

Patient Name : Mr.PANKAJ N KERKAR
Age/Gender : 35 Y 3 M 28 D/M
UHID/MR No : STAR.0000055432
Visit ID : STAROPV58162
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 88516

Collected : 30/Mar/2023 09:11AM
Received : 30/Mar/2023 11:48AM
Reported : 30/Mar/2023 01:30PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

Methodology : Microscopic

RBC : Hypochromasia (+), Microcyte (+), Mild Anisocyte

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

Platelets : Adequate in Number

Parasites : No Haemoparasites seen

IMPRESSION : Predominantly hypochromic microcytic blood picture, mild anisocytosis.

Note/Comment : Please Correlate clinically



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DEPARTMENT OF HAEMATOLOGY

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

HAEMOGLOBIN	9.3	g/dL	13-17	Spectrophotometer
PCV	30.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	3.93	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	78	fL	83-101	Calculated
MCH	23.8	pg	27-32	Calculated
MCHC	30.6	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,200	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	58	%	40-80	Electrical Impedance
LYMPHOCYTES	34	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	06	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3016	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1768	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	104	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	312	Cells/cu.mm	200-1000	Electrical Impedance

PLATELET COUNT	206000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-15	Modified Westergren

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SIN No:BED230080500

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:

156, Famous Cine Labs, Behind Everest Building, Tardeo (Mumbai Central), Mumbai, Maharashtra
Ph: 022 4332 4500

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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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Patient Name : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 03:12PM
UHID/MR No : STAR.0000055432	Reported : 30/Mar/2023 06:07PM
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD
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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 HOURS , NAF PLASMA	88	mg/dL	70-140	GOD - POD
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Comment:

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

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

Ref: Marks medical biochemistry and clinical approach

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	114	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

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

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	173	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	182	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	45	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	128	mg/dL	<130	Calculated
LDL CHOLESTEROL	91.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	36.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.84		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

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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Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.04	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.55	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	28	U/L	21-72	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	39.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	102.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.30	g/dL	6.3-8.2	BIURET METHOD
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	1.20	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	18.30	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	8.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	10.30	mg/dL	3.5-8.5	Uricase
CALCIUM	9.20	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.70	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	96	mmol/L	98 - 107	Direct ISE



SIN No:SE04336185

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	18.00	U/L	15-73	Glycylglycine Nitoranalide



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Visit ID : STAROPV58162	Status : Final Report
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DEPARTMENT OF IMMUNOLOGY

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

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

TRI-IODOTHYRONINE (T3, TOTAL)	1.36	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	8.61	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	2.930	µIU/mL	0.25-5.0	ELFA

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 hyperthyroidism, 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



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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	SLIGHTLY HAZY		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.030		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	NEGATIVE		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	4-6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***



DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



Dr.Sandip Kumar Banerjee
M.B.B.S.,M.D(PATHOLOGY),D.P.B
Consultant Pathologist



SIN No:UR2088730

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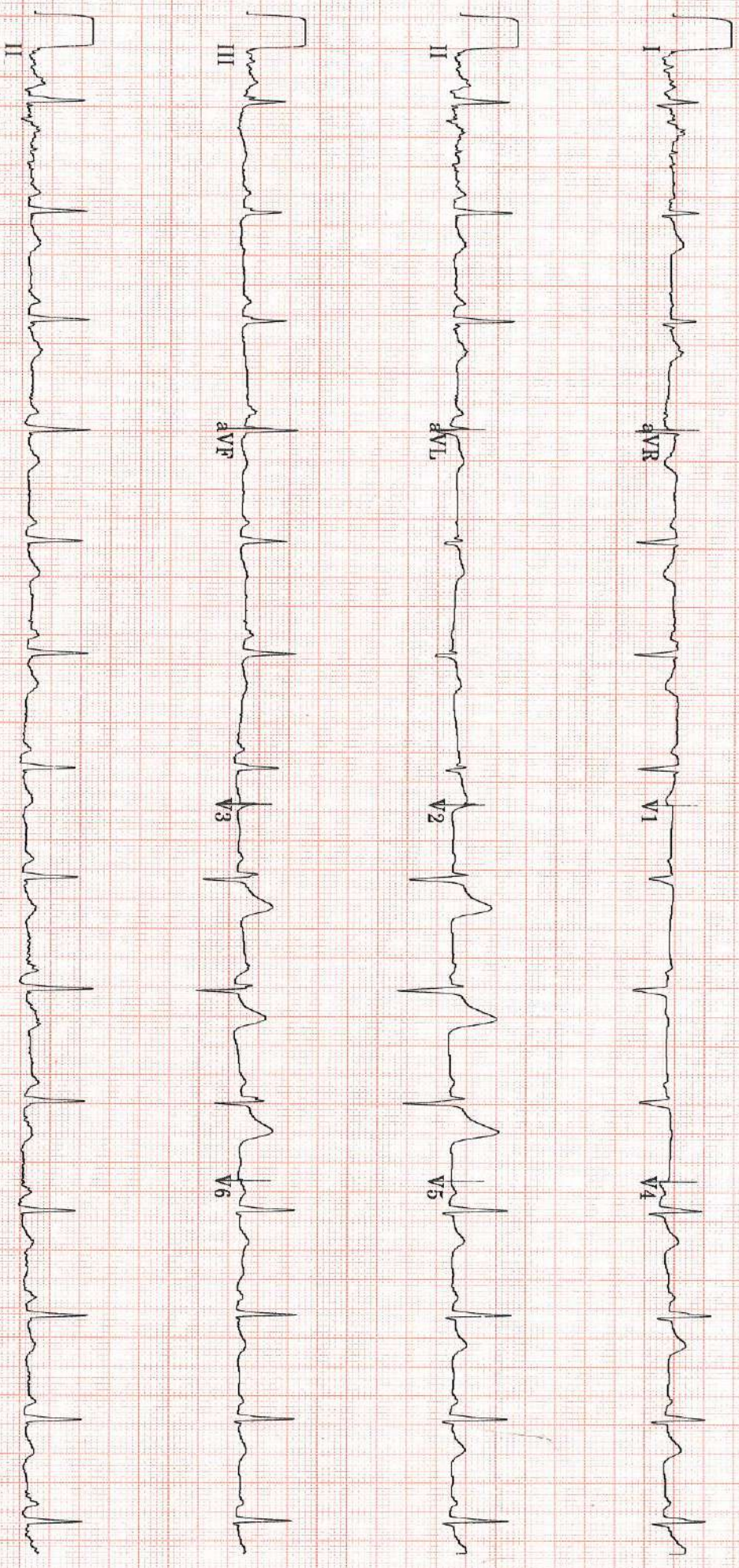
KERKAR, PANKAJ
ID: 00005432

30-Mar-2023
12:25:18

12 LEAD REPORT

82bpm
BP: 110/80
PRETEST
SUPINE
1:05

APOLLO SPECTRA TARDEO MUMBAI
BRUCE
** *mph
** *%
%



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46 4 by 2.5s + 1 rhythm Id MAC55 009C

