

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
Age/Gender : 41 Y 4 M 1 D/M
UHID/MR No : STAR.0000056937
Visit ID : STAROPV60476
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
Received : 24/Jun/2023 11:14AM
Reported : 24/Jun/2023 12:58PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

Methodology : Microscopic
RBC : Normocytic normochromic
WBC : Normal in number, morphology and distribution. No abnormal cells seen
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically



SIN No:BED230145133

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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Ph: 022 4332 4500

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

HAEMOGLOBIN	14.7	g/dL	13-17	Spectrophotometer
PCV	43.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.88	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	88	fL	83-101	Calculated
MCH	30	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	14.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,400	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	53	%	40-80	Electrical Impedence
LYMPHOCYTES	40	%	20-40	Electrical Impedence
EOSINOPHILS	02	%	1-6	Electrical Impedence
MONOCYTES	05	%	2-10	Electrical Impedence
BASOPHILS	00	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2332	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1760	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	88	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	220	Cells/cu.mm	200-1000	Electrical Impedence

PLATELET COUNT	253000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)	02	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



SIN No:BED230145133

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UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 12:07PM
Visit ID : STAROPV60476	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	86	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



Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 01:00PM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 01:27PM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 02:16PM
Visit ID : STAROPV60476	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	66	mg/dL	70-140	GOD - POD
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Kindly correlate clinically

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.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 03:18PM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 07:04PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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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	183	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	82	mg/dL	<150	
HDL CHOLESTEROL	48	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	135	mg/dL	<130	Calculated
LDL CHOLESTEROL	118.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.81		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
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	105.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.7-8.3	BIURET
ALBUMIN	4.90	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.20	g/dL	2.0-3.5	Calculated
A/G RATIO	2.23		0.9-2.0	Calculated



SIN No:SE04404301

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.84	mg/dL	0.6-1.1	ENZYMATIC METHOD
UREA	26.30	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	12.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.70	mg/dL	4.0-7.0	URICASE
CALCIUM	9.20	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.6-4.4	PNP-XOD
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98-107	Direct ISE



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	19.00	U/L	15-73	Glycylglycine Nitoranalide



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DEPARTMENT OF IMMUNOLOGY

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

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

TRI-iodothyronine (T3, TOTAL)	1.2	ng/mL	0.67-1.81	ELFA
Thyroxine (T4, TOTAL)	6.71	µg/dL	4.66-9.32	ELFA
Thyroid Stimulating Hormone (TSH)	1.010	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 IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	1.050	ng/mL	0-4	ELFA



SIN No:SPL23091287

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DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick


BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	0-1	/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:UR2134242

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12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:34:29

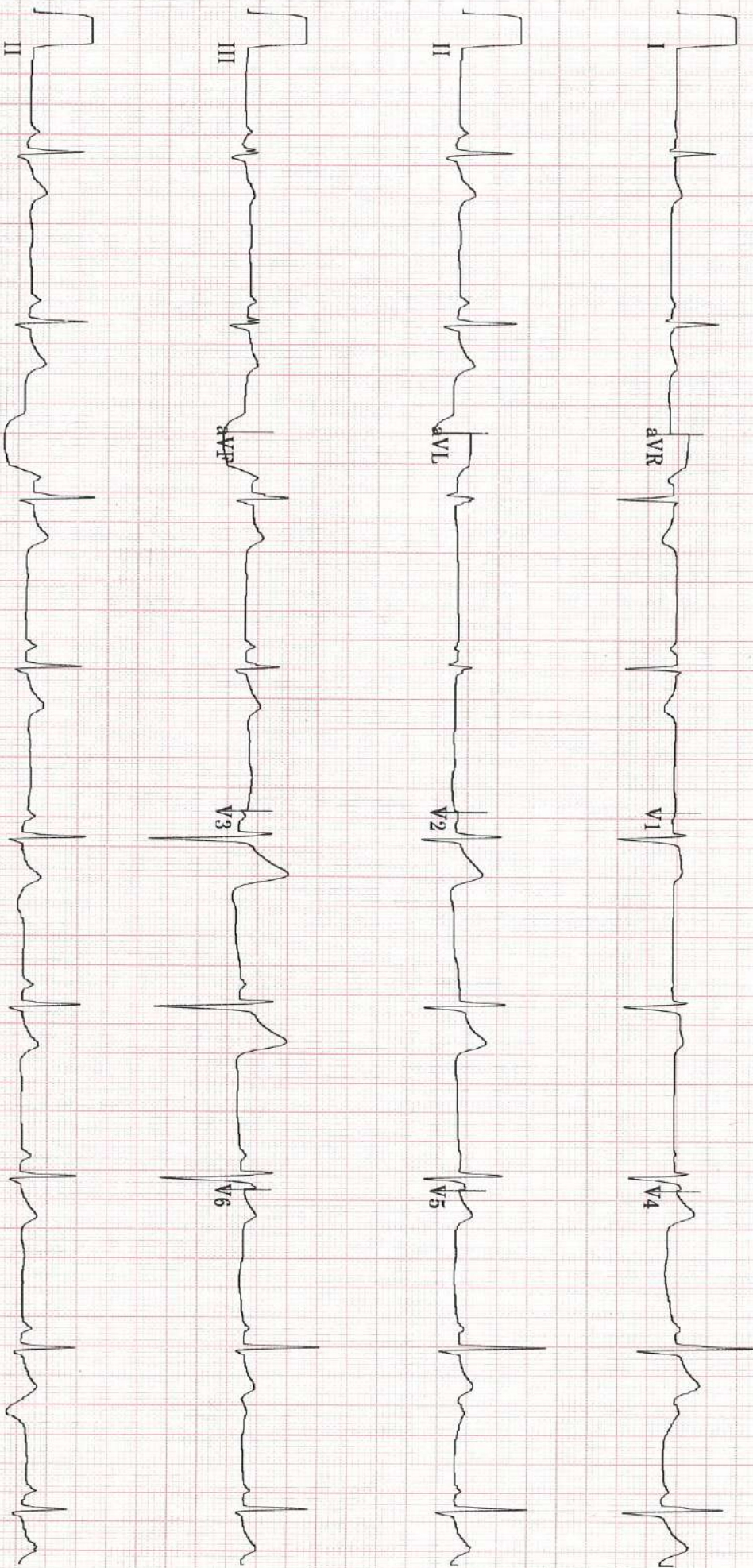
54bpm

BP: 110/70

PRETEST
SUPINE

3:17

BRUCE
***mph
***%



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

4 by 2.5s + 1 rhythm ld

MAC55 009C

0

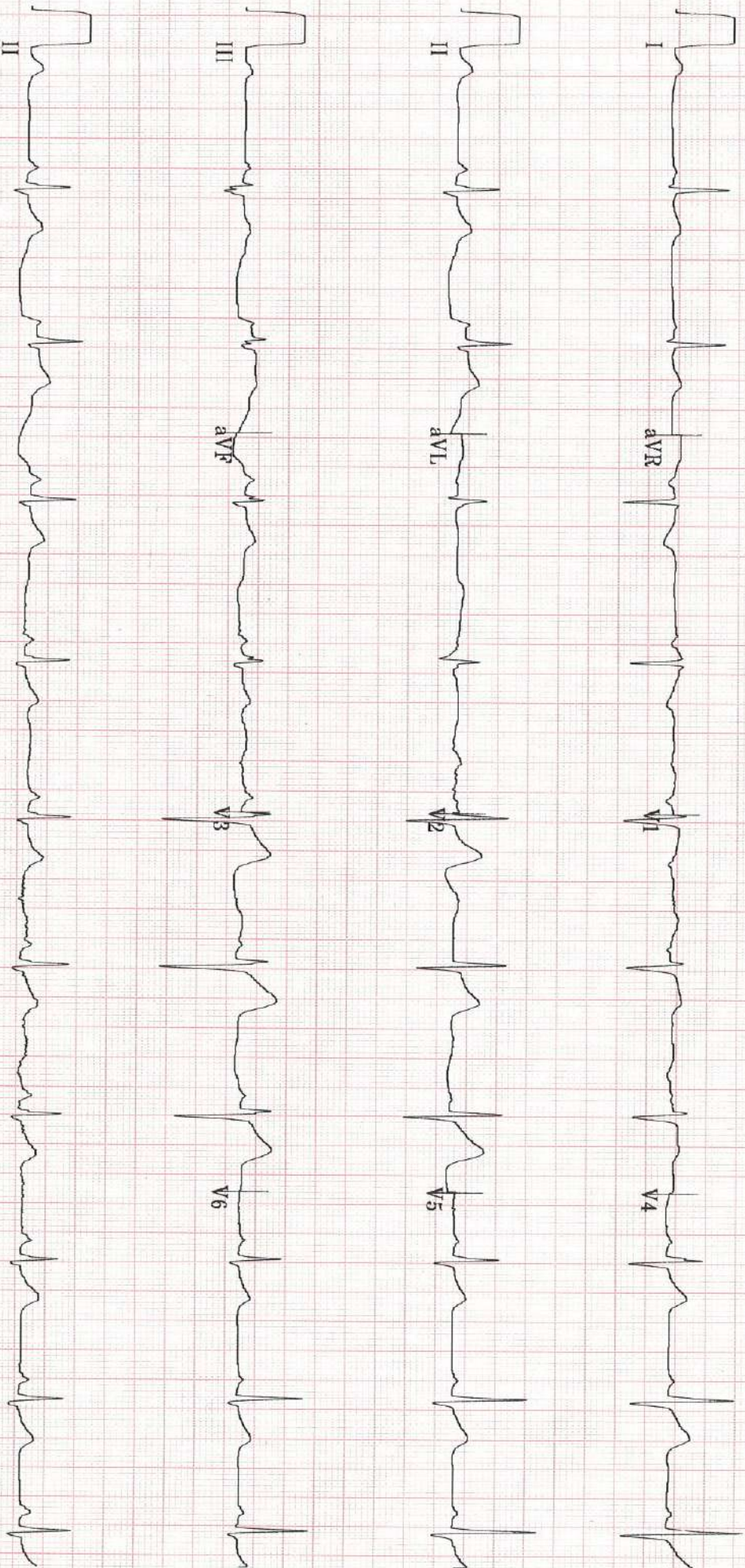
DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:35:09

