

Mr. MUTTURAJ MUNDARGI (26 /M)

UHID

AHIL.0000823995

AHC No

AHILAH180436

Date

10/12/2022

Apollo

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Dear Mr. MUTTURAJ MUNDARGI

Thank you for choosing Apollo ProHealth, India's first personalized, predictive health screening program with health risk assessments curated just for you to guide targeted intervention, continuum of care and a path to wellness. Our holistic care continuum integrates clinical expertise and artificial intelligence to gauge and avert the risk, onset and progression of non-communicable diseases (NCDs).

In this personalized health report, you will find your

- Medical History and Physical examination results
- · Investigations Results
- Artificial Intelligence powered risk scores
- Physician's Impressions on your Health
- Path to Wellness: A personalized management protocol, including follow-up assessments
- Vaccination counselling advice

Apollo ProHealth encompasses the following processes:

Personalized Health Risk Assessment (pHRA): Based on your online risk assessment, medical history, physical examination, and psychological evaluation, we recommended a health screening assessment for you, including diagnostic and imaging tests. Based on the results of these assessments, we have advised additional follow-up tests and consultations - details of which we have included in your report. Your physician will explain their relevance, and we strongly suggest you comply with the recommendations.

Health Mentor: We have assigned a dedicated health mentor to proactively work with you towards your health goals and ensure that you regularly adhere to the guidance and recommendations from clinical and nutrition consultants. Your health mentor will call you periodically to track your progress





ProHealth App: You will get access to the Apollo ProHealth App, which will facilitate easy navigation of personal health records, progress towards your health goals, appointment booking, customized tips and guidance for health and lifestyle management, and regularly connecting with your Health Mentor through the in-app chat. Until you return for your 2nd-year assessment, you will receive periodic updates and reminders to motivate you to keep up the momentum regarding health goal milestones.

Follow- Up Consultation:

For any follow-up consultations, you can visit your ProHealth physician in-person at the center or you can book a virtual consultation through https://www.apollo247.com/specialties or through the Apollo 247 app on your phone.

Scan the QR code to download the Apollo 247 App



You can also download the Apollo 247 app on

ANDROID IOS

Disclaimer: The services offered in the program may vary as per the respective agreements made in the program or center or agreed mutual consent.

Note: You are entitled to one complimentary follow-up consultation with your ProHealth physician within a period of 1 year. Please contact your health mentor for the complimentary consult coupon code. This is available for ProHealth Super, Regal and Covid Recovery and Wellness programs





: Mr. MUTTURAJ MUNDARGI (26 /M)

Address: NA, AHMADABAD, AHMADABAD, GUJARAT, INDIA

Examined by : Dr. SHASHIKANT NIGAM

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Date

10/12/2022 Apolo HOSPITALS

UHID : AHIL.0000823995

AHC No : AHILAH180436



For Annual health checkup No specific complaints



Systemic Review

Cardiovascular system

- Nil Significant

Respiratory system

Nil Significant

Oral and dental

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Gynaec history

- Nil Significant

Central nervous system

- Nil Significant

Eyes

: - Nil Significant

ENT

- Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

:

- Nil Significant

Page 3 of 12



For online appointment: www.askapollo.com
Keep the records carefully and bring them along during your next visit to our Hospital



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General symptoms

- Nil Significant



Past medical history

Do you have any

:

allergies?

Do you have any drug - No

allergies?



Surgical history

Surgical history

- Nil



Personal history

Ethnicity

- Indian Asian

Marital status

- Single

Profession

- corporate employed

Diet

Mixed Diet

Alcohol

does not consume alcohol

Smoking

Yes

Duration of smoking(in - 4 YRS

years)

Type

Cigarette

Number

Frequency

daily

Chews tobacco

No

Physical activity

- Moderate



Family history

Father

alive

Aged

64

Mother

alive

Aged

58

Sisters

Hypertension

mother

Coronary artery

none

disease

Page 4 of 12





- None

Physical Examination



General

General appearance

- normal

Build

- normal

Height

- 164

Weight

- 72

BMI

- 26.77

Pallor

- No

Oedema

- no

Cardiovascular system

Heart rate (Per minute)