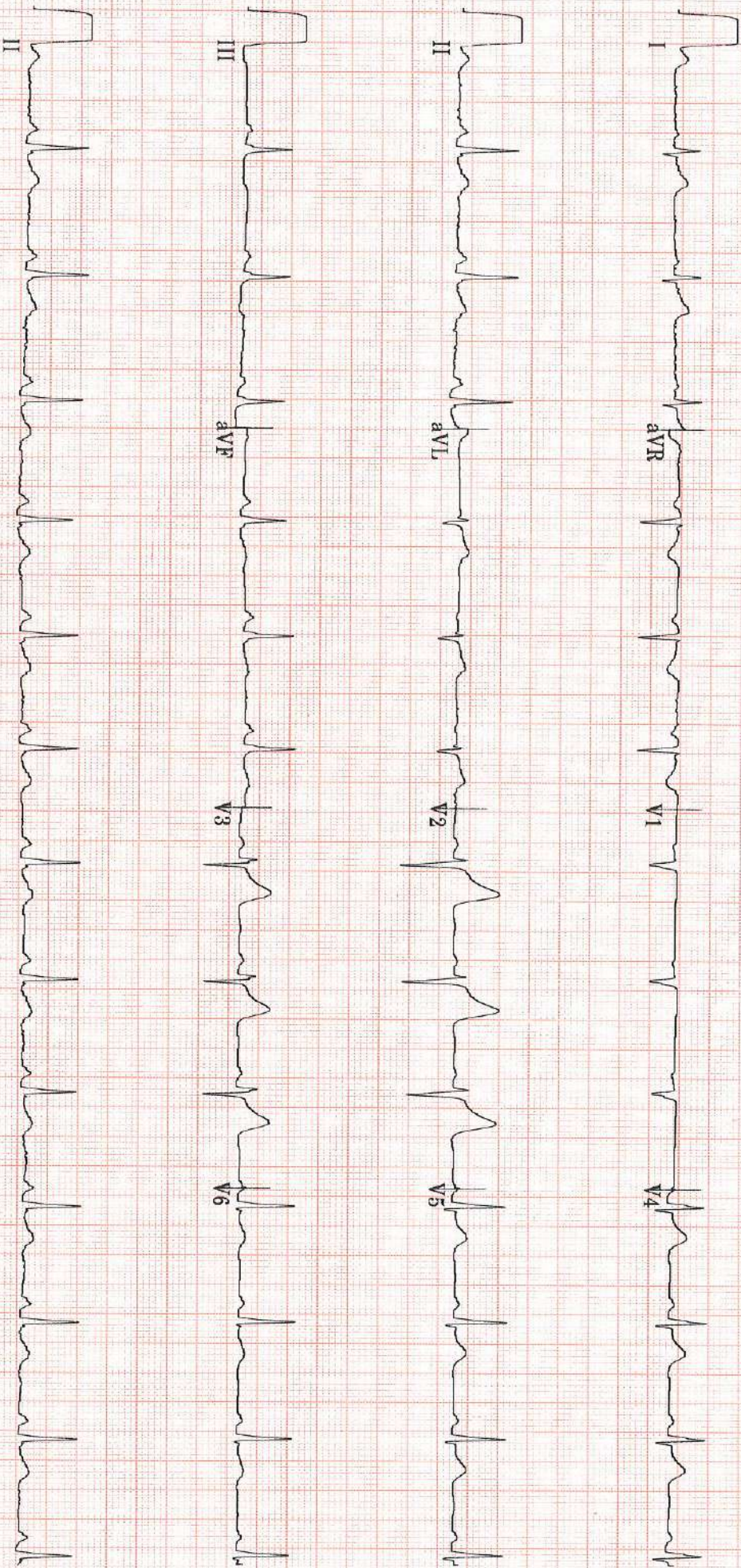
KERKAR, PANKAJ
ID: 000055432

30-Mar-2023
12:25:32

12 LEAD REPORT

79bpm
PRETEST
STANDING
1:19

APOLLO SPECTRA TARDEO MUMBAI
BRUCE
***mph
***%



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46 4 by 2.5s + 1 rhythm Id MAC55 009C