63bpm

12 LEAD REPORT
PRETEST
STANDING
3:57

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 ld MAC55 009C

12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

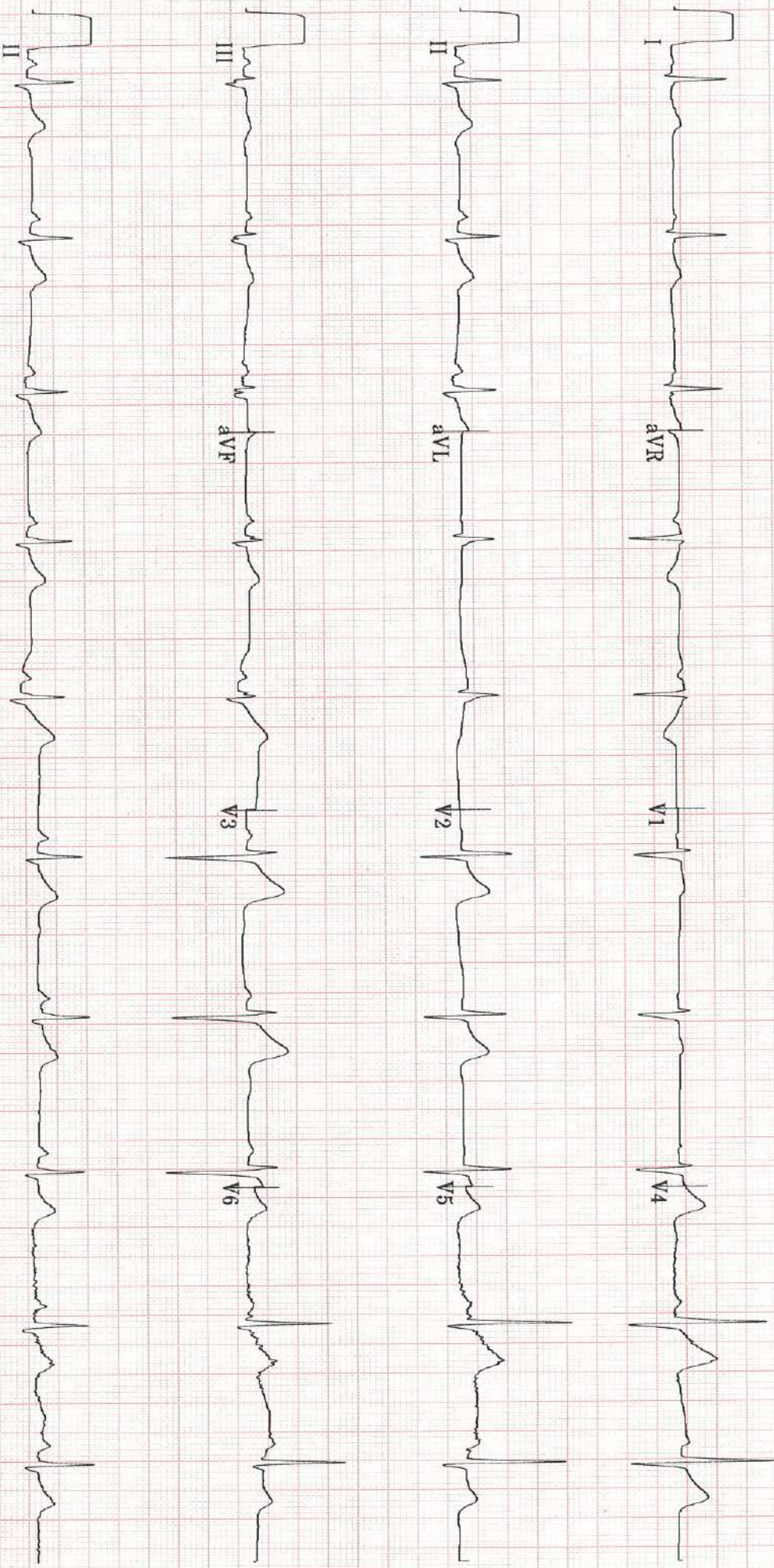
DURGAWALE, SIDDHESH
ID: 000056937

60bpm

PRETEST
HYPERVENT
4:14

BRUCE
***mph
**.*%

24-Jun-2023
12:36:26



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

DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:38:30

LINKED MEDIANS REPORT

84bpm

BP: 110/70

EXERCISE
STAGE 1
2:48

APOLLO SPECTRA TARDEO MUMBAI

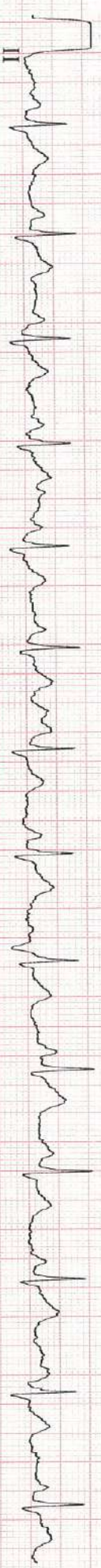
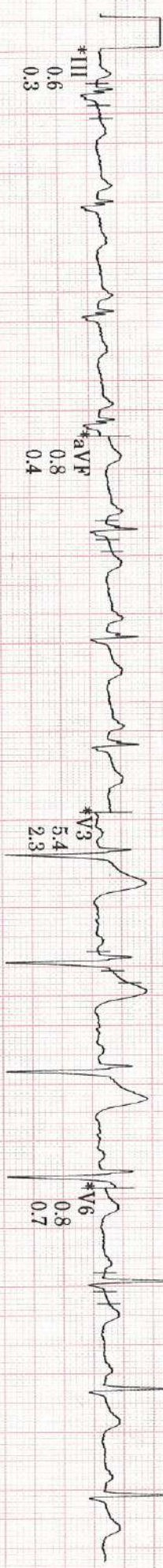
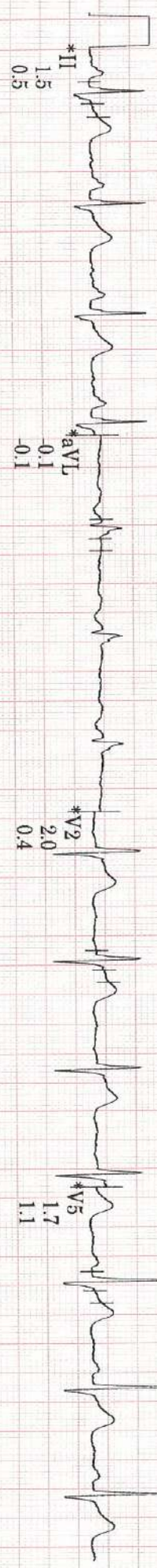
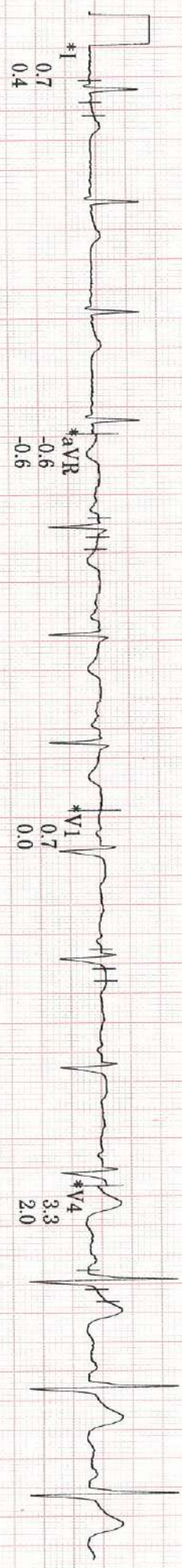
BRUCE

