


Patient Name : Mr.K SATYANARAYANA	Collected : 23/Mar/2024 09:29AM
Age/Gender : 56 Y 8 M 25 D/M	Received : 23/Mar/2024 11:19AM
UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 12:53PM
Visit ID : CCHAOPV327538	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281169784271	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.4	g/dL	13-17	Spectrophotometer
PCV	42.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.28	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	79.6	fL	83-101	Calculated
MCH	27.3	pg	27-32	Calculated
MCHC	34.3	g/dL	31.5-34.5	Calculated
R.D.W	17.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,530	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	54.6	%	40-80	Electrical Impedance
LYMPHOCYTES	27	%	20-40	Electrical Impedance
EOSINOPHILS	7.5	%	1-6	Electrical Impedance
MONOCYTES	10	%	2-10	Electrical Impedance
BASOPHILS	0.9	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4111.38	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2033.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	564.75	Cells/cu.mm	20-500	Calculated
MONOCYTES	753	Cells/cu.mm	200-1000	Calculated
BASOPHILS	67.77	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.02		0.78- 3.53	Calculated
PLATELET COUNT	284000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	MODIFIED WESTERGRENS
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC				
WBC - MILD EOSINOPHILIA				


 Dr.KASULA SIDDARTHA
 M.B.B.S,DNB(Pathology)
 Consultant Pathologist



SIN No:BED240079534

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

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PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN
IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA



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UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 03:09PM
Visit ID : CCHAOPV327538	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate technology
Rh TYPE	Positive			Microplate technology



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UHID/MR No	: CCHA.0000084198	Reported	: 23/Mar/2024 12:11PM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	127	mg/dL	70-100	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of $> \text{ or } = 126 \text{ mg/dL}$ and/or a random / 2 hr post glucose value of $> \text{ or } = 200 \text{ mg/dL}$ on at least 2 occasions.
- Very high glucose levels ($>450 \text{ mg/dL}$ in adults) may result in Diabetic Ketoacidosis & is considered critical.

K. Anusha

Dr.K.Anusha

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SIN No:PLF02131525

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	211	mg/dL	70-140	HEXOKINASE

Comment:

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	7.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	177	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

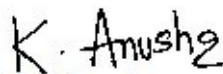
Note: Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.



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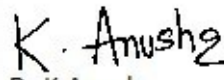
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Chromatogram Report

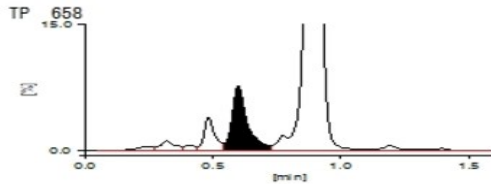
1 V5.28 1 2024-03-23 13:06:48
 ID EDT240036458
 Sample No. 03230090 SL 0006 - 10
 Patient ID
 Name
 Comment

CALIB			
Name	%	Time	Area
A1A	0.5	0.25	7.08
A1B	1.0	0.32	14.88
F	0.4	0.41	5.52
LA1C+	2.3	0.48	35.46
SA1C	7.8	0.60	97.25
AO	90.1	0.89	1408.09
H-V0			
H-V1			
H-V2			

Y = 1.1567X + 0.5642

Total Area 1568.28

HbA1c 7.8 % **IFCC 61 mmol/mol**
HbA1 9.2 % **HbF 0.4 %**



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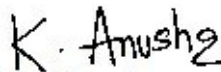
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1 / 1



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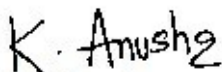
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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	174	mg/dL	<200	CHO-POD
TRIGLYCERIDES	85	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	47	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	127	mg/dL	<130	Calculated
LDL CHOLESTEROL	110	mg/dL	<100	Calculated
VLDL CHOLESTEROL	17	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.70		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	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
ATHEROGENIC INDEX(AIP)	<0.11	0.12 – 0.20	>0.21	

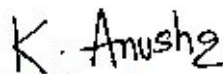
Note:

1) Measurements in the same patient on different days can show physiological and analytical variations.