12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

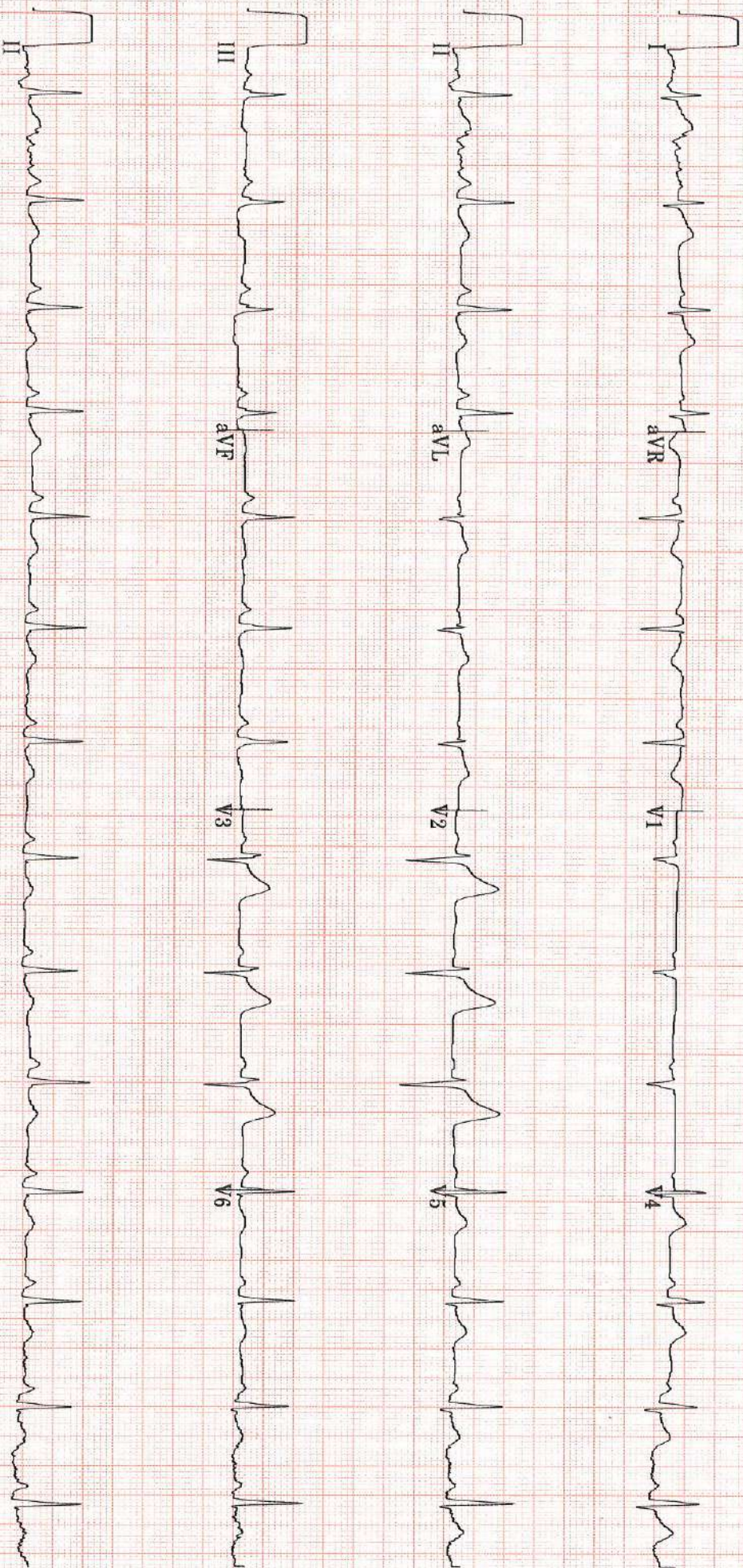
KERKAR, PANKAJ
ID: 000054432

84bpm

PRETEST
HYPERVENT

BRUCE
** *mph
** *%
1:37

30-Mar-2023
12:25:50



KERRAR, PANKAJ
ID: 000055432

30-Mar-2023
12:28:45

LINKED MEDIANS REPORT

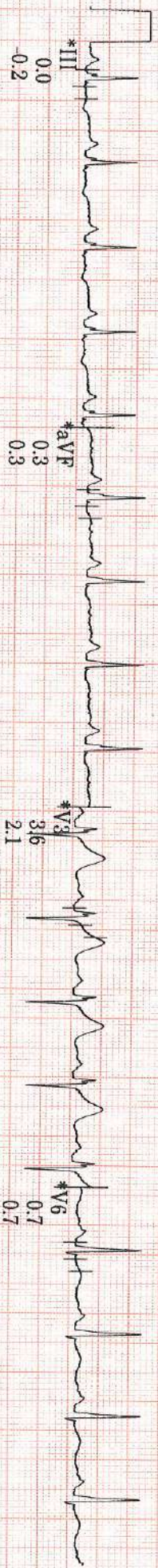
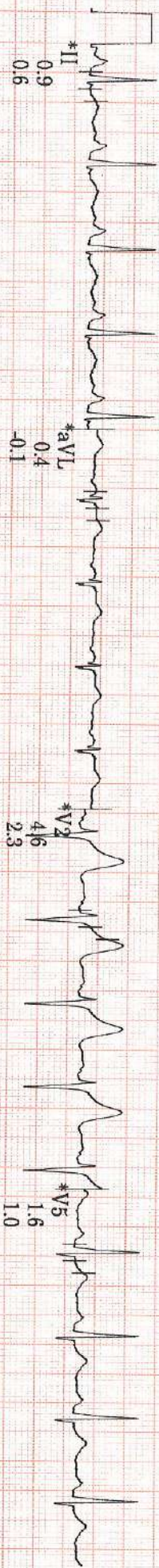
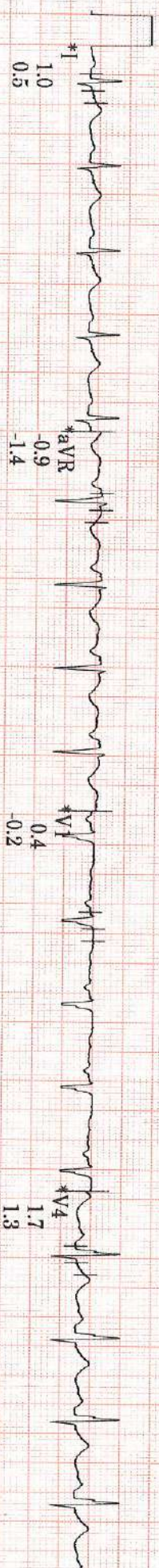
109bpm

EXERCISE
STAGE 1
2:48

APOLLO SPECTRA TARDEO MUMBAI
BRUCE
1.7mph
10.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S 50Hz HR 46
MAC55 009C

KERKAR, PANKAJ
ID: 000055432

30-Mar-2023
12:31:45

LINKED MEDIANS REPORT

APOLLO SPECTRA TARDEO MUMBAI

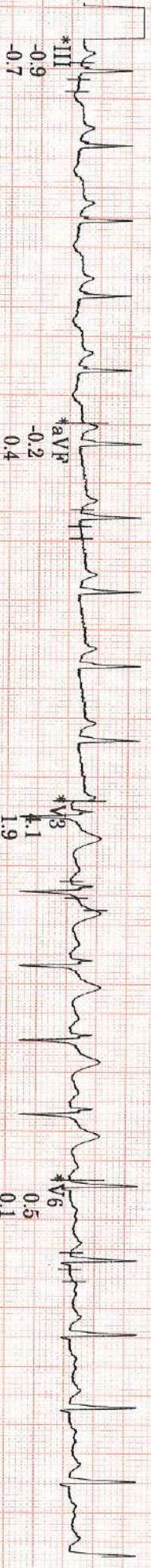
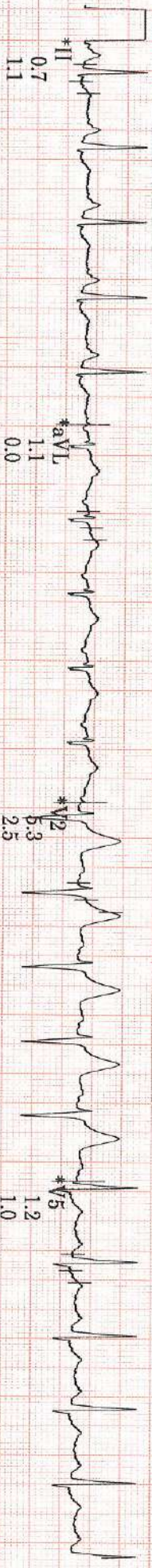
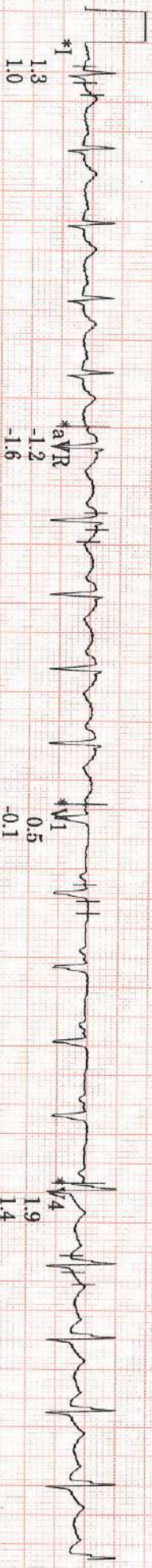
122bpm