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

* Computer Synthesized Rhythm

MAC55 009C

DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:41:30

LINKED MEDIANS REPORT

APOLLO SPECTRA TARDEO MUMBAI

93bpm

BP: 120/90

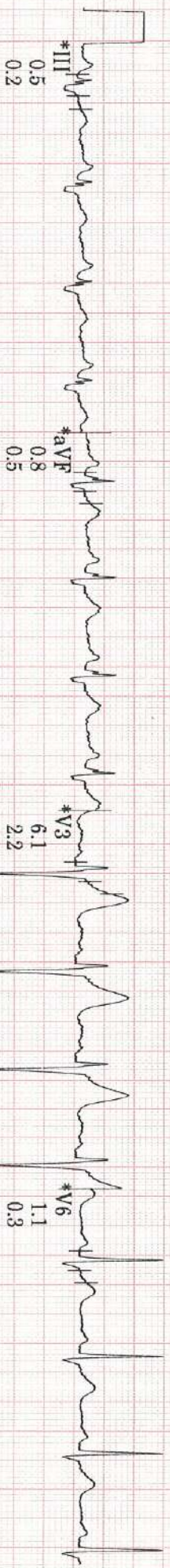
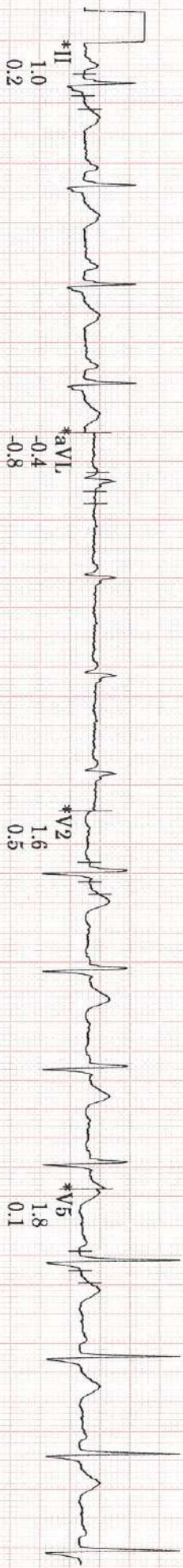
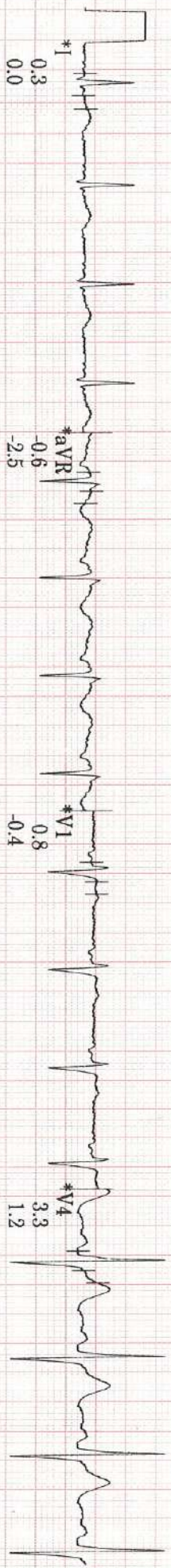
EXERCISE
STAGE 2
5.48

BRUCE

2.5mph
12.0%

ST @ 10mm/mV
80ms postJ

Lead
ST'(mm)
Slope(mV/s)



DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:44:30

LINKED MEDIANS REPORT

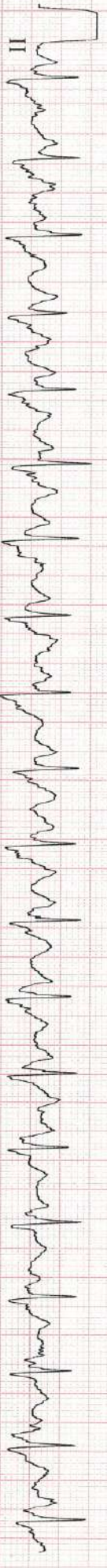
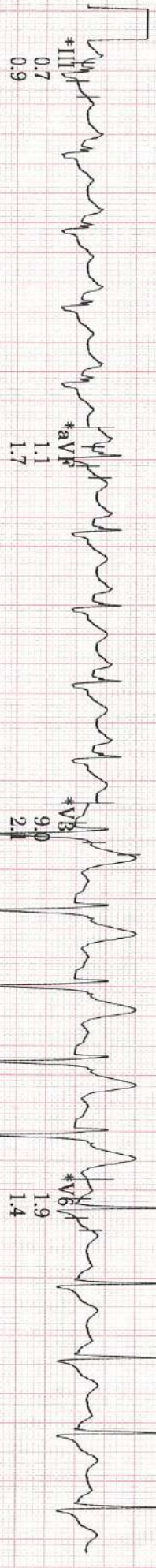
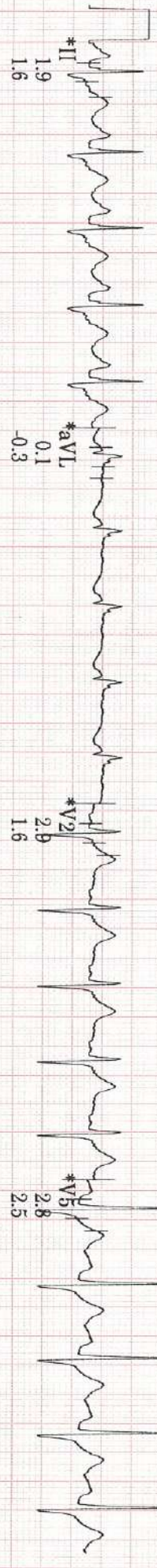
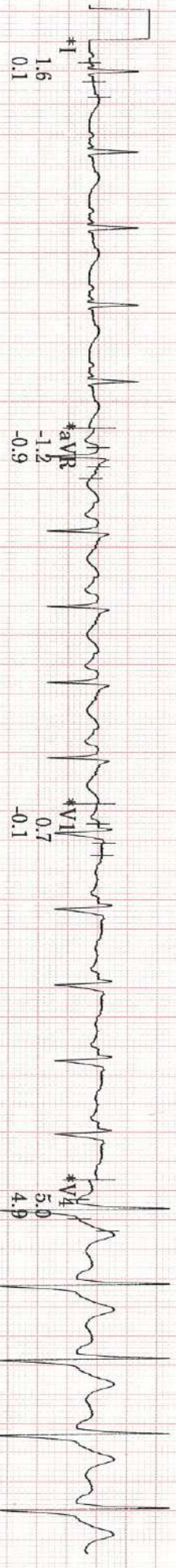
120bpm

