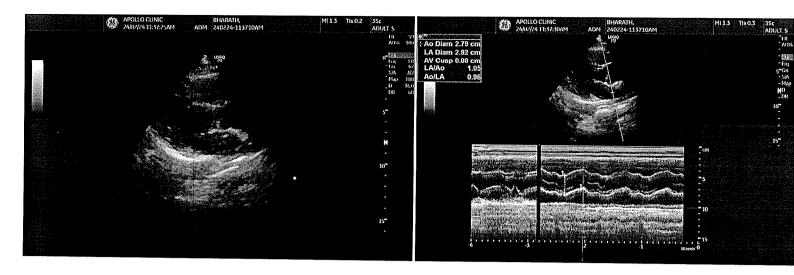
Normal PA Pressure

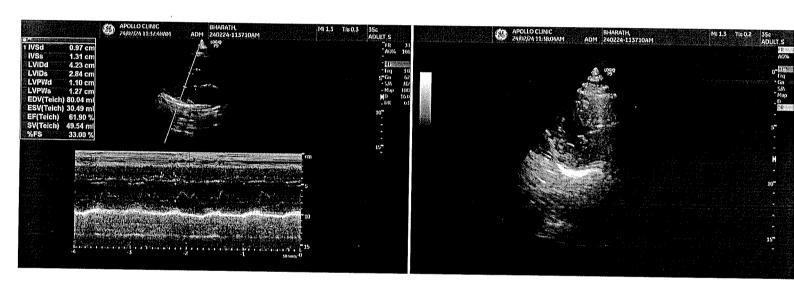
No clot/vegetation/pericardial effusion

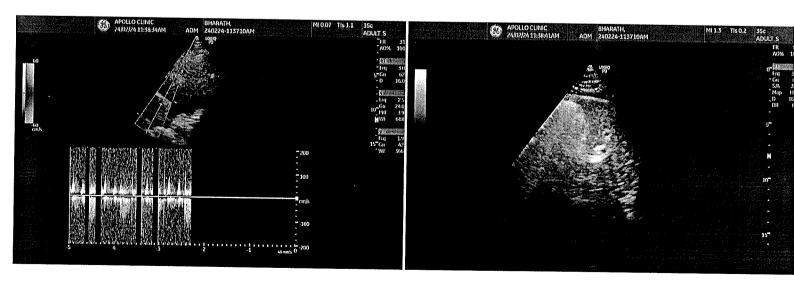
Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST







Health Check up Booking Confirmed Request(bobS10422), Package Code-PKG10000366, Beneficiary Code-300539

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

Wed 21-02-2024 16:17

To:p.padmavathi.89@hmail.com < p.padmavathi.89@hmail.com >

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



011-41195959

Dear MRS. PADMAVATHI P.

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 20-02-2024

Hospital Package

Name

: Mediwheel Full Body Annual Plus

Patient Package

Name

: Mediwheel Full Body Health Checkup Male Below 40

Name of

Diagnostic/Hospital

: Apollo Clinic

Address of

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

Diagnostic/Hospital- road, HAL 2nd stage, Indiranagar - 560038

City : Bangalore

State

Pincode

: 560038

Appointment Date

: 24-02-2024

Confirmation Status : Booking Confirmed

Preferred Time

: 8:00am

Booking Status

: Booking Confirmed

Member Information				
Gender Age Gender				
Bharat	37 year	Male		

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

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

For Women:

Pregnant Women or those suspecting are advised not to undergo any X-Ray test.





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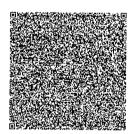


ಭಾರತೀಯ ವಿಶಿಷ ಗುರುತು ಪ್ರಾಧಿಕಾರ Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ Enrolment No.: 0804/15833/75476

ಭಾರತ್ ದಾರ್ಳಾ ವೆಂಕಟೇಶ್ವರಲು Bharath Darla Venkateshwarlu S/O Darla Venkateshwarlu #04 Sri Venkateshwara Nilayam Defence Colony Kanaka Layout Medahalli Old Madras Road Behind Tirumala Weigh Bridge Bangalore North Virgonagar Bangalore Karnataka - 560049 9986803838

Signature yalid



ನಿಮ್ಮ ಅಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. : 6970 4214 0500

VID: 9139 6956 6624 7263 ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ Government of India