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DEPARTMENT OF BIOCHEMISTRY

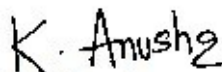
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- 2) NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3) Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dl. When Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



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Consultant biochemist

SIN No:SE04672648



Dr.K.Anusha
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist



This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory,Hyderabad

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
9, #1-58/91/SS, Suresh Square, Madeenaguda, Seri Lingampally Mandal,
Chanda Nagar, Hyderabad, Telangana, India - 500050



APOLLO CLINICS NETWORK
Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

Patient Name	: Mr.K SATYANARAYANA	Collected	: 23/Mar/2024 09:29AM
Age/Gender	: 56 Y 8 M 25 DM	Received	: 23/Mar/2024 11:50AM
UHID/MR No	: CCHA.0000084198	Reported	: 23/Mar/2024 05:06PM
Visit ID	: CCHAOPV327538	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 281169784271		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.80	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.30	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	88.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.37	g/dL	6.6-8.3	Biuret
ALBUMIN	4.11	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.26	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated

Result Rechecked

Comment:

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

Common patterns seen:

1. Hepatocellular Injury:

- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. • Disproportionate increase in AST, ALT compared with ALP. • Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

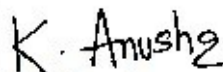
- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated. • ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment: • Albumin- Liver disease reduces albumin levels. • Correlation with PT (Prothrombin Time) helps.



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:SE04672648



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Page 11 of 18
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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
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Patient Name : Mr.K SATYANARAYANA	Collected : 23/Mar/2024 09:29AM
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Emp/Auth/TPA ID : 281169784271	

DEPARTMENT OF BIOCHEMISTRY

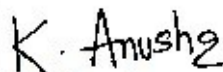
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.90	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	15.20	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.1	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.89	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.13	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.04	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.37	g/dL	6.6-8.3	Biuret
ALBUMIN	4.11	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.26	g/dL	2.0-3.5	Calculated
A/G RATIO	1.26		0.9-2.0	Calculated



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Age/Gender : 56 Y 8 M 25 D/M	Received : 23/Mar/2024 11:50AM
UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 04:50PM
Visit ID : CCHAOPV327538	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281169784271	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	12.00	U/L	<55	IFCC

K. Anusha

Dr.K.Anusha
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist

SIN No:SE04672648

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Patient Name	: Mr.K SATYANARAYANA	Collected	: 23/Mar/2024 09:29AM
Age/Gender	: 56 Y 8 M 25 D/M	Received	: 23/Mar/2024 11:46AM
UHID/MR No	: CCHA.0000084198	Reported	: 23/Mar/2024 01:55PM
Visit ID	: CCHAOPV327538	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 281169784271		

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324


Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.82	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	11.67	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	8.227	µIU/mL	0.38-5.33	CLIA

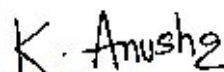
Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma


Dr.E.Maruthi Prasad
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SIN No:SPL24053314

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Patient Name : Mr.K SATYANARAYANA	Collected : 23/Mar/2024 09:29AM
Age/Gender : 56 Y 8 M 25 D/M	Received : 23/Mar/2024 11:46AM
UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 01:55PM
Visit ID : CCHAOPV327538	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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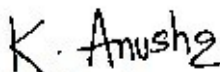
DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.410	ng/mL	0-4	CLIA

K. Anusha

Dr.K.Anusha
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist

SIN No:SPL24053314

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Patient Name : Mr.K SATYANARAYANA	Collected : 23/Mar/2024 09:29AM
Age/Gender : 56 Y 8 M 25 D/M	Received : 23/Mar/2024 03:34PM
UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 06:50PM
Visit ID : CCHAOPV327538	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281169784271	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Bromothymol Blue
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	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY


Dr. SRINIVAS N.S. NORI
M.B.B.S, M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UR2313899

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



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Age/Gender : 56 Y 8 M 25 D/M	Received : 23/Mar/2024 05:19PM
UHID/MR No : CCHA.0000084198	Reported : 23/Mar/2024 07:17PM
Visit ID : CCHAOPV327538	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 281169784271	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	POSITIVE (+++)		NEGATIVE	Dipstick

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR

Dr. Srinivas N.S. Nori
Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UF011327

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CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of

Mr. Sathyanarayana.

on

23/03/24

After reviewing

the medical history on clinical examination it has been found that he/she is

Medically Fit	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
---------------	---	-----------------------------

Fit with restrictions/recommendations

Though following restrictions have been revealed, in my opinion, these are not impediments to the job.

- 1.....
- 2.....
- 3.....

However the employee should follow the advice/medication that has been communicated to him/her.

Review after

Currently Unfit.

Review after.....

Recommended Unfit

Dr.