EXERCISE
STAGE 2
5:48

BRUCE
2.5mph
12.0%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



40 Hz

25.0 mm/s

10.0 mm/mV

A-H S 50Hz HR 46

* Computer Synthesized Rhythm

MAC55 009C

KERKAR, PANKAJ
ID: 00005432

30-Mar-2023
12:34:45

LINKED MEDIANS REPORT

153bpm

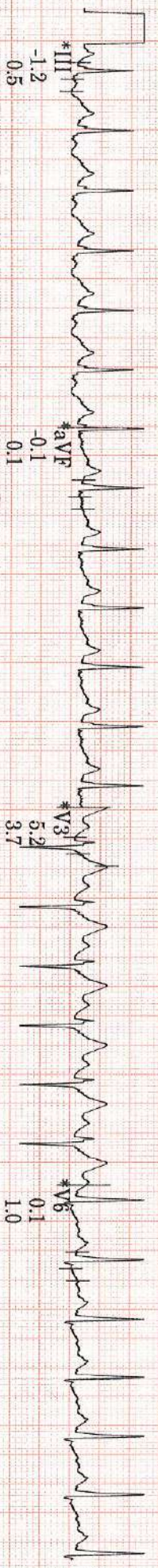
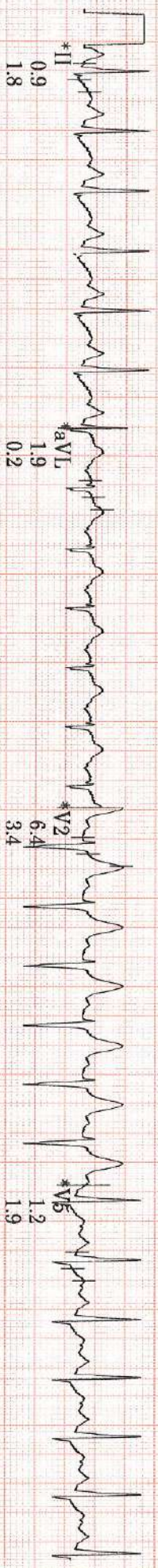
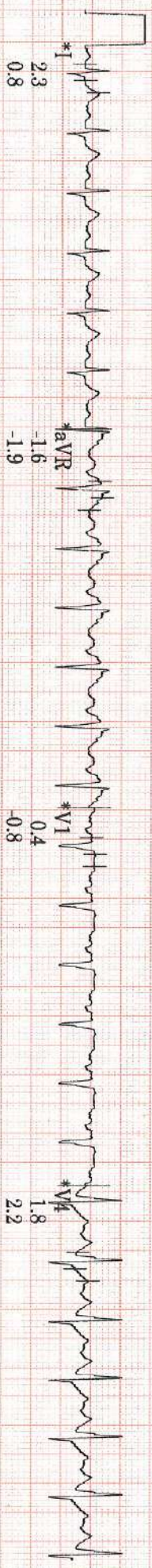
EXERCISE
STAGE 3
8.48

BRUCE
3.4mph
14.0%

APOLLO SPECTRA TARDEO MUMBAI

ST @ 10mm/mV
80ms postJ

Lead
ST(mn)
Slope(mV/s)



Raw Rhythm

* Computer Synthesized Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S 50Hz HR 46

MAC55 009C

II

KERRAR, PANKAJ
ID: 00065432

30-Mar-2023
12:35:09

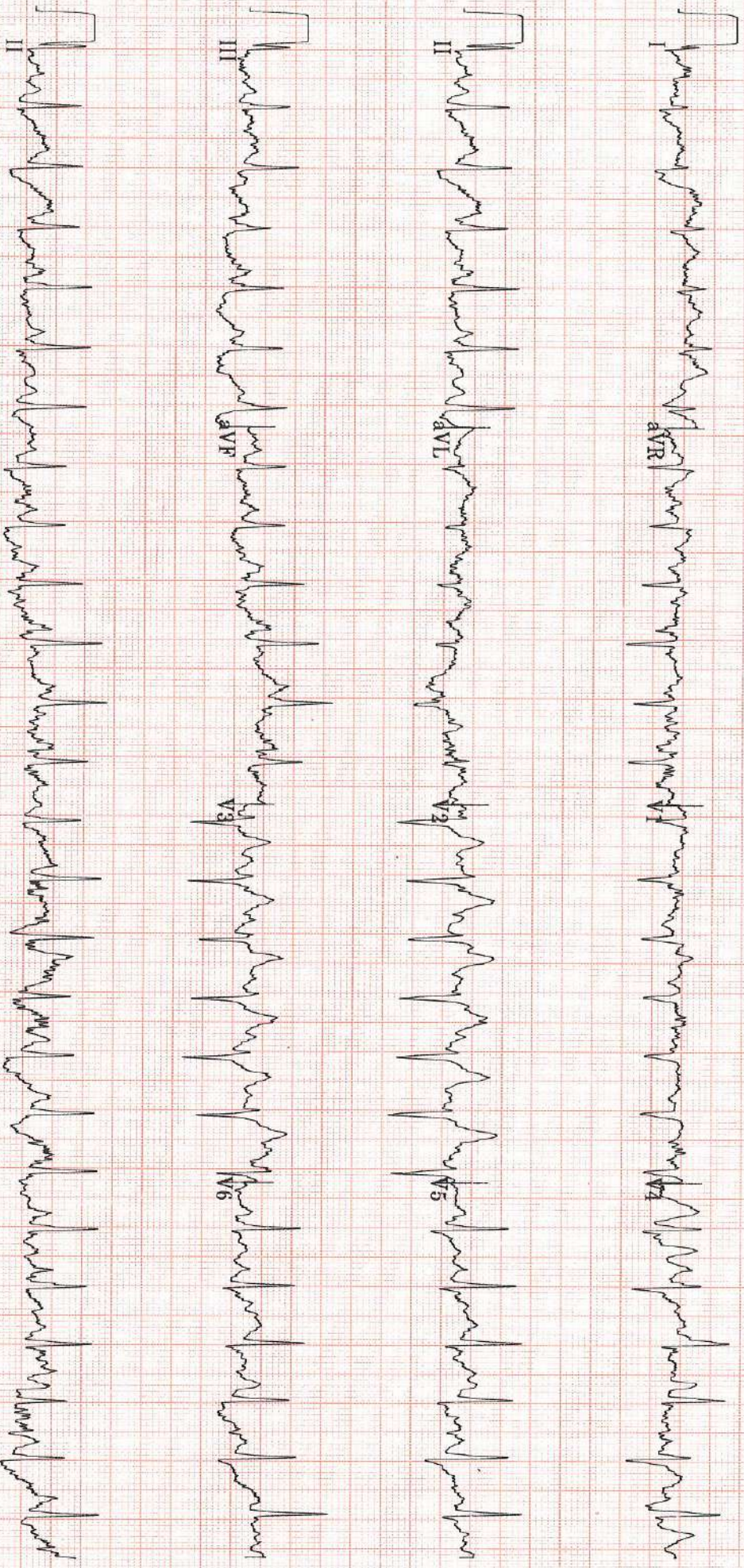
160bpm

EXERCISE
STAGE 4
9:12

BRUCE
4.2mph
16.0%

12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46 4 by 2.5s + 1 rhythm Id MAC55 009C

KERKAR, PANKAJ
ID: 000055432

30-Mar-2023
12:36:09

LINKED MEDIANS REPORT

RECOVERY
Post
1:00

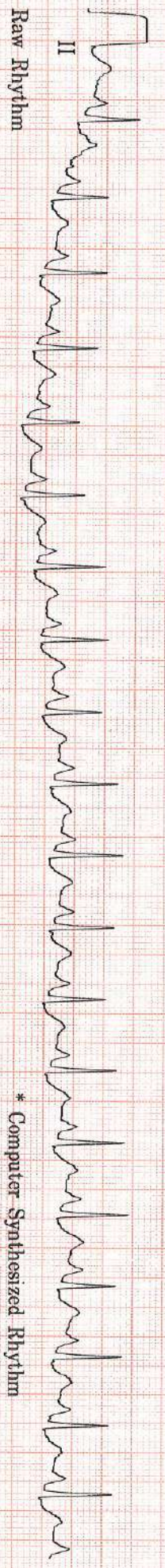
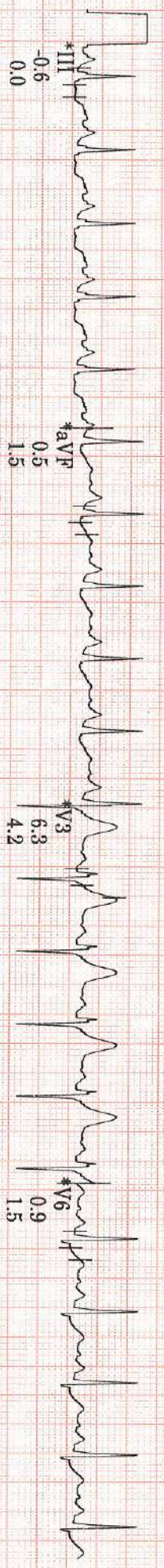
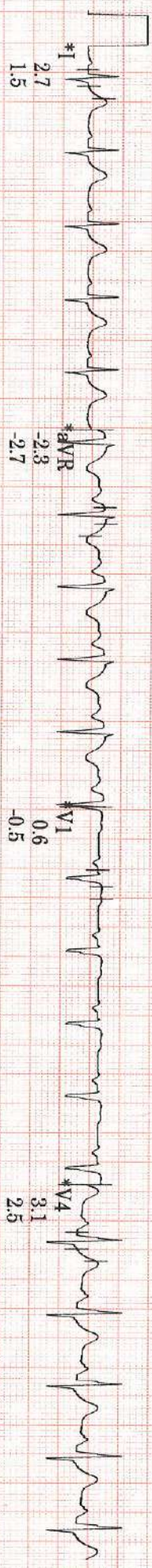
BRUCE
***mph
***%