Download Date: 23/12/2019

ಭಾರತ್ ದಾರ್ಳಾ ವೆಂಕಟೇಶ್ವರಲು Bharath Darla Venkateshwarlu ಜನ ದಿನಾಂಕ/DOB: 19/10/1986 ಪ್ರಶುಷ/ MALE

Issue Date: 27/06/2019

6970 4214 0500

VID: 9139 6956 6624 7263

ಆಧಾರ್, ನನ್ನ ಗುರುತು







ಮಾಹಿತಿ

- ಆಧಾರ್ ಗುರುತಿನ ಪುರಾವೆಯೇ ಹೊರತು ಪೌರತ್ವದಲ್ಪ
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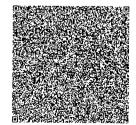
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ವಿಳಾಸ:

ವಳಾನ: 5/O ದಾರಲ ವೆಂಕಟೇಶ್ವರಲು, #0೪ ತ್ರೀ ವೆಂಕಟೇಶ್ವರ ನಿಲಯಂ, ಡಿಫೆನ್ಸ್ ಕಾಲೋನಿ ಕನಕ ಲೇಔಟ್, ತಿರುಮಲ ವೇಯ ಬ್ರಿಡ್ಗೆ ಹಿಂದೆ, ಮೆಡಹಳ್ಳಿ ಒಲ್ಲ್ ಮಧ್ರಾಸ್ ರೋಡ್, ಬೆಂಗಳೂರು ಉತ್ತರ, ಬೆಂಗಳೂರು, ಕರ್ನಾಟಕ - 560049

Address: S/O Darla Venkateshwarlu, #04 Sri Venkateshwara Nilayam, Defence Colony Kanaka Layout, Behind Tirumala Weigh Bridge, Medahalli Old Madras Road, Bangalore North, Bangalore, Karnataka - 560049

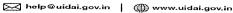


6970 4214 0500

VID: 9139 6956 6624 7263









Patient Name : Mr. Bharath Darla Venkateshwarlu Age/Gender : 37 Y/M

 UHID/MR No.
 : CINR.0000163192
 OP Visit No
 : CINROPV219866

 Sample Collected on
 : 24-02-2024 17:36

Ref Doctor : SELF

Emp/Auth/TPA ID : 8050319575

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

GALLBLADDER: Moderately distended.

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

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

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

Right kidney measures 9.7x5.2 cm.

Left kidney measures 10.1x5.2 cm.

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

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

No free fluid is seen.

IMPRESSION:

NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.

Dr. RAMESH G
MBBS DMRD
RADIOLOGY



Patient Name : Mr. Bharath Darla Venkateshwarlu Age/Gender : 37 Y/M

UHID/MR No. : CINR.0000163192 **OP Visit No**

: CINROPV219866 Sample Collected on : 24-02-2024 18:40 Reported on

LRN# : RAD2246365 Specimen

Ref Doctor : SELF Emp/Auth/TPA ID : 8050319575

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. RAMESH G MBBS DMRD RADIOLOGY







Patient Name : Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender : 37 Y 4 M 5 D/M UHID/MR No : CINR.0000163192 Visit ID : CINROPV219866

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 8050319575 Collected : 24/Feb/2024 08:49AM

Received : 24/Feb/2024 10:09AM : 24/Feb/2024 10:50AM Reported

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
IEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15	g/dL	13-17	Spectrophotometer
PCV	44.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.89	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	90.1	fL	83-101	Calculated
MCH	30.8	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,180	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	56.3	%	40-80	Electrical Impedance
LYMPHOCYTES	37.7	%	20-40	Electrical Impedance
EOSINOPHILS	1	%	1-6	Electrical Impedance
MONOCYTES	4.9	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4605.34	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3083.86	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	81.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	400.82	Cells/cu.mm	200-1000	Calculated
BASOPHILS	8.18	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.49		0.78- 3.53	Calculated
PLATELET COUNT	331000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

Page 1 of 14

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

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



SIN No:BED240047860
THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- BRL BANGALORE
This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:
323/100/123, Doddathangur Villa

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telan www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK









: Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender

: 37 Y 4 M 5 D/M

UHID/MR No

: CINR.0000163192

Visit ID

: CINROPV219866

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 8050319575 Collected

: 24/Feb/2024 08:49AM

Received

: 24/Feb/2024 10:09AM

Reported

: 24/Feb/2024 10:50AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Page 2 of 14