Medical Officer

The Apollo Clinic, Chandanagar



Dr. BOLLINI MAANASA JAYARAM

This certificate is not meant for medico-legal purposes

Reg No: TSMC/FMR/00039

Qualification: M.B.B.S, M.Sc (Perfusion)

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana.

APOLLO CLINICS NETWORK

Andhra Pradesh: **Tirupati** (Sankarabadi Circle) **Vizag** (Seethamma Peta)

Telangana: **Hyderabad** (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Nallakunta | Nizampet | SR Nagar | Vanasthalipuram)

Online appointments: www.apolloedoc.in | Online reports: <https://phr.apolloclinic.com> | www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Name : SATYANARAYANA K

Age : 56 yrs

Sex : Male

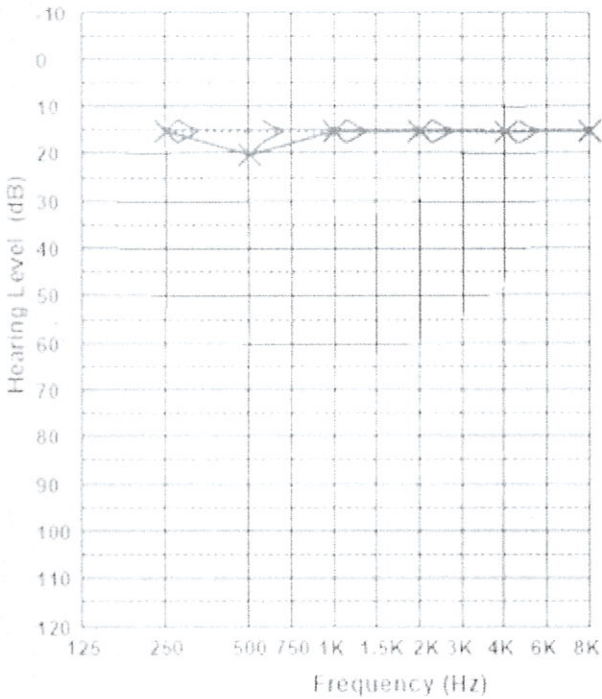
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C R No. : CCHA-OCS-241683

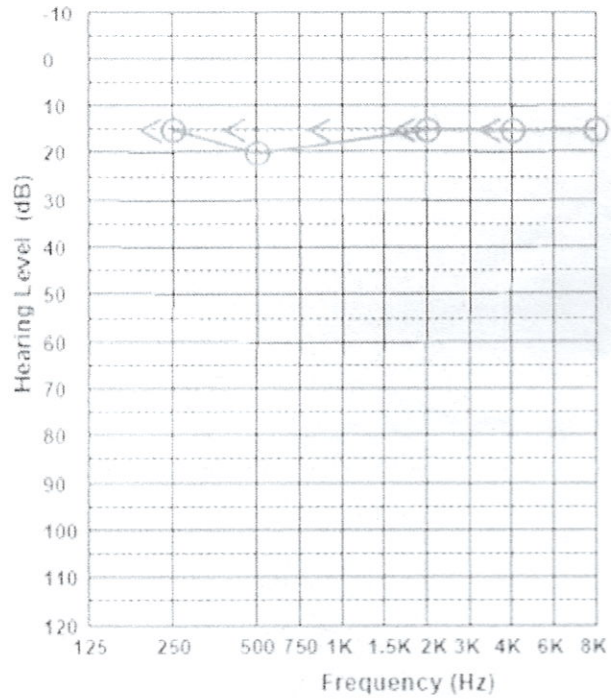
Audiogram No. : 000058

PURE TONE TEST

LEFT EAR



RIGHT EAR



Freq	125	250	500	750	1000	1.5K	2K	3K	4K	6K	8K
R		15	20				15		15		15
R(M)											
BCR		15	15		15		15		15		

PTA (R) = 17dB PTA-M(R) = PTA-BCM(R) = (500,1K,2K)

Freq	125	250	500	750	1000	1.5K	2K	3K	4K	6K	8K
L		15	20		15		15		15		15
L(M)											
BCL		15	15		15		15		15		

PTA (L) = 16dB PTA-M (L) = PTA-BCM(L) = (500,1K,2K)

Legend

	R	L
Air	○	×
Air/Masked	△	□
Bone	<	>
Bone/Masked	[]
MCL	M	M
UCL	m	m
Free Field	∅	⊗
FF/Prothesis	A	A
Binaural	B	
No Response	-	

AUDIOLOGICAL DIAGNOSIS

BOTHEARS; NORMAL HEARING SENSITIVITY WITH NORMAL HAERING LIMITS

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana.