- 74

Rhythm

- Regular

- B.P. Supine

Systolic(mm of Hg)

- 126

Diastolic(mm of Hg)

- 80

Heart sounds

- S1S2+

Respiratory system

Breath sounds

- Normal vesicular breath sounds



Abdomen

Organomegaly

- No

Tenderness

- No

Printed By:

MUKTA'S ADALTI

Page 5 of 12





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Urinalysis, is the physical, chemical and microscopic examination of the urine and is one of the most common methods of medical diagnosis. It is used to detect markers of diabetes, kidney disease, infection etc.

Test Name	Result	Unit	Level	Range
Volume	25	mL		
Specific Gravity	1.010			
Colour:	Pale-Yellow			
Transparency:	Clear			
рH	6.5			
Protein :	Nil			
Sugar:	Nil	* *		
Blood:	Negative			
Ketone	Absent			
Bile Pigments:	Absent			
Urobilinogen	Nil	E.U./dL		
Nitrite	Negative			
Pus Cells	1-2 /h.p.f			0-5
RBC	Nil	/hpf		0-5/hpf
Epithelial Cells	1-2 /h.p.f			0-3/1pi
Casts:	Absent			
Crystals:	Absent			

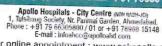
COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	15	gm%		13.0-17.0
Packed cell volume(Calculated)	44.8	%		40-50
RBC COUNT (Impedance)	4.64	Million/ul		4.5-5.9
MCV (From RBC Histogram)	96.5	fl		80-100
MCH(Calculated)	32.39 *	pg		27-32
MCHC(Calculated)	33.6	%		31-36
RDW(Calculated)	13.4	%	•	11.5-14.5
WBC Count (Impedance)	8629	/cu mm		4000-11000
_				1000 11000
Within Normal Range	Borderline	High/Low	Out	of Range

Page 6 of 12

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Out of Range



Date AHC No

Non-line A				AITCIN
ion is Accredited	50	%	•	40-75
Lymphocytes	42 *	%		20-40
Monocytes	06	%		2-10
Eosinophils	02	%		01-06
Basophils	00	%		0-1
Platelet Count (Impedance)	247700	/cu mm		150000-450000
MPV (Calculated)	8.8	fl		7-11
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic– electronic)	05	mm/1st hr	•	0-15

URINE GLUCOSE(FASTING)

Test Name Result Unit Level Range

Urine Glucose (Post Prandial) Nil

URINE GLUCOSE(POST PRANDIAL)

Test Name Result Unit Level Range

Urine Glucose (Post Prandial) Nil

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name Result Unit Level Range

BLOOD GROUP: B Positive

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Within Normal Range	Borderline	High/Low	Out o	of Range
Direct Bilirubin	0.549 0.198	mg/dL mg/dL	•	0.300-1.200 Upto 0.3 mg/dl
AST (SGOT) - SERUM Total Bilirubin	22	U/L	•	> 1 year Male : <40
ALKALINE PHOSPHATASE - SERUM/PLASMA	80	U/L		Adult(Male): 40 - 129
ALT(SGPT) - SERUM / PLASMA	21	U/L	•	0-50
Test Name	Result	Unit	Level	Range
and ioi	Mark Processes Salver the Market			

Page 7 of 12

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Date : 10/12/2022

AHC No : AHIL AH180436

Organization is Accredited by Joint Commission Inchinect Bilirubin

0.351

mg/dL

1 Day ≤5.1 mg/dL

2 Days ≤7.2 mg/dL 3-5 Days ≤10.3 mg/dL 6-7 Days ≤8.4 mg/dL

8-9 Days ≤6.5 mg/dL 10-11 Days ≤4.6 mg/dL

12-13 Days ≤2.7 mg/dL 14 Days - 9 Years 0.2-0.8 mg/dL 10-19 Years 0.2-1.1 mg/dL ≥20 Years 0.2-1.2 mg/dL