EXERCISE
STAGE 3
8:48

BRUCE
3.4mph
14.0%

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

2

12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

DURGAWALE, SIDDHESH

ID: 000056937

24-Jun-2023

12:45:36

148bpm

EXERCISE

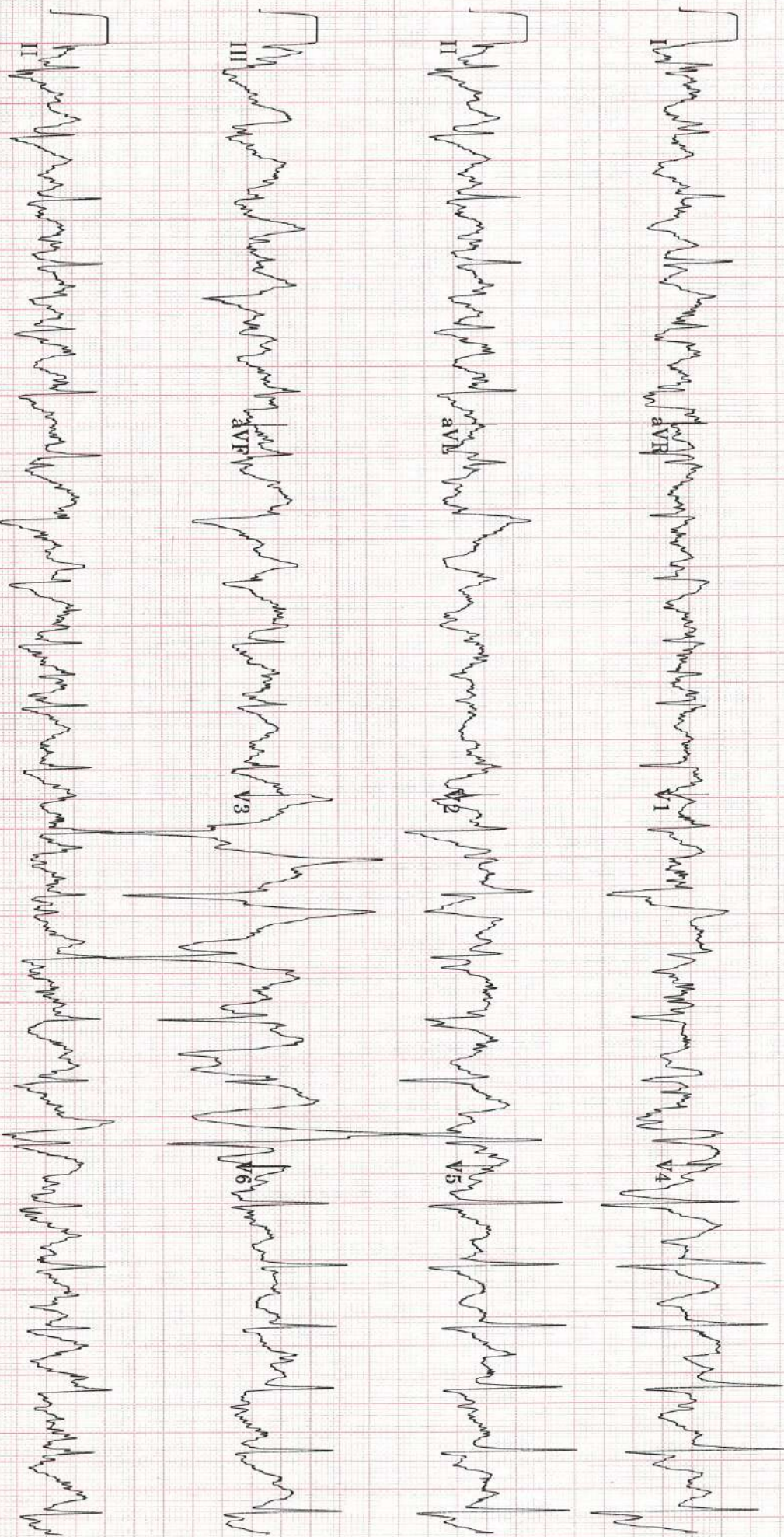
STAGE 4

9:53

BRUCE

4.2mph

16.0%



40 Hz

25.0 mm/s

10.0 mm/mV

A-H-S-50Hz HR 46

4 by 2.5s + 1 rhythm ld

MAC55 009C



DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:46:35

LINKED MEDIANS REPORT

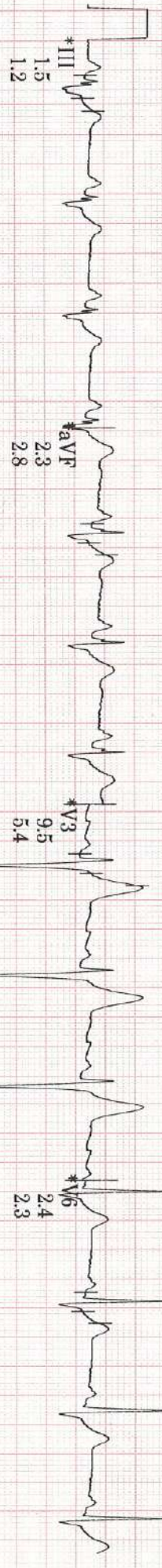
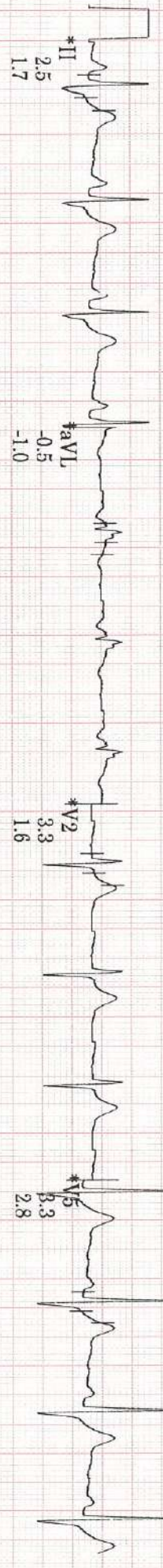
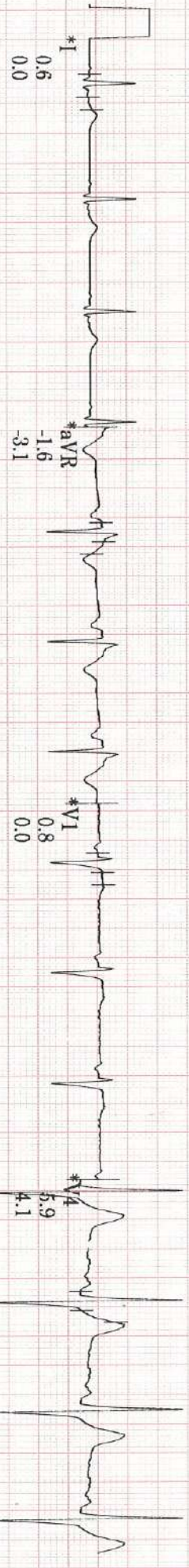
82bpm