APOLLO SPECTRA TARDEO MUMBAI

125bpm

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46
MAC55 009C

* Computer Synthesized Rhythm

KERKAR, PANKAJ
ID: 000055432

30-Mar-2023
12:37:09

LINKED MEDIANS REPORT

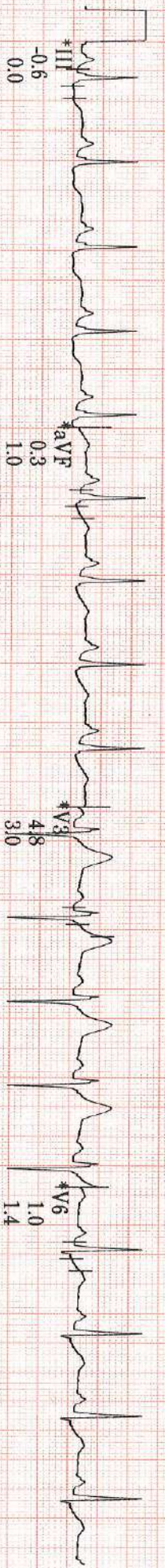
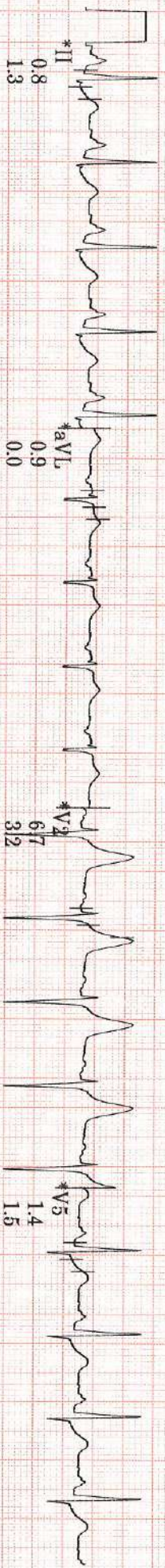
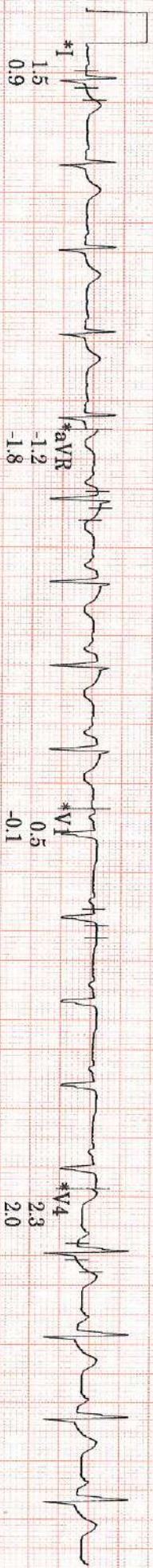
APOLLO SPECTRA TARDEO MUMBAI

109bpm
RECOVERY
Post
2:00

BRUCE
**mph
***%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

* Computer Synthesized Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

MAC55 009C

GRADED EXERCISE SUMMARY

KERKAR, PANKAJ

ID: 00005432

35years

Asian

Male

BRUCE

Max HR: 159bpm 85% of max predicted 185bpm

Max BP: 120/80

Reason for Termination: Target HR Achieved

Total Exercise time: 9:12

Maximum workload: 10.4METS

Target HR Achieved

25.0 mm/s

10.0 mm/mV

100hz

30-Mar-2023
12:24:13

Referred by:
Test ind:

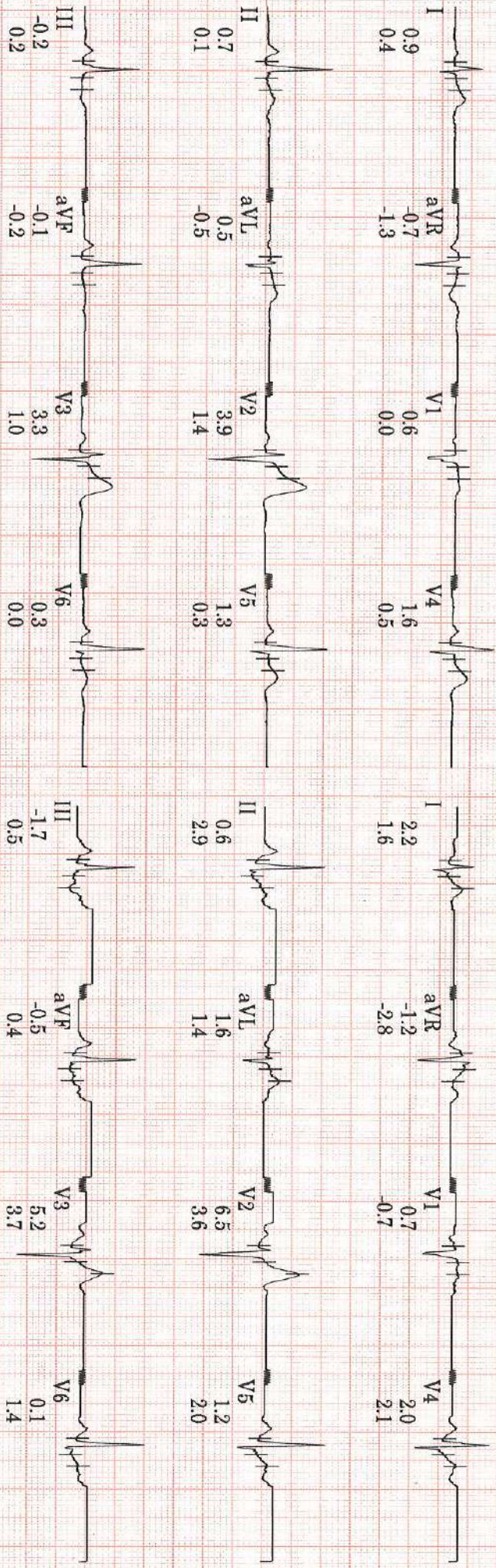
BASELINE
EXERCISE STAGE 1 1.0METS
0:00 85bpm
ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)

EXERCISE STAGE 3
8:42 9.8METS

MAX ST
151bpm
ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Technician:

Unconfirmed

APOLLO SPECTRA TARDEO MUMBAI

MAC55 009C

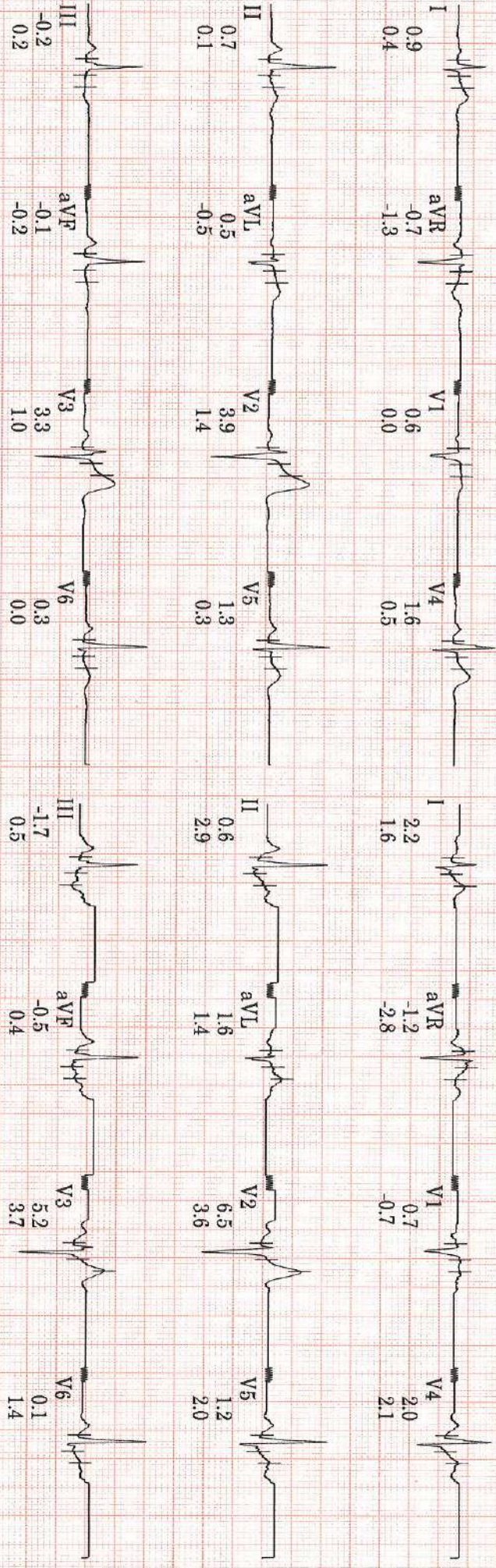
GRADED EXERCISE SUMMARY

KERKAR, PANKAJ
 ID: 000055432
 35years
 Asian
 Male
 30-Mar-2023
 12:24:13

BRUCE
 Total Exercise time: 9:12
 Max HR: 159bpm 85% of max predicted 185bpm
 Max BP: 120/80
 Maximum workload: 10.4METS
 Reason for Termination: Target HR Achieved
 Comments: STRESS TEST IS BORDERLINE POSITIVE

Referred by:
 Test ind:

EXERCISE STAGE	HR	ST @ 10mm/mV	Lead ST(mm)	Slope(mV/s)
BASELINE	85bpm	80ms postJ		
EXERCISE STAGE 1	151bpm	80ms postJ		
MAX ST	151bpm	80ms postJ		
EXERCISE STAGE 3	151bpm	80ms postJ		



Technician:

Unconfirmed

LABULAR SUMMARY REPORT

KERKAR, PANKAJ
ID: 000055432

35years

Asian

Male

BRUCE
Total Exercise time: 9:12
Max HR: 159bpm 85% of max predicted 158bpm
Max BP: 120/80
Maximum workload: 10.4METS
Reason for Termination: Target HR Achieved

25.0 mm/s
10.0 mm/mV
100hz

30-Mar-2023
12:24:13

Referred by:
Test ind:

Dr. (Mrs.) CHHAYA P. VAJIA
M. D. (MUM)
Physician & Cardiologist
Reg. No. 56942

[Signature]



Comments: STRESS TEST IS BORDERLINE POSITIVE.

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	1:18	***	***	1.0	79	110/80	87
	STANDING	0:16	***	***	1.0	84		
	HYPERVENT	0:10	0.4	0.0	1.0	85		
	STAGE 1	3:00	1.7	10.0	4.5	104		
EXERCISE	STAGE 2	3:00	2.5	12.0	7.0	120		
	STAGE 3	3:00	3.4	14.0	10.1	153		
	STAGE 4	0:12	4.2	16.0	10.4	159		
	Post	2:07	***	***	1.0	109		
RECOVERY								

Technician:

Unconfirmed

APOLLO SPECTRA TARDEO MUMBAI

MAC55 009C

Specialists in Surgery

Name: Pankaj Kerkar

Date: 30/3/23.

Present Complaints: No

Age: 35 Male

Present Medications: No

Personal History:

Unmarried/Married

Diet: Veg/Mixed

Sleep: Normal/Disturbed/Snoring

Alcohol: No

Tobacco: Chews/Smokes No

Bowel: (N)

Bladder: (N)

Physical Activities: Active/Moderate/Sedentary

Allergy: No

Menstrual History: —

Past Medical History: No

Family History: No

Physical Examination findings

Investigations:

Pulse: 93 /min BP: 110/80 mm/hg

ST for HB 9.3. Red Lipst. W.A 10.30

No Pallor/icterus/cyanosis/clubbing/edema

Advice:

RS: (N)

1) Avoid oil / ghee / high protein diet.

CVS: (N)

2) Tab sifferon genid 1-0-0 x 3 months

P/Abdo: (N)

3) Refer to Cardiologist.

CNS: (N)

Musculoskeletal: (N)



Dr. (Mrs.) CHHAYA P. VAJA
M. D. (MUM)
Physician & Cardiologist
Reg. No. 56942

Dr. Chhaya Vaja

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)
CIN: U85100KA2009PTC049961

Registered Office : #7-1-617/A,615 & 616, Imperial Towers,7th Floor, Opp. Ameerpet Metro Station, Ameerpet, Hyderabad, Telangana, Pin-500038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

Patient Name : Mr.PANKAJ N KERKAR Age/Gender : 35 Y 3 M 28 D/M UHID/MR No : STAR.0000055432 Visit ID : STAROPV58162 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 88516	Collected : 30/Mar/2023 09:11AM Received : 30/Mar/2023 11:48AM Reported : 30/Mar/2023 01:30PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF HAEMATOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA Methodology : Microscopic RBC : Hypochromasia (+), Microcyte (+), Mild Anisocyte WBC : Normal in number, morphology and distribution. No abnormal cells seen Platelets : Adequate in Number Parasites : No Haemoparasites seen IMPRESSION : Predominantly hypochromic microcytic blood picture, mild anisocytosis. Note/Comment : Please Correlate clinically
--



TOUCHING LIVES	Patient Name : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
	Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 11:48AM
	UHID/MR No : STAR.0000055432	Reported : 30/Mar/2023 01:30PM
	Visit ID : STAROPV58162	Status : Final Report
	Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
	Emp/Auth/TPA ID : 88516	

DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	9.3	g/dL	13-17	Spectrophotometer
PCV	30.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	3.93	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	78	fL	83-101	Calculated
MCH	23.8	pg	27-32	Calculated
MCHC	30.6	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,200	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	58	%	40-80	Electrical Impedance
LYMPHOCYTES	34	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	06	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3016	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1768	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	104	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	312	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	206000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

Methodology : Microscopic
 RBC : Hypochromasia (+), Microcyte (+), Mild Anisocytosis
 WBC : Normal in number, morphology and distribution. No abnormal cells seen
 Platelets : Adequate in Number
 Parasites : No Haemoparasites seen
IMPRESSION : Predominantly hypochromic microcytic blood picture, mild anisocytosis.
 Note/Comment : Please Correlate clinically