CREATININE - SERUM / PLASMA

Test Name	Result	Unit	Level	Range
CREATININE - SERUM / PLASMA	0.75	mg/dL	•	Adult Male: 0.6 - 1.3

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	18	U/L	•	Male: 10 - 71
01110000				Female : 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	86	mg/dL	•	70 - 100 : Normal 100 - 125 : Impaired Glucose Tolerance
OLUGOOT				>= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	93	ma/dL		70 110
011/0001		3		70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

Test Name	Result	Unit	Level	Range
				ivalige

Within Normal Range

Borderline High/Low



Out of Range

Page 8 of 12



Date AHC No

Organization is AGY COSylated Hemoglobin (HbA1c)

Normal < 5.7

%Increased risk for Diabetes 5.7 - 6.4%

Diabetes >= 6.5%

Monitoring criteria for Diabetes Mellitus < 7.0 : Well Controlled Diabetes 7.1 - 8.0 : Unsatisfactory Control > 8.0 : Poor Control & Needs Immediate

Treatment

Estimated Average Glucose.

102.54

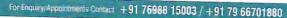
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Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge

the extent of known liver damage, and follow	ow the response	to treatment.	stinguish am	ong different types of liver disc
Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM / PLASMA	7.79	g/dL		6.00-8.00
PROTEIN TOTAL - SERUM / PLASMA	7.79	g/dL	•	6.00-8.00
ALBUMIN - SERUM	5.23 *	g/dL	•	Adult(18 - 60 Yr): 3.5 - 5.2
ALBUMIN - SERUM	5.23 *	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2
Globulin-Serum/Plasma	2.56			2.20-4.20
Globulin-Serum/Plasma	2.56			2.20-4.20
A/G ratio	2.04 *			1.00-2.00
A/G ratio	2.04 *			1.00-2.00
THYROID PROFILE (T3,T4 AND TS	H)			1.00-2.00
Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE -	1.4	nmol/L		Adults(20-120 Vrs): 1.2. 2.4

Test Name	Result	Unit	Level	Range
TOTAL T3: TRI IODOTHYRONINE - SERUM	1.4	nmol/L	•	Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female : First Trimester : 1.61 - 3.53 Second Trimester : 1.98 - 4.02 Third Trimester : 2.07 - 4.02
TOTAL T4: THYROXINE - SERUM	76	nmol/L	a	Adults(20-100 Yrs):66 - 181 Pregnant Female : First Trimester : 94.3 - 190 Second Trimester : 102 - 207 Third Trimester : 89 - 202
TSH: THYROID STIMULATING HORMONE - SERUM	1.49	μIU/mL	•	14-120 years : 0.27 - 4.20
Within Normal Range	Borderline	High/Low	Out o	of Range

Page 9 of 12



Out of Range





Organization is Accredited by Joint Commission of Rice ACID - SERUM

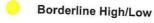
Uric acid is a product of the metabolic breakdown of purine. High blood concentrations of uric acid can lead to gout. It is also associated with other medical conditions including diabetes and the formation of kidney stones.

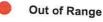
Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	4.6	mg/dL	•	Male : 3.4-7.0
BUN (BLOOD UREA NITROGEN)				Female : 2.4-5.7
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	8	mg/dL		6-20
UREA - SERUM / PLASMA	17	mg/dL		15 - 50
LIPID PROFILE - SERUM				500 N × N
Test Name	Result	Unit	Level	Range
Total Cholesterol	196	mg/dl	•	0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
Triglycerides - Serum	121	mg/dL		0-150
HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric) LDL Cholesterol (Direct LDL)	58 *	mg/dL	•	< 40 : Major risk factor for heart disease 40 - 59 : The higher The better. >=60 : Considered protective against heart disease
ESE Officiesteror (Direct LDL)	132 *	mg/dL	● x	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High
VLDL CHOLESTEROL	24			>=190 : Very High < 40 mg/dl
C/H RATIO	3			0-4.5
1100 111111				

USG WHOLE ABDOMEN

Ultrasound of the abdomen helps to look for abnormalities of the abdominal organs like liver, spleen, gall bladder, pancreas, kidneys, uterus, etc.