RECOVERY
Post
1:00

BRUCE
***mph
***%

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

DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:47:35

LINKED MEDIANS REPORT

APOLLO SPECTRA TARDEO MUMBAI

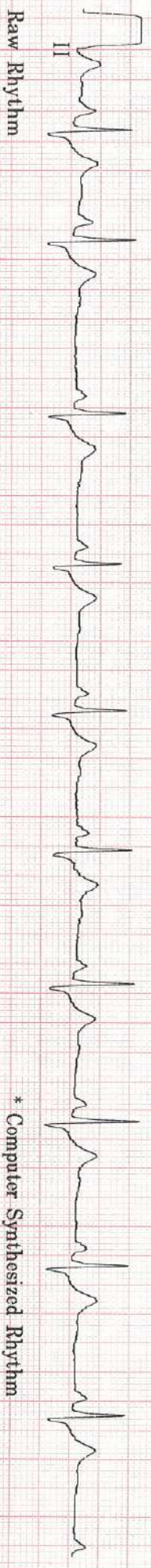
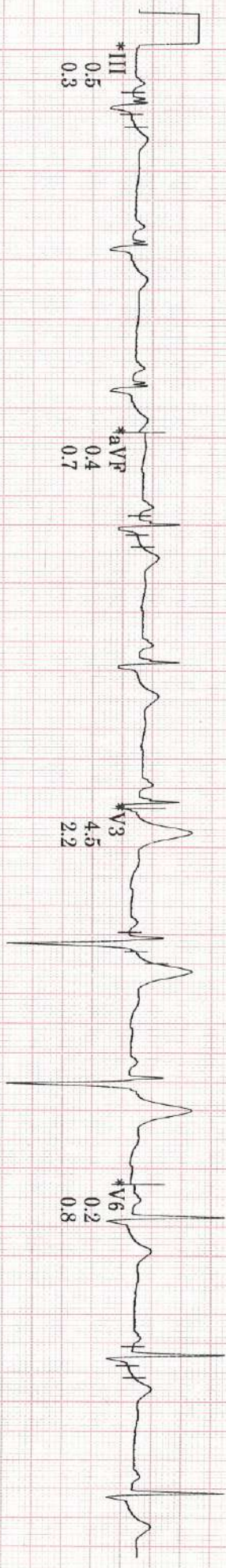
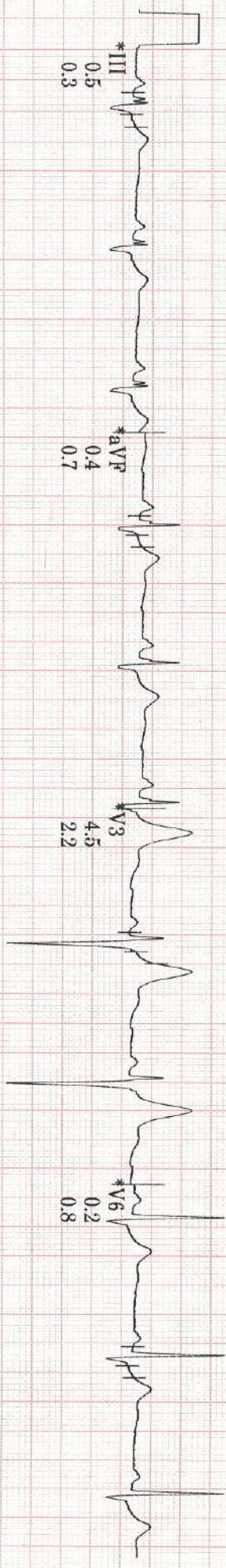
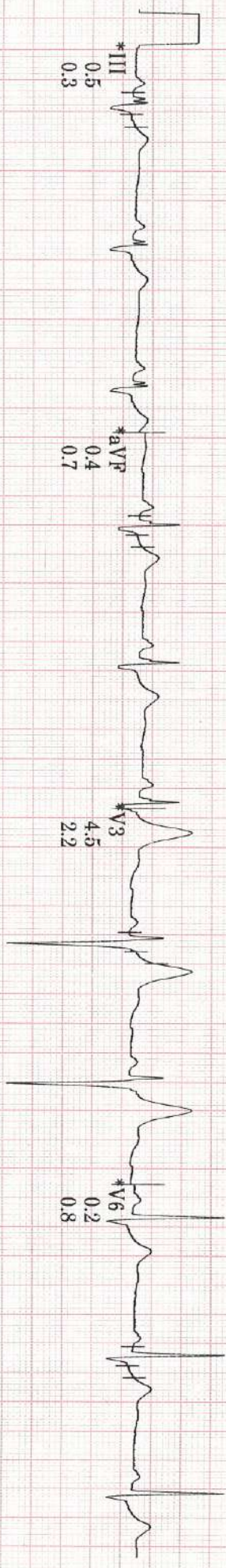
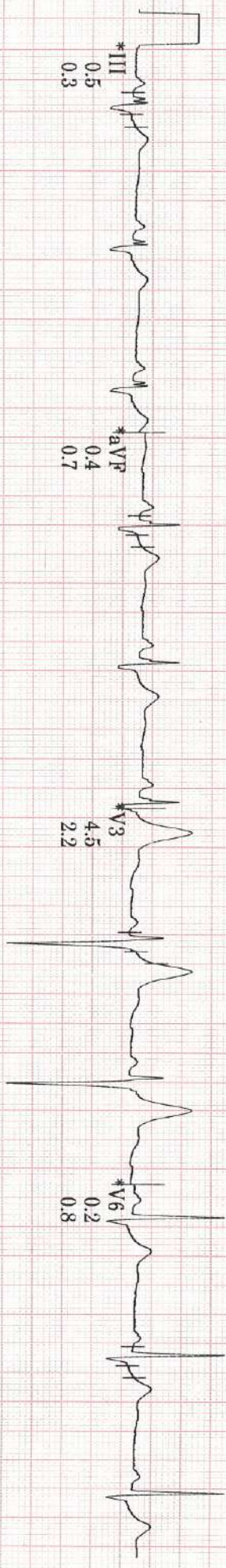
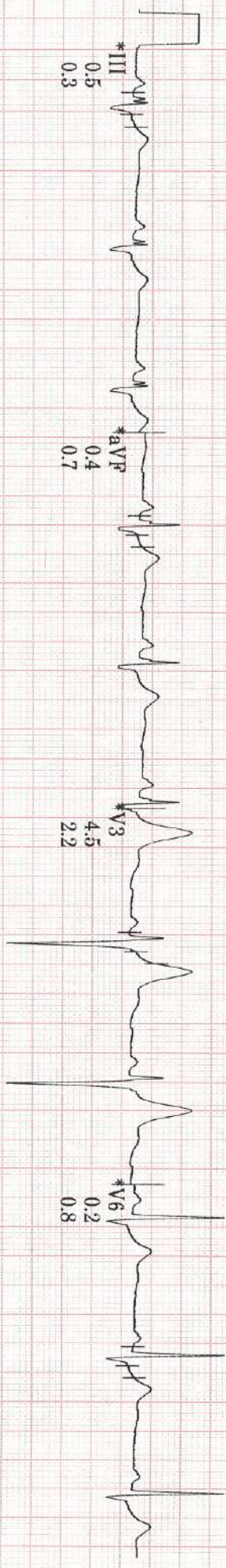
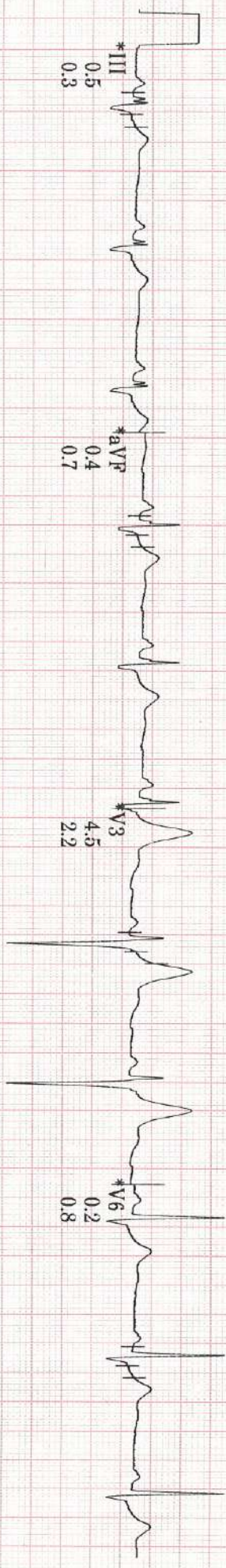
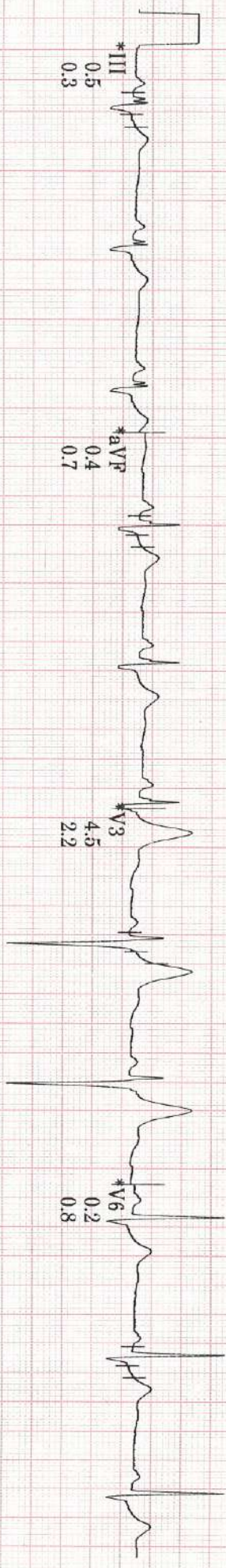
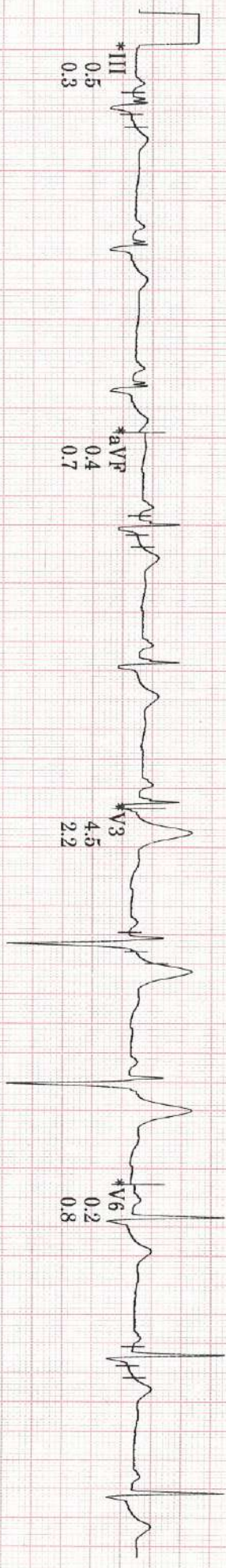
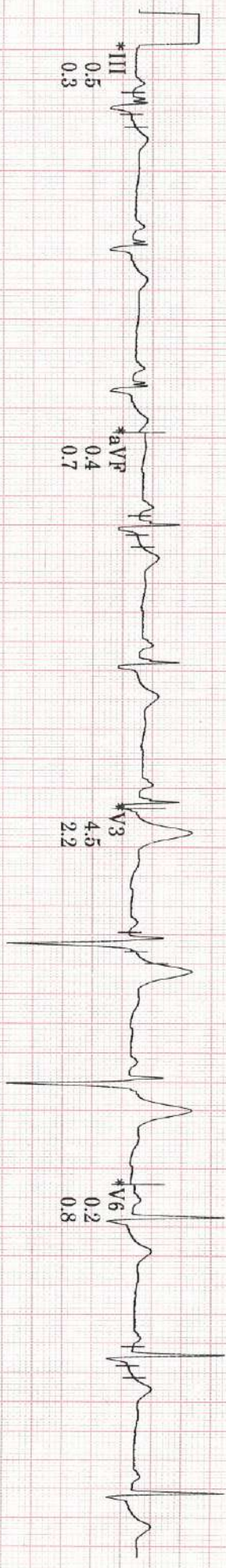
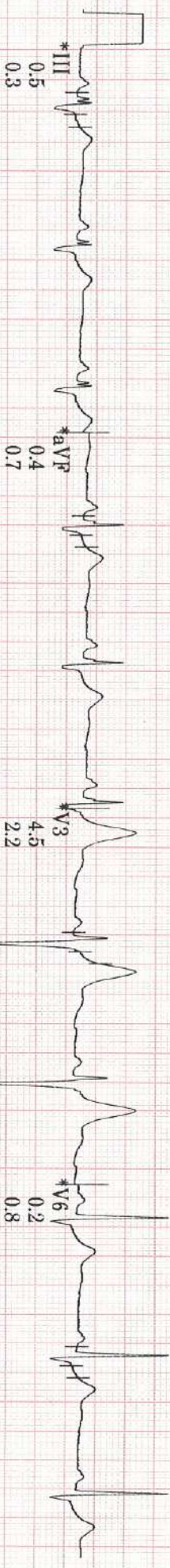
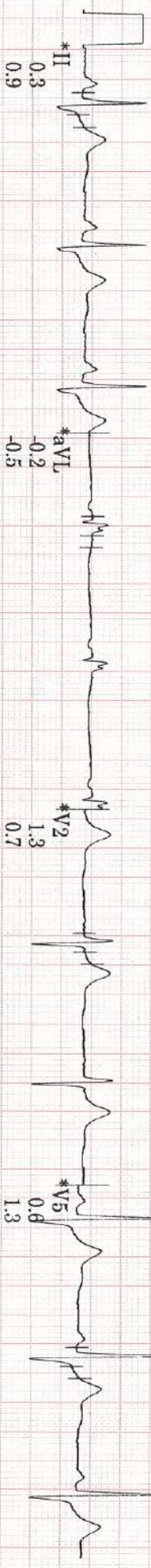
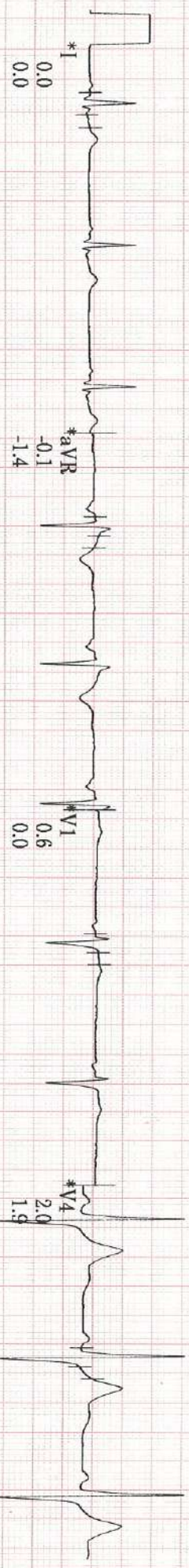
65bpm