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

SIN No:BED240047860
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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:
323/100/123, Doddathangur Villa

Dr Priya Murthy

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

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telar www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744









: Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender

: 37 Y 4 M 5 D/M

UHID/MR No Visit ID

: CINR.0000163192

Ref Doctor

: CINROPV219866

Emp/Auth/TPA ID

: Dr.SELF : 8050319575 Collected

: 24/Feb/2024 08:49AM

Received

: 24/Feb/2024 10:09AM

Reported Status

: 24/Feb/2024 12:22PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	0			Microplate Hemagglutination	
Rh TYPE	Positive			Microplate Hemagglutination	

Page 3 of 14

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

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Address:
323/100/123, Doddathangur Villa

Dr Priya Murthy

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

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telan www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744









: Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender UHID/MR No : 37 Y 4 M 5 D/M : CINR.0000163192

Visit ID

: CINROPV219866

Ref Doctor Emp/Auth/TPA ID · Dr SELE : 8050319575

Status

: 24/Feb/2024 08:49AM

Received

: 24/Feb/2024 11:14AM

Reported

Collected

: 24/Feb/2024 12:16PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING, NAF PLASMA	101	mg/dL	70-100	HEXOKINASE

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
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	104	mg/dL	70-140	HEXOKINASE

Comment:

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

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN), I	VHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC

Page 4 of 14



DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

SIN No:EDT240021389

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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Patient Name : Mr.BHARATH DARLA VENKATESHWARLU

: CINROPV219866

Age/Gender : 37 Y 4 M 5 D/M UHID/MR No : CINR.0000163192

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 8050319575 Collected : 24/Feb/2024 08:49AM

Received : 24/Feb/2024 11:14AM Reported : 24/Feb/2024 12:16PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF BIOCHEMISTRY

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

ESTIMATED AVERAGE GLUCOSE (eAG)	111	mg/dL	Calculated

Comment:

Visit ID

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)

Page 5 of 14



DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

SIN No:EDT240021389

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telanı, www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK









Patient Name : Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender : 37 Y 4 M 5 D/M
UHID/MR No : CINR.0000163192
Visit ID : CINROPV219866

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 8050319575 Collected : 24/Feb/2024 08:49AM

Received : 24/Feb/2024 11:50AM Reported : 24/Feb/2024 12:56PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	207	mg/dL	<200	CHO-POD
TRIGLYCERIDES	70	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	58	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	149	mg/dL	<130	Calculated
LDL CHOLESTEROL	134.7	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.56		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

Page 6 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04639715

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APOLLO CLINICS NETWORK









: Mr.BHARATH DARLA VENKATESHWARLU

Age/Gender

: 37 Y 4 M 5 D/M

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DEPARTMENT OF BIOCHEMISTRY

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

Page 7 of 14



DR.SHIVARAJA SHETTY
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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	0.43	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.35	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	50.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.37	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.93	g/dL	2.0-3.5	Calculated
A/G RATIO	1.49		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI .• Disproportionate increase in AST, ALT compared with ALP. Bilirubin may be elevated.
- AST: ALT (ratio) In case of hepatocellular injury AST: ALT > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons's diseases, Cirrhosis, but the increase is usually not >2.
- 2. Cholestatic Pattern:
- ALP Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated. ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.
- 3. Synthetic function impairment: Albumin- Liver disease reduces albumin levels. Correlation with PT (Prothrombin Time) helps.

Page 8 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
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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
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT), SEF	RUM		
CREATININE	0.76	mg/dL	0.67-1.17	Jaffe's, Method
UREA	30.80	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	14.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.35	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	5.31	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	108	mmol/L	101–109	ISE (Indirect)

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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
GAMMA GLUTAMYL	37.00	U/L	<55	IFCC
TRANSPEPTIDASE (GGT), SERUM				

Page 10 of 14



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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	0.9	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.50	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.036	μIU/mL	0.34-5.60	CLIA

Comment:

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	Т3	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
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

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SIN No:SPL24031459

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Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telanı, www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK









: Mr.BHARATH DARLA VENKATESHWARLU

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Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Page 12 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24031459

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Reported : 24/Feb/2024 05:37FM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT 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

Page 13 of 14

Dr. Chinki Anupam M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist



SIN No:UR2289992

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









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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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Result/s to Follow: PERIPHERAL SMEAR

Page 14 of 14

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

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

SIN No:UF010703

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