Page 10 of 12



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Liver appears normal in size and shows normal echotexture. No evidence of solid or cystic lesion seen. No evidence of IHBR dilatation seen. Portal vein is normal in calibre & shows normal colour flow.

Gall bladder is distended & shows normal wall thickness. No evidence of calculus / wall oedema / mass seen.

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Pancreas appears normal in size and echotexture. No evidence of pseudocyst / MPD dilatation / mass seen. Spleen appears normal in size & shows normal echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation .No evidence of calculus / hydronephrosis / hydroureter / mass seen on either side.

Urinary bladder is distended & shows normal wall thickness. No evidence of calculus / haematoma / mass / diverticuli seen.

Prostate appears unremarkable. No evidence of focal lesion seen.

Visualised bowel loops appear unremarkable. No evidence of abnormal bowel wall thickening / mass or dilatation seen.

No evidence of ascites or lymphadenopathy seen.

CONCLUSION:

USG abdomen - pelvis appears unremarkable.

X-RAY CHEST PA

X-ray imaging creates pictures of the inside of your body. Chest X-ray can reveal abnormalities in the lungs, the heart, and bones that sometimes cannot be detected by examination.

NORMAL STUDY.

Investigations Not Done / Not Yet Reported

Haematology

STOOL ROUTINE

CARDIOLOGY

ECHO/TMT

ECG

Within Normal Range

Borderline High/Low

Out of Range

Page 11 of 12





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.BODY WEIGHT 72 KG, DEAL BODY WEIGHT 50-61 KG

.DYSLIPIDEMIA

.ECG - NORMAL SINUS RHYTHM

.TMT — TEST IS NEGATIVE, EXERCISE TIME 6:26 , WORKLOAD 7.6 METS

.USG ABDOMEN - NORMAL STUDY

.CHEST X-RAY - NORMAL

.EYE - NORMAL

.DENTAL - AS PER DOCTOR ADVICE

Wellness Prescription

Advice On Diet :-



BALANCED DIET---LOW FAT DIET

Advice On Physical Activity :-



REGULAR WALK FOR 30 MINS FOR HEALTH, 60 MINS WALK FOR WEIGHT REDUCTION PRACTICE YOGA AND MEDITATION MAINTAIN WEIGHT BETWEEN 50-61 KG

Follow-up and Review Plan

Printed By : MUKTA S ADALTI



CHECK LIPID PROFILE EVERY 6 MONTHS

Scan the QR code in AskApollo App to book your follow-up appointments and investigations

Dr.SHASHIKANT NIGAM

cian / Consultant Internal Medicine Shashikant Nigam

MBBS, MD (Gen. Med.)

Note: The Health Check-up examinations and routine investigations have a required to the control of the control not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.

Page 12 of 12

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RADIOLOGY

Patient Details :

Mr. MUTTURAJ MUNDARGI | Male | 26Yr 10Mth 27Days

UHID

AHIL.0000823995

Patient Location:

AHC

Patient Identifier:

AHILAH180436

DRN

222063758

Completed on:

10-DEC-2022 11:44

Ref Doctor

DR. SHASHIKANT NIGAM

USG WHOLE ABDOMEN

IMPRESSION:

Liver appears normal in size and shows normal echotexture. No evidence of solid or cystic lesion seen. No evidence of IHBR dilatation seen. Portal vein is normal in calibre & shows normal colour flow.

Gall bladder is distended & shows normal wall thickness. No evidence of calculus / wall oedema / mass seen.

Pancreas appears normal in size and echotexture. No evidence of pseudocyst / MPD dilatation / mass seen.

Spleen appears normal in size & shows normal echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation .No evidence of calculus / hydronephrosis / hydroureter / mass seen on either side.

Urinary bladder is distended & shows normal wall thickness. No evidence of calculus / haematoma / mass / diverticuli seen.