RECOVERY
Post
2:00

BRUCE
***mph
**.*%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



* Computer Synthesized Rhythm

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

MAC55 009C

II

GRADED EXERCISE SUMMARY

DURGAWALE, SIDDHESH

41 years

Asian

Male

BRUCE

Max HR: 149bpm 83% of max predicted 179bpm
 Max BP: 120/90
 Reason for Termination: Target HR Achieved

Total Exercise time: 9:53

11.5 METS

25.0 mm/s

10.0 mm/mV
 100hz

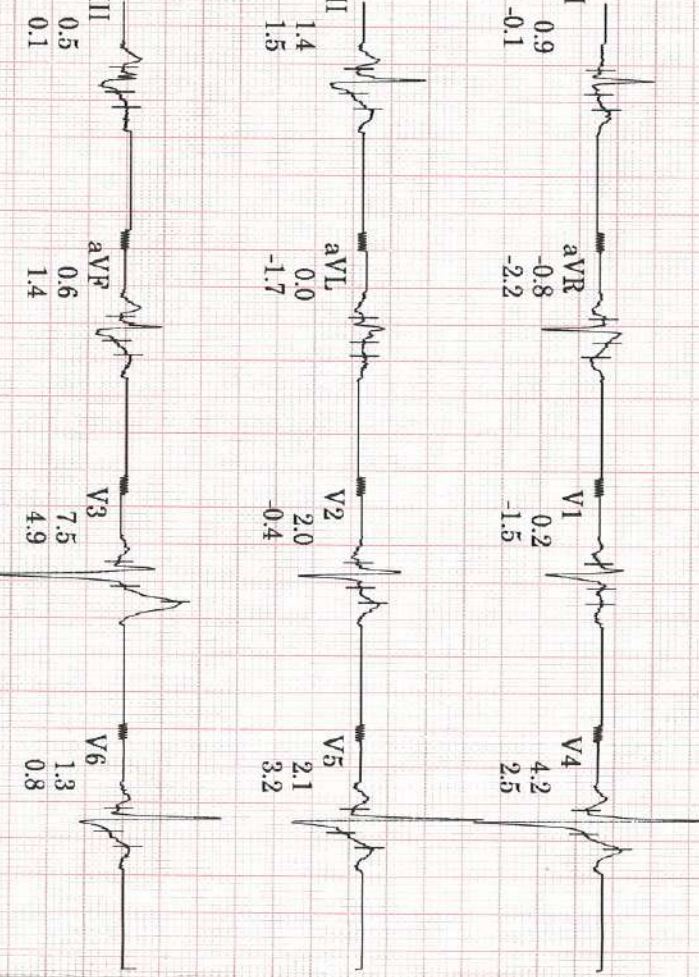
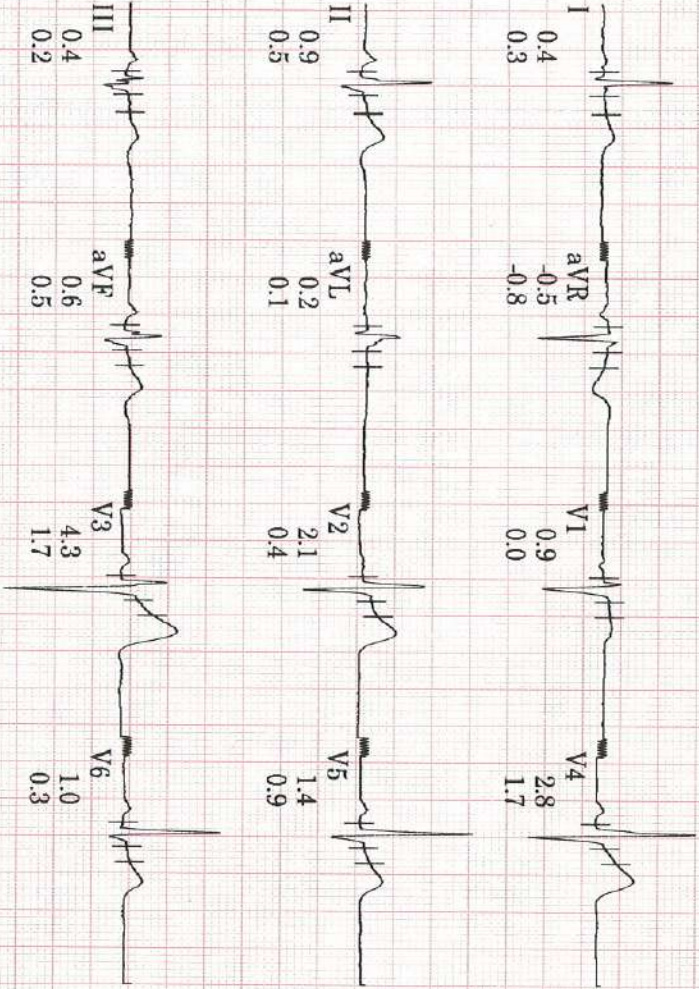
24-Jun-2023
 12:31:13

Referred by:
 Test ind:

BASELINE
 EXERCISE STAGE 1
 0:00 1.0 METS
 57bpm
 ST @ 10mm/mV
 80ms post-J

PEAK
 EXERCISE STAGE 4
 9:53 11.5 METS
 149bpm
 ST @ 10mm/mV
 80ms post-J

Lead
 ST(mm)
 Slope(mV/s)



Technician:

Unconfirmed

APOLLO SPECTRA TARDIO MUMBAI

MAC55 009C

GRADED EXERCISE SUMMARY

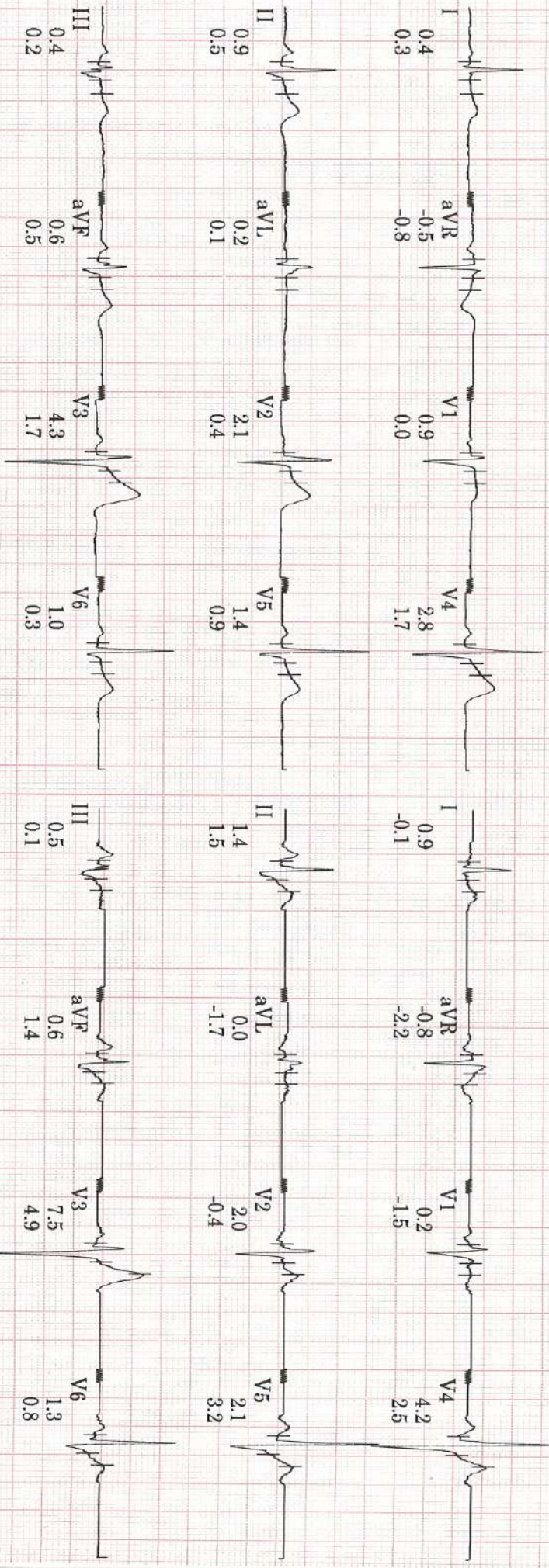
DURGAWALE, SUDDHESH
 ID: 000056937
 41years
 Asian
 Male
 24-Jun-2023
 12:31:13

BRUCE
 Total Exercise time: 9:53
 Max HR: 149bpm 83% of max predicted 179bpm
 Max BP: 120/90
 Maximum workload: 11.5METS
 Reason for Termination: Target HR Achieved
 Comments: STRESS TEST IS NEGATIVE.