APOLLO CLINICS NETWORK

Andhra Pradesh: Tirupati (Sankarambadi Circle) **Vizag** (Seethamma Peta)

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Nallakunta | Nizampet | SR Nagar | Vanasthalipuram)

Online appointments: www.apolloedoc.in | Online reports: <https://phr.apolloclinic.com> | www.apolloclinic.com

Audiometer : Labat LAKSHM
TO BOOK AN APPOINTMENT

1860 500 7788

PRESCRIPTION

Besaid Bata Show Room ,Madinaguda opp SBI Bank Hyderabad .040-23046745

SATYANARAYANA DVV Date: 23-03-2024

Age: 36

UHID: PH NO

	SPHE	CYL	AXIS	ADD	CVA
RIGHT	-1.75	-0.5	100		20/20
LEFT	-1.75	-0.5	110		20/20

Single Vision
Glass

Biofocal

Progressive
Normal Progressive

CR-39

D- Biofocal

Internal Progressive

Polycarbonate

(Glass/CR)

ARC

High Index

Photochromic

DIAGNOSIS :

Colour Vision Test:

RE: NORMAL

LE: NORMAL

NEXT EXAMINATIONS : 1 Month / Year

Signature

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana.

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TO BOOK AN APPOINTMENT



1860 500 7788

THE APOLLO CLINIC
PHYSICAL EXAMINATION FORM

Arcofenni

BILL DATE : 23/3/24. UHID: 84198

BILL NO: 85752

PATIENT NAME : Mr. Satyanarayana K AGE: 56 yrs.

Weight : 81 Kgs

Height : 168 Cms

Chest Measurement :

(in)

(out)

Abdomen :

Pulse : / bpm

B.P : 130/90 / mm Hg

SPO₂ : 98%
99%

Waist :- 103
Hip :- 106,
BMI

ID: 84198
MR K SATYANARAYANA
Male 56 Years
Req. No. :