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Visualised bowel loops appear unremarkable. No evidence of abnormal bowel wall thickening / mass or dilatation seen.

No evidence of ascites or lymphadenopathy seen.

CONCLUSION:

USG abdomen - pelvis appears unremarkable.

Printed on:

10-Dec-2022 16:20

Printed By:

153182

Reported By:

717876

Page 1 of 2









Mr. MUTTURAJ MUNDARGI

AHIL.0000823995

AHILAH180436

USG WHOLE ABDOMEN

--- END OF THE REPORT ----

Dr. SANDIP PRABHUBHAI PRAJAPATI

Consultant Radiologist

Printed on:

10-Dec-2022 16:20

Printed By: 153182

Reported By: 717876

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F.Wuufuj 1D. 823995	Apollo Hospital Bhat Candinagar	Apolio Hospital): Bhist: Gandinagar	Medication Medication Medication 3:		
Male GYears QT/QRS PR PR PR PR PR PR	332 / 370 ms 332 / 370 ms 144 ms 84 ms 794 / 800 ms 58 / 63 / 66 degrees	Normal sinus rhythm with sinu Earty repolarization Normal ECG	s arrhythmia	Technician Ordering Ph Referring Ph Attending Ph	
	avr √		V1		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
GE MAC2000: 111	1.1 1.2SLM:V241	241: 25: mm/s	10 mm/mW	.0.56-20 Hz 50 Hz	Unconfirmed 4x2:5x3:25.R1: 1/1



AHIL.0000823995 Mr. MUTTURAJ MUNDARGI

26 Year(s) / Male

ID.
ъ,

DENTISTRY

DENTISTRY			
Name : Occupation : Age :		Ref. Physician :	Unit No.:
	DENTAL	RECORD	
ALLERGIES: - MA	. 10 20	- LEGOND	
DENTAL OLDER	ocation :		Character:
VANIO OR O	Brush Fir Footh Paste Po	nger Sti	No
ORAL TISSUE EXAMINATION	PERIODONITAL	EVARIATION	
NORMAL FINDINGS IN DISEASE Lips : Cheeks : Tongue : Floor of the mouth : Palate : Tonsilar Area : Any other	Gingivitis Calculus Recession Periodontal Pockets Attrition Erosion Mobility	MILD MOD SEV	CLASS I II III CROSSBITE Hypoplasia Impaction Non-vital Fracture Abcess Ulcers Caries Missing Teeth Supernumerary Others
PRESENT COMPLAINT:	to Clock is	7.	Smokey
RE-MEDICAL HISTORY: Antic	/	☐ Acidity ☐ Prear	nancy



AHIL.0000823995

Mr. MUTTUAJ MUNDARGI

26 Year(s) / Male



OPTHALMIC EXAMINATION RECORDS

Name:

Yutturaj

Mundangi

Date:

10.12-22

UHID:

823995

Distance Vision :

Right Eye -

Left Eye -

7 6/6

616

No visual Complants disease.

Near Vision:

Right Eye:

Left Eye:

(N6

APLN.TN - Right Eye

Left Eye-

mmHg

Both Eye - Colour Vision

Monnal

Both Eye - Anterior Segment Examinations -

WM

Both Eye Posterior Segment Examinations -

(mudilated)

St Bille (P FRI

Doctor's Signature

AHMROP028V1

Ophthalmologist Name

SILINE PRAK PRAK PRAK PRAK PRAK PRAK PRAK PRAK	1375	Referred by: DR.SU	DR.SUBIR CHOSH, MHC	NORMAL HEYMODAYNAMIC R NO ANGINA OCCURRED, NO A NO GALLOP / MURMUR AT P TEST TERMINATED DUE TO T	DAYNAMIC RESPONSE JERED, NO ARRHYTHEMIAS JERUS AT PEAK EXERCISE D DUE TO THE ACHIEVED	URRED, NO ARRHYTHEMIAS AT PROVOKED ED DUE TO THE ACHIEVED	ODERATE WORKLOAD
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