Referred by:
 Test ind:

BASELINE
 EXERCISE STAGE 1 57bpm ST @ 10mm/mV
 0:00 1.0METS 80ms postJ

PEAK
 EXERCISE STAGE 4 149bpm ST @ 10mm/mV
 9:53 11.5METS 80ms postJ



Technician:

Unconfirmed

DURGAWALE, SIDDHESH
ID: 00056937

41years Asian

Male

BRUCE
Max HR: 149bpm 83% of max predicted 179bpm
Max BP: 120/90
Reason for Termination: Target HR Achieved
Comments: STRESS TEST IS NEGATIVE.

Total Exercise time: 9:53
Maximum workload: 11.5METS

25.0 mm/s
10.0 mm/mV
100hz

24-Jun-2023
12:31:13

Referred by:
Test ind:



[Handwritten Signature]

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

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	3:29	***	***	1.0	55	110/70	61
	STANDING	0:43	***	***	1.0	60		
	HYPERVENT	0:18	0.2	0.0	1.0	57		
	STAGE 1	3:00	1.7	10.0	4.6	85	110/70	94
EXERCISE	STAGE 2	3:00	2.5	12.0	7.0	96	120/90	115
	STAGE 3	3:00	3.4	14.0	10.1	122		
	STAGE 4	0:53	4.2	16.0	11.5	149		
	RECOVERY	Post	2:01	***	***	1.0	65	

Technician:

Unconfirmed

Specialists in Surgery

Name: Siddhesh P. Durgawale
Present Complaints: No

Date: 24/6/23
Age: 41/Male

Present Medications: No

Personal History:

Unmarried/Married

Diet: Veg/Mixed

Sleep: Normal/Disturbed/Snoring

Alcohol: No

Tobacco: Chews/Smokes No

Bowel: (W)

Bladder: (W)

Physical Activities: Active/Moderate/Sedentary

Allergy: No

Menstrual History: _____

Past Medical History: Appendix operation 15 yrs back

Family History: Mother: DM/HT Father: DM/HT

Physical Examination findings

Investigations:

Pulse: 53 /min BP: 110/70 mm/hg

LDL/HDL

No Pallor/icterus/cyanosis/clubbing/edema

Advice:

RS: (W)

① Avoid oil/ghee/fried foods

CVS: (W)

② Morning walk 45 min daily

P/Abdo: (W)

③ Repeat Lipid after 2 months

CNS: (W)

Musculoskeletal: (W)



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

Dr. Chhaya Vaja


TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
 Age/Gender : 41 Y 4 M 1 D/M
 UHID/MR No : STAR.0000056937
 Visit ID : STAROPV60476
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
 Received : 24/Jun/2023 11:14AM
 Reported : 24/Jun/2023 12:58PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

Methodology : Microscopic
 RBC : Normocytic normochromic
 WBC : Normal in number, morphology and distribution. No abnormal cells seen
 Platelets : Adequate in Number
 Parasites : No Haemoparasites seen
 IMPRESSION : Normocytic normochromic blood picture
 Note/Comment : Please Correlate clinically



Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 12:58PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	14.7	g/dL	13-17	Spectrophotometer
PCV	43.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.88	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	88	fL	83-101	Calculated
MCH	30	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	14.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,400	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	53	%	40-80	Electrical Impedance
LYMPHOCYTES	40	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2332	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1760	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	88	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	220	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	253000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	02	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

Methodology : Microscopic

RBC : Normocytic normochromic

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

Platelets : Adequate in Number

Parasites : No Haemoparasites seen

IMPRESSION : Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
 Age/Gender : 41 Y 4 M 1 D/M
 UHID/MR No : STAR.0000056937
 Visit ID : STAROPV60476
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
 Received : 24/Jun/2023 11:14AM
 Reported : 24/Jun/2023 12:58PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA

BLOOD GROUP TYPE	B			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 12:07PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	86	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



Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 01:00PM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 01:27PM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 02:16PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	66	mg/dL	70-140	GOD - POD

Kindly correlate clinically

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



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
 Age/Gender : 41 Y 4 M 1 D/M
 UHID/MR No : STAR.0000056937
 Visit ID : STAROPV60476
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
 Received : 24/Jun/2023 03:18PM
 Reported : 24/Jun/2023 07:04PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y 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



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
 Age/Gender : 41 Y 4 M 1 D/M
 UHID/MR No : STAR.0000056937
 Visit ID : STAROPV60476
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
 Received : 24/Jun/2023 11:14AM
 Reported : 24/Jun/2023 01:39PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

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

TOTAL CHOLESTEROL	183	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	82	mg/dL	<150	
HDL CHOLESTEROL	48	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	135	mg/dL	<130	Calculated
LDL CHOLESTEROL	118.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.81		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.



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 01:48PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF BIOCHEMISTRY

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

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

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	105.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.7-8.3	BIURET
ALBUMIN	4.90	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.20	g/dL	2.0-3.5	Calculated
A/G RATIO	2.23		0.9-2.0	Calculated



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
Age/Gender : 41 Y 4 M 1 D/M
UHID/MR No : STAR.0000056937
Visit ID : STAROPV60476
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
Received : 24/Jun/2023 11:14AM
Reported : 24/Jun/2023 01:39PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.84	mg/dL	0.6-1.1	ENZYMATIC METHOD
UREA	26.30	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	12.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.70	mg/dL	4.0-7.0	URICASE
CALCIUM	9.20	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.6-4.4	PNP-XOD
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98-107	Direct ISE



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 01:40PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	19.00	U/L	15-73	Glycylcysteine Nitoranalide



Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 12:57PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.2	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	6.71	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	1.010	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



TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE	Collected : 24/Jun/2023 09:06AM
Age/Gender : 41 Y 4 M 1 D/M	Received : 24/Jun/2023 11:14AM
UHID/MR No : STAR.0000056937	Reported : 24/Jun/2023 01:30PM
Visit ID : STAROPV60476	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 854522521252	

DEPARTMENT OF IMMUNOLOGY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method

TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	1.050	ng/mL	0-4	ELFA
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TOUCHING LIVES

Patient Name : Mr.SIDDHESH PANDHARINATH DURGAWALE
Age/Gender : 41 Y 4 M 1 D/M
UHID/MR No : STAR.0000056937
Visit ID : STAROPV60476
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 854522521252

Collected : 24/Jun/2023 09:06AM
Received : 24/Jun/2023 01:06PM
Reported : 24/Jun/2023 02:13PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick

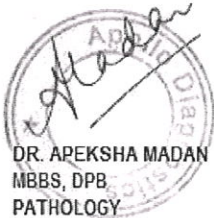
BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

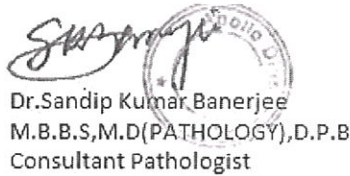
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	0-1	/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