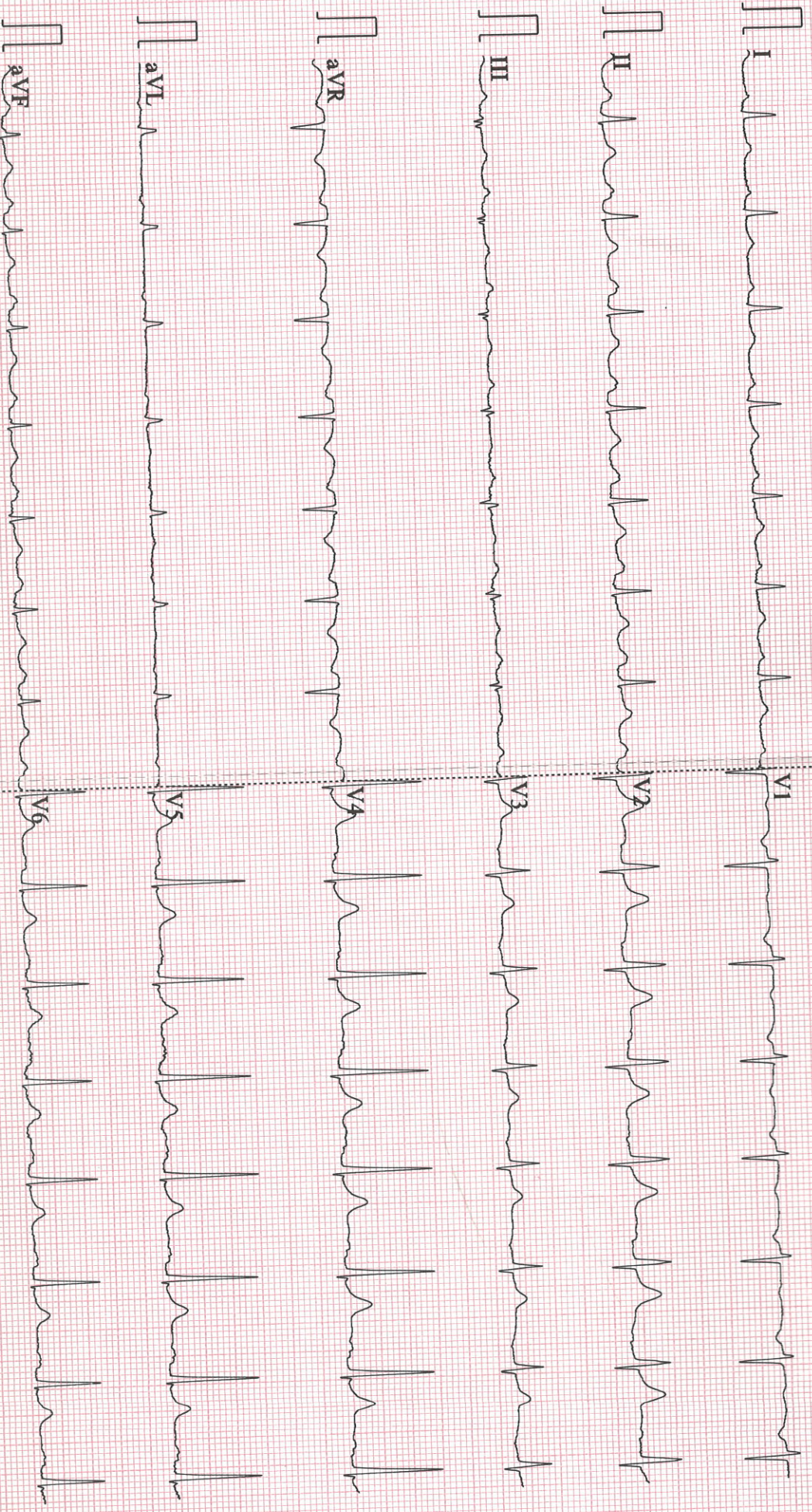
3P1

23-03-2024 11:55:44
HR : 89 bpm
P : 126 ms
PR : 188 ms
QRS : 80 ms
QT/QTcBz : 352/429 ms
P/QRS/T : 63/33/53
RV5/SV1 : 1.517/0.687 mV

Diagnosis Information:
Sinus rhythm
Normal ECG

Report Confirmed by:

NSA



Name <u>MY - K - SATYA NARAYANA</u>	Date <u>23.3.24</u>
Age <u>56y</u>	UHID No. <u>84198</u>
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Ref. Physician
Ref. Diagnosis	<u>AVC of MI</u>

Echocardiogram Report

Echogenicity Poor Adequate Good Ht. _____ Wt. _____ BSA _____

DIMENSIONS		NORMAL	DIMENSIONS		NORMAL
Ao (ed) <u>3.8</u>	cm	(1.5cm / m2)	IVS (Ed) <u>1.9</u>	cm	(0.6 - 1.2 cm)
LA (es) <u>2.8</u>	cm	(1.5cm / m2)	LVPW (Ed) <u>1.2</u>	cm	(0.6 - 1.1 cm)
RVID (ed) _____	cm	(0.9 cm / m2)	EF <u>70</u>		(0.62 - 0.85)
LVID (ed) <u>4.2</u>	cm	(2.6 - 3.4 cm / m2)	% FD <u>36</u>		(2.8% - 42%)
LVID (es) <u>3.2</u>					

MORPHOLOGICAL DATA

Mitral Valve	AML _____	Interatrial septum _____
	PML _____	Interventricular septum _____
Aortic Valve	_____	Pulmonary artery _____
Tricuspid valve	_____	Aorta _____
Pulmonary valve	_____	Right atrium _____
Right ventricle	_____	Left atrium _____

Patient Name : Mr. K SATYANARAYANA

Age/Gender : 56 Y/M

UHID/MR No. : CCHA.0000084198

OP Visit No : CCHAOPV327538

Sample Collected on :

Reported on : 24-03-2024 09:57

LRN# : RAD2278619

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 281169784271

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Elevated Left Dome Of Diaphragm .

No obvious active pleuro-parenchymal lesion seen .

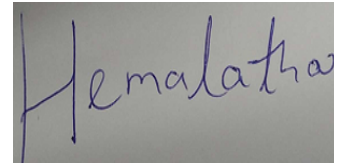
Both costophrenic and cardiophrenic angles are clear .

Right diaphragm normal in position and contour .

Thoracic wall and soft tissues appear normal.

SUGGESTED :

1 . CT CHEST TO RULE OUT DIAPHRAGMATIC HERNIA .