TOUR	Patient Name : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
	Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 11:48AM
	UHID/MR No : STAR.0000055432	Reported : 30/Mar/2023 01:55PM
	Visit ID : STAROPV58162	Status : Final Report
	Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
	Emp/Auth/TPA ID : 88516	

DEPARTMENT OF HAEMATOLOGY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - 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



Patient Name ^S : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 03:12PM
UHID/MR No : STAR.0000055432	Reported : 30/Mar/2023 06:07PM
Visit ID : STAROPV58162	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 88516	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	GOD - POD
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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 HOURS , NAF PLASMA	88	mg/dL	70-140	GOD - POD
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Comment:

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

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

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mr.PANKAJ N KERKAR Age/Gender : 35 Y 3 M 28 D/M UHID/MR No : STAR.0000055432 Visit ID : STAROPV58162 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 88516	Collected : 30/Mar/2023 09:11AM Received : 30/Mar/2023 03:12PM Reported : 30/Mar/2023 06:07PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	114	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

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



Patient Name ^s : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 03:12PM
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Emp/Auth/TPA ID : 88516	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	173	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	182	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	45	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	128	mg/dL	<130	Calculated
LDL CHOLESTEROL	91.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	36.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.84		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

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.



Patient Name ^S	: Mr.PANKAJ N KERKAR	Collected	: 30/Mar/2023 09:11AM
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Emp/Auth/TPA ID	: 88516		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.04	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.55	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	28	U/L	21-72	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	39.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	102.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.30	g/dL	6.3-8.2	BIURET METHOD
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated



Patient Name ^S : Mr.PANKAJ N KERKAR Age/Gender : 35 Y 3 M 28 D/M UHID/MR No : STAR.0000055432 Visit ID : STAROPV58162 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 88516	Collected : 30/Mar/2023 09:11AM Received : 30/Mar/2023 03:12PM Reported : 30/Mar/2023 06:29PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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

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

CREATININE	1.20	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	18.30	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	8.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	10.30	mg/dL	3.5-8.5	Uricase
CALCIUM	9.20	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.70	mg/dL	2.5-4.5	PMA Phenol
SODIUM	139	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	96	mmol/L	98 - 107	Direct ISE



Patient Name : Mr.PANKAJ N KERKAR Age/Gender : 35 Y 3 M 28 D/M UHID/MR No : STAR.0000055432 Visit ID : STAROPV58162 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 88516	Collected : 30/Mar/2023 09:11AM Received : 30/Mar/2023 03:12PM Reported : 30/Mar/2023 06:29PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	18.00	U/L	15-73	Glycylcysteine Nitoranalide



Patient Name ^S : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
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Visit ID : STAROPV58162	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 88516	

DEPARTMENT OF IMMUNOLOGY

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

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

TRI-IODOTHYRONINE (T3, TOTAL)	1.36	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	8.61	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	2.930	µIU/mL	0.25-5.0	ELFA

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 hyperthyroidism, 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




Patient Name ^S : Mr.PANKAJ N KERKAR	Collected : 30/Mar/2023 09:11AM
Age/Gender : 35 Y 3 M 28 D/M	Received : 30/Mar/2023 01:58PM
UHID/MR No : STAR.0000055432	Reported : 30/Mar/2023 03:49PM
Visit ID : STAROPV58162	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 88516	


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

COMPLETE URINE EXAMINATION , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	SLIGHTLY HAZY		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.030		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	NEGATIVE		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4-6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

*** End Of Report ***



DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



Dr.Sandip Kumar Banerjee
M.B.B.S.,M.D(PATHOLOGY),D.P.B
Consultant Pathologist



12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

KERKAR, PANKAJ
ID: 000055432
30-Mar-2023
12:25:00

93bpm

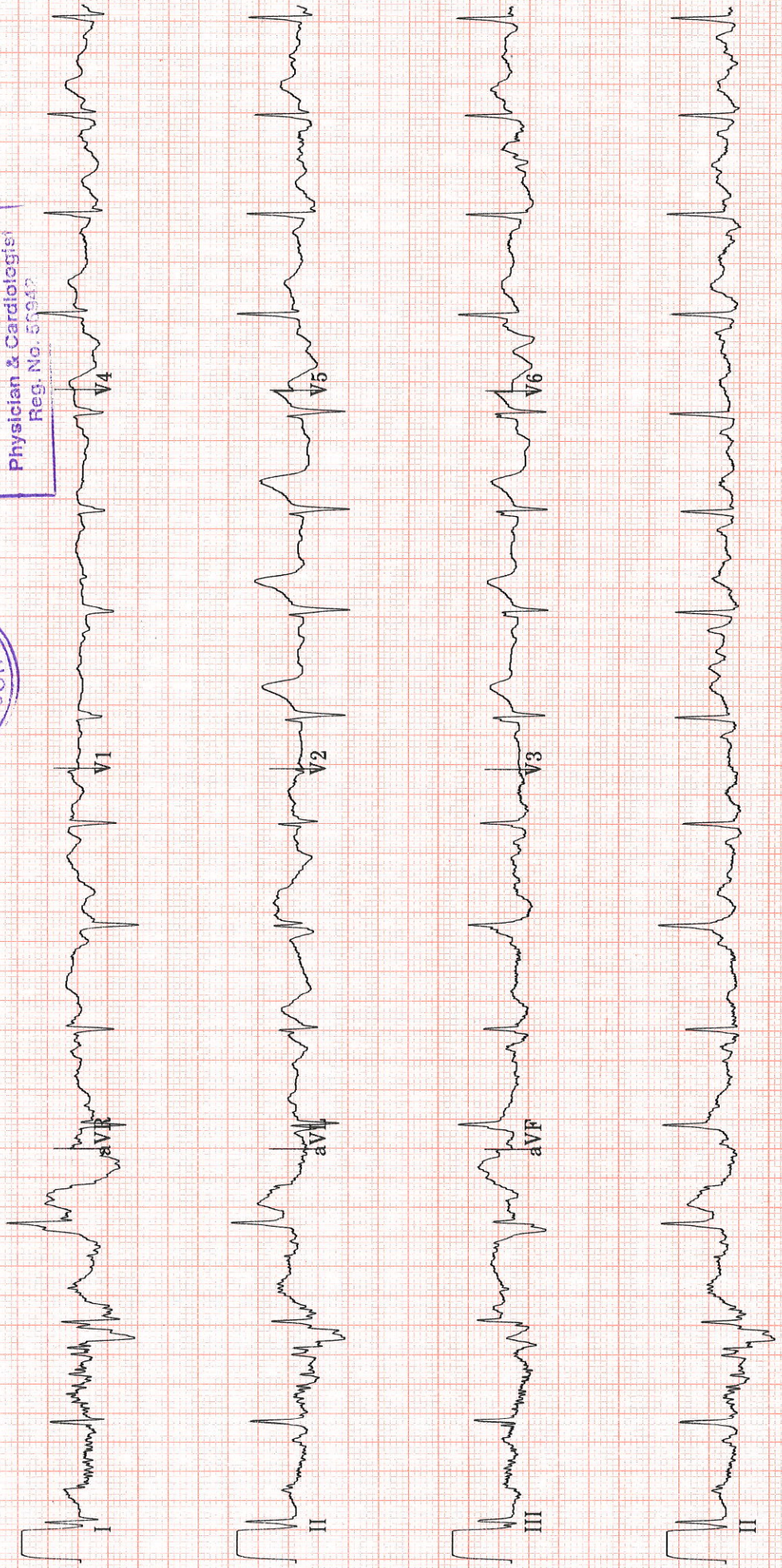
PRETEST
SUPINE
0.47

BRUCE
** *mph
** *%

Within Normal limits



Dr. (Mrs.) CHHAYA P. VAJA
M. D. (MUM)
Physician & Cardiologist
Reg. No. 50942



Specialists in Surgery

Patient Name	: Mr. Pankaj N Kerkar	Age	: 35 Y M
UHID	: STAR.0000055432	OP Visit No	: STAROPV58162
Reported on	: 30-03-2023 12:09	Printed on	: 30-03-2023 12:09
Adm/Consult Doctor	:	Ref Doctor	: SELF

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.