Page 13 of 13



SIN No:UR2134242

12 LEAD REPORT

APOLLO SPECTRA TARDEO MUMBAI

DURGAWALE, SIDDHESH
ID: 000056937

24-Jun-2023
12:34:14

53bpm

BP: 110/70

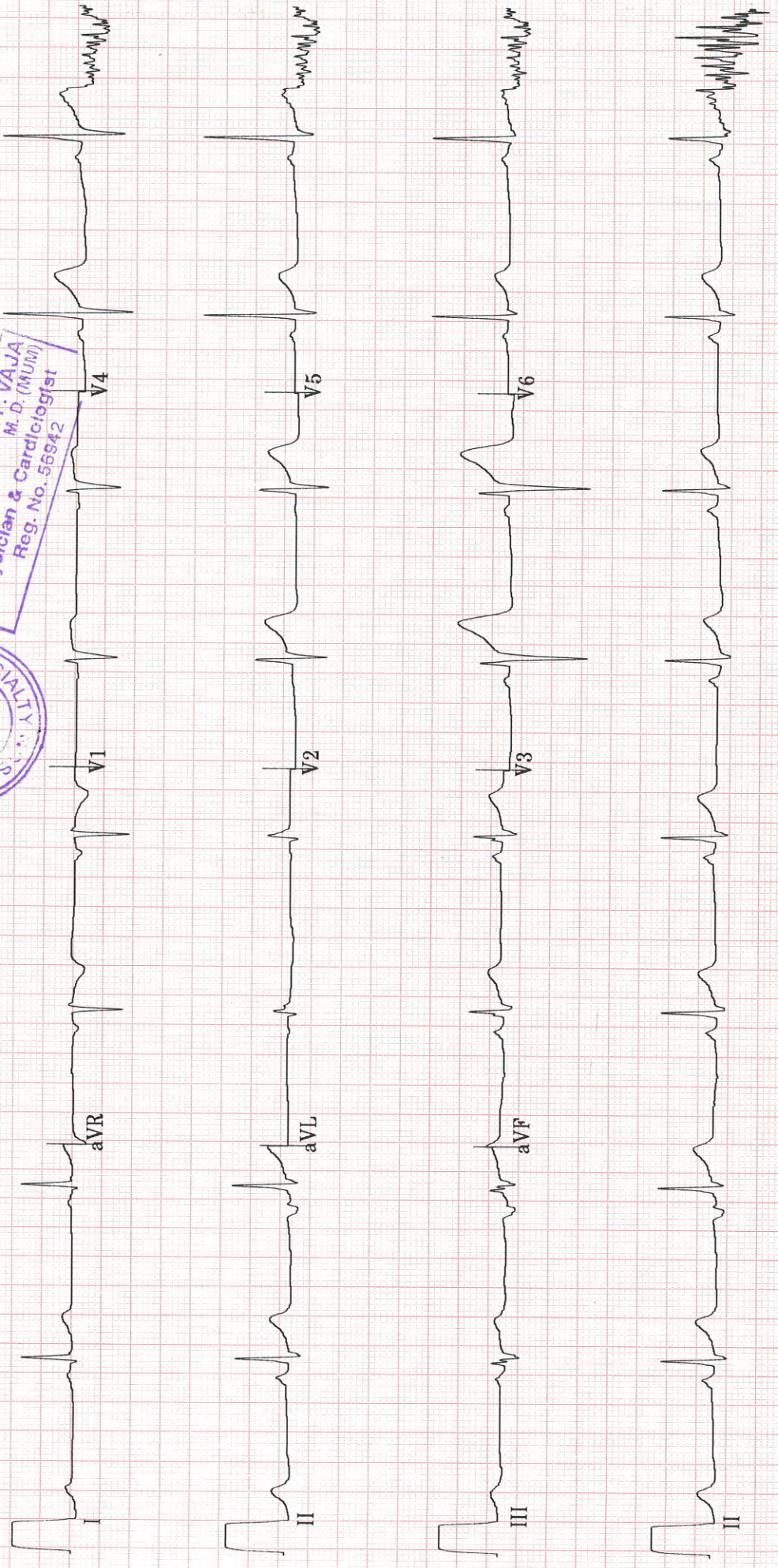
PRETEST
SUPINE
3:00

BRUCE
***mph
***%

sinus bradycardia



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



Patient Name	: Mr. Siddhesh Pandharinath Durgawale	Age	: 41 Y M
UHID	: STAR.0000056937	OP Visit No	: STAROPV60476
Reported on	: 24-06-2023 10:59	Printed on	: 24-06-2023 11:00
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 .

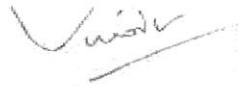
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Printed on:24-06-2023 10:59

---End of the Report---



Dr. VINOD SHETTY
Radiology

Specialists in Surgery

Patient Name : MR.SIDDHESH DURGAWALE
Ref. By : HEALTH CHECKUP

Date : 24-06-2023
Age : 40 years

SONOGRAPHY OF ABDOMEN AND PELVIS

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is well distended and reveals normal wall thickness. There is no evidence of calculus seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.2 x 3.8 cms and the **LEFT KIDNEY** measures 10.4 x 5.2 cms in size. Both kidneys are normal in size, shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

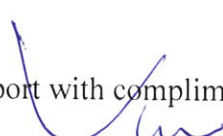
The para-aortic & iliac fossa regions appears normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

PROSTATE : The prostate measures 2.9 x 2.4 x 2.3 cms and weighs 8.6 gms. It is normal in size, shape and echotexture. No prostatic calcification is seen.

URINARY BLADDER : The urinary bladder is well distended and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.

IMPRESSION : Normal Ultrasound examination of the Abdomen and Pelvis.

Report with compliments.


DR.VINOD V.SHETTY
MD, D.M.R.D.
CONSULTANT SONOLOGIST.

Specialists in Surgery

Name: Siddhesh Durgawale

Age: 41/M

- For Health check up
- Offers no complaints
- Hoarseness +

O/E- Ears -  B/L TM intact & mobile

Nose -  Pale mucosa
Septum central

Throat - NAD

Δ-ENT-NAD



EYE REPORT



Name: Siddhesh Dugawale

Date: 24/08/2023

Age / Sex: 41y / M.

Ref No.:

Complaint: No ocular do
No 40 SE/DA

Examination

Spectacle Rx U_r ^{6/6} 6/6 Near U_r & N_s

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

Remarks: Above U_r & N_s

Medications: As per

Trade Name	Frequency	Duration

Follow up: Kunder per

Consultant:

ID 0 *Siddhesh*
Age 41

Height 168cm
Gender Male

Date 24.6.2023
Time 09:58:26

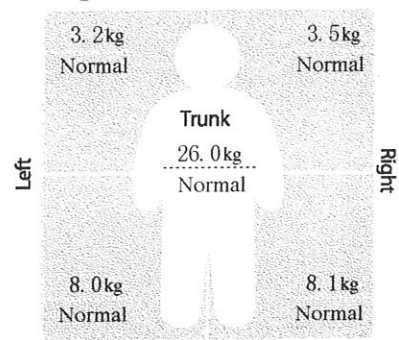
APOLLO SPECTRA HOSPITAL

Body Composition

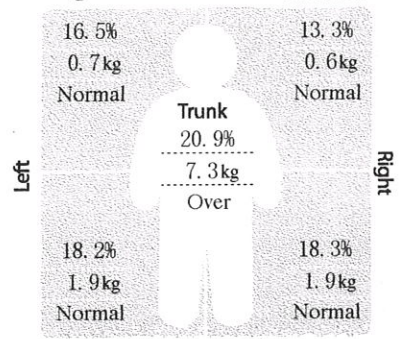
	Under	Normal	Over	UNIT: %	Normal Range
Weight	40 55 70 85	100 115 130 145	160 175 190 205		52.8 ~ 71.4
Muscle Mass Skeletal Muscle Mass	60 70 80 90	100 110 120 130	140 150 160 170		26.4 ~ 32.3
Body Fat Mass	20 40 60 80	100 160 220 280	340 400 460 520		7.5 ~ 14.9
TBW Total Body Water	40.8 kg (34.9 ~ 42.7)		FFM Fat Free Mass	55.5 kg (45.3 ~ 56.5)	
Protein	11.1 kg (9.4 ~ 11.4)		Mineral*	3.63 kg (3.23 ~ 3.95)	

* Mineral is estimated.

Segmental Lean



Segmental Fat



* Segmental Fat is estimated.

Obesity Diagnosis

	Value	Normal Range
BMI Body Mass Index (kg/m ²)	24.4	18.5 ~ 25.0
PBF Percent Body Fat (%)	19.5	10.0 ~ 20.0
WHR Waist-Hip Ratio	0.91	0.80 ~ 0.90
BMR Basal Metabolic Rate (kcal)	1569	1510 ~ 1764

Nutritional Evaluation

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

Weight Management

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

Obesity Diagnosis

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

Muscle-Fat Control

Muscle Control	0.0 kg	Fat Control	- 3.7 kg	Fitness Score	79
----------------	--------	-------------	----------	---------------	----

Impedance

Z	RA	LA	TR	RL	LL
20kHz	270.6	297.2	23.6	267.9	272.2
100kHz	238.3	262.6	19.1	235.3	240.9

* 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: 69.0 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	345	Gate ball	131	Badminton	156
Racket ball	345	Tae-kwon-do	345	Squash	345	Basketball	207	Rope jumping	242	Golf	121
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

2100 kcal

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



सत्यमेव जयते

भारत सरकार

GOVERNMENT OF INDIA



सिद्धेश पंढरीनाथ दुर्गावळे
Siddhesh Pandharinath Durgawale
DOB: 23-02-1982
Gender: Male



2101 3540 4154

आधार - आम आदमी का अधिकार

Patient Name	: Mr. Siddhesh Pandharinath Durgawale	Age/Gender	: 41 Y/M
UHID/MR No.	: STAR.0000056937	OP Visit No	: STAROPV60476
Sample Collected on	:	Reported on	: 24-06-2023 12:11
LRN#	: RAD2029949	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 854522521252		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is well distended and reveals normal wall thickness. There is no evidence of calculus seen in it.

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URINARY BLADDER : The urinary bladder is well distended and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.

IMPRESSION : **Normal Ultrasound examination of the Abdomen and Pelvis.**



Dr. VINOD SHETTY
Radiology

Patient Name	: Mr. Siddhesh Pandharinath Durgawale	Age/Gender	: 41 Y/M
UHID/MR No.	: STAR.0000056937	OP Visit No	: STAROPV60476
Sample Collected on	:	Reported on	: 24-06-2023 11:00
LRN#	: RAD2029949	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 854522521252		

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. VINOD SHETTY
Radiology