Dr. G HEMALATHA
MBBS,DNB
Radiology

Patient Name : Mr. K SATYANARAYANA

Age/Gender : 56 Y/M

UHID/MR No. : CCHA.0000084198

OP Visit No : CCHAOPV327538

Sample Collected on :

Reported on : 23-03-2024 14:56

LRN# : RAD2278619

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 281169784271

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size .**Increased Echogenicity**. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals. **Liver measures : 14.5 cm .**

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.
Spleen measures : 9 cm .

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.
Right kidney measures : 100 x 45 mm . , Left kidney measures : 109 x 45 mm .

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate Enlarge in size and normal echo texture.No evidence of necrosis/calcification seen.
Prostate volume - 24 cc .

IMPRESSION:-

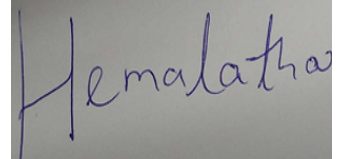
- 1 . GRADE - I PROSTATOMEGALY .**
- 2 . GRADE - I FATTY LIVER .**

(The sonography findings should always be considered in correlation with the clinical and other

Patient Name : Mr. K SATYANARAYANA

Age/Gender : 56 Y/M

investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Dr. G HEMALATHA
MBBS,DNB
Radiology

To,

The Coordinator,

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

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	KATTA SAROJADEVI
DATE OF BIRTH	03-01-1971
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	23-03-2024
BOOKING REFERENCE NO.	23M162396100101510S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. K SATYANARAYANA
EMPLOYEE EC NO.	162396
EMPLOYEE DESIGNATION	JOINT MANAGER
EMPLOYEE PLACE OF WORK	B G PURA
EMPLOYEE BIRTHDATE	13-07-1968

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 **17-03-2024** till **31-03-2024**. 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's spouse 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 (Arcotemi Healthcare Limited))



भारत सरकार

Government of India



2811 6978 4271

Issue Date: 25/12/2011



కట్ట సత్యనారాయణ
Katta Satyanarayana
పుట్టిన తేదీ / DOB : 13/07/1968
పురుషుడు / Male

आधार पहचान का प्रमाण है, नागरिकता का नहीं।
Aadhaar is a proof of Identity, not of citizenship.



2811 6978 4271

मेरा आधार, मेरी पहचान

4

Patient Name : Mr. K SATYANARAYANA Age : 56 Y/M
UHID : CCHA.0000084198 OP Visit No : CCHAOPV327538
Conducted By: : Dr. A RAVINDRA Conducted Date : 23-03-2024 18:20
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed) 3.3 CM
LA (es) 2.8 CM
LVID (ed) 4.0 CM
LVID (es) 3.0 CM
IVS (Ed) 1.3 CM
LVPW (Ed) 1.2 CM
EF 70.00%
%FD 35.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

INTER ATRIAL SEPTUM NORMAL

INTER VENTRICULAR SEPTUM NORMAL

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NO EFFUSION

LEFT VENTRICLE:- NO RWMA,

Patient Name	: Mr. K SATYANARAYANA	Age	: 56 Y/M
UHID	: CCHA.0000084198	OP Visit No	: CCHAOPV327538
Conducted By:	: Dr. A RAVINDRA	Conducted Date	: 23-03-2024 18:20
Referred By	: SELF		

COLOUR AND DOPPLER STUDIES:- NO MR/TR/AR/PR,

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.7m/sec A: 0.9m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO
1.1m/sec

VELOCITY ACROSS THE AV UPTO 1.1m/sec

IMPRESSION:-

NORMAL CARDIAC CHAMBERS,

NO RWMA,

GOOD LV FUNCTION,

CONCENTRIC LVH,

GRADE-I DIASTOLIC DYSFUNCTION,



Dr. A
RAVINDRA

Patient Name : Mr. K SATYANARAYANA
UHID : CCHA.0000084198
Conducted By: : Dr. A RAVINDRA
Referred By : SELF

Age : 56 Y/M
OP Visit No : CCHAOPV327538
Conducted Date : 23-03-2024 18:20

NO MR/TR/AR/PR,

NO PE/ CLOT/ VEGS.

Patient Name	: Mr. K SATYANARAYANA	Age	: 56 Y/M
UHID	: CCHA.0000084198	OP Visit No	: CCHAOPV327538
Reported By:	: Dr. A RAVINDRA	Conducted Date	: 23-03-2024 19:40
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 89beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement see

Impression:

NORMAL RESTING ECG.

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



Dr. A RAVINDRA