Printed on:30-03-2023 12:09

---End of the Report---


Dr. VINOD SHETTY
Radiology

Name: Mr Pankaj Kerkar
Age: 35/M

- For Health checkup
- C/o Frequent URTI

O/E -

Ears -



B/L TM intact, mobile

Nose -



Septum deviated to (R)
Airblast on R
Nasal mucosa (w)

Throat -

Granular
pharyngitis +

Δ - Granular Pharyngitis

- Rx
- Betadine gargles
4 times a day x 5 d
 - Gargle after every
meal
 - Plenty of fluids
- Sri

EYE REPORT

Name: Mr. Parth Kerkar

Date: 30/03/2023

Age / Sex: 35y / M

Ref No.:

Complaint: c/o 200 distance - blurred
No Myopia SBI RX

Examination

Spectacle Rx: Unk^{at 9P} 6/12⁻ Near Un & NG

	Right Eye							
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance								
Read								

Remarks: Close Un & near

Medications: As & near

Trade Name	Frequency	Duration

Follow up: Prender & near

Consultant:



ID 0 Pankaj N Kenkan
Age 35

Height 165cm
Gender Male

Date 30. 3. 2023
Time 09:56:04

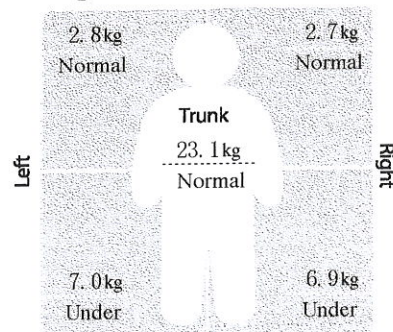
APOLLO SPECTRA HOSPITAL

Body Composition

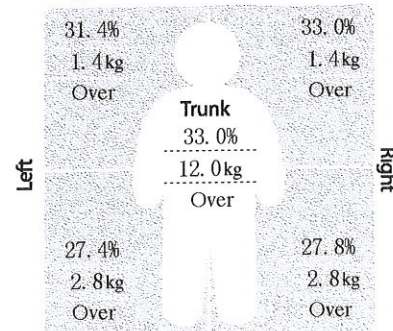
	Under	Normal	Over	UNIT%	Normal Range
Weight	40 55 70 85 100 115 130 145 160 175 190 205	69.1 kg			50.9 ~ 68.9
Muscle Mass Skeletal Muscle Mass	60 70 80 90 100 110 120 130 140 150 160 170	26.4 kg			25.4 ~ 31.1
Body Fat Mass	20 40 60 80 100 120 140 160 180 200 220 240 260 280 300 320 340 360 380 400 420 440 460 480 500 520	21.7 kg			7.2 ~ 14.4
TBW Total Body Water	34.9 kg (33.7 ~ 41.2)			FFM Fat Free Mass	47.4 kg (43.7 ~ 54.5)
Protein	9.3 kg (9.0 ~ 11.0)			Mineral*	3.19 kg (3.12 ~ 3.81)

* Mineral is estimated.

Segmental Lean



Segmental Fat



* Segmental Fat is estimated.

Obesity Diagnosis

	Value	Normal Range
BMI Body Mass Index (kg/m ²)	25.4	18.5 ~ 25.0
PBF Percent Body Fat (%)	31.3	10.0 ~ 20.0
WHR Waist-Hip Ratio	1.02	0.80 ~ 0.90
BMR Basal Metabolic Rate (kcal)	1395	1512 ~ 1766

Nutritional Evaluation

Protein	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Deficient
Mineral	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Deficient
Fat	<input type="checkbox"/> Normal	<input type="checkbox"/> Deficient <input checked="" type="checkbox"/> Excessive

Weight Management

Weight	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over
SMM	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Strong
Fat	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over

Obesity Diagnosis

BMI	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over
		<input type="checkbox"/> Extremely Over	
PBF	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over
WHR	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over

Muscle-Fat Control

Muscle Control	+ 3.5 kg	Fat Control	- 12.7 kg	Fitness Score	64
----------------	----------	-------------	-----------	---------------	----

Impedance

Z	RA	LA	TR	RL	LL
20kHz	333.9	322.2	27.6	321.0	307.8
100kHz	299.5	287.5	22.9	284.8	275.4

* Use your results as reference when consulting with your physician or fitness trainer.

Exercise Planner

Plan your weekly exercises from the followings and estimate your weight loss from those activities.

Energy expenditure of each activity (base weight: 69.1 kg / Duration: 30min. / unit: kcal)											
Walking	138	Jogging	242	Bicycle	207	Swim	242	Mountain Climbing	225	Aerobic	242
Table tennis	156	Tennis	207	Football	242	Oriental Fencing	346	Gate ball	131	Badminton	156
Racket ball	346	Tae-kwon-do	346	Squash	346	Basketball	207	Rope jumping	242	Golf	122
Push-ups	development of upper body	Sit-ups	abdominal muscle training	Weight training	backache prevention	Dumbbell exercise	muscle strength	Elastic band	muscle strength	Squats	maintenance of lower body muscle

• How to do

1. Choose practicable and preferable activities from the left.
2. Choose exercises that you are going to do for 7 days.
3. Calculate the total energy expenditure for a week.
4. Estimate expected total weight loss for a month using the formula shown below.

• Recommended calorie intake per day

1400 kcal

* Calculation for expected total weight loss for 4 weeks: **Total energy expenditure (kcal/week) X 4weeks ÷ 7700**



भारत सरकार
Government of India



Issue Date: 29/08/2011



पंकज नरेश केरकर
Pankaj Naresh Kerkar
जन्म तिथि/DOB: 02/12/1987
पुरुष/ MALE

9182 4931 3732

VID : 9112 6521 0678 1634

मेरा आधार, मेरी पहचान

LETTER OF APPROVAL / RECOMMENDATION

To,

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. KERKAR PANKAJ NARESH
EC NO.	88516
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	MUMBAI,SERVICE BRANCH
BIRTHDATE	02-12-1987
PROPOSED DATE OF HEALTH CHECKUP	30-03-2023
BOOKING REFERENCE NO.	22M88516100052022E

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 **23-03-2023** 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 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

Patient Name : Mr. Pankaj N Kerkar

Age/Gender : 35 Y/M

UHID/MR No. : STAR.000055432

OP Visit No : STAROPV58162

Sample Collected on :

Reported on : 30-03-2023 12:09

LRN# : RAD1963686

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 88516

DEPARTMENT OF RADIOLOGY

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Dr. VINOD SHETTY
Radiology