

Patient Name : Mr.CHIDURALA KIRAN KUMAR
 Age/Gender : 35 Y 9 M 13 D/M
 UHID/MR No : CUPP.0000086913
 Visit ID : CUPPOPV131368
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 96268


Collected : 23/Mar/2024 10:11AM
 Received : 24/Mar/2024 12:11PM
 Reported : 24/Mar/2024 02:00PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.7	g/dL	13-17	Spectrophotometer
PCV	42.70	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.04	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	84.8	fL	83-101	Calculated
MCH	29.3	pg	27-32	Calculated
MCHC	34.5	g/dL	31.5-34.5	Calculated
R.D.W	13.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	13,690	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	47	%	40-80	Electrical Impedance
LYMPHOCYTES	36	%	20-40	Electrical Impedance
EOSINOPHILS	07	%	1-6	Electrical Impedance
MONOCYTES	10	%	2-10	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6434.3	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	4928.4	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	958.3	Cells/cu.mm	20-500	Calculated
MONOCYTES	1369	Cells/cu.mm	200-1000	Calculated
BASOPHILS	54.76	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.31		0.78- 3.53	Calculated
PLATELET COUNT	454000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	9	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC
 WBC - LEUCOCYTOSIS & EOSINOPHILIA
 PLATELETS : MILD THROMBOCYTOSIS



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

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SIN No:HA06697627

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NO HEMOPARASITES SEEN



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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	99	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.

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K. Anusha
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SIN No:PLF02131936

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Patient Name : Mr.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 02:12PM
Age/Gender : 35 Y 9 M 13 D/M	Received : 24/Mar/2024 10:40AM
UHID/MR No : CUPP.0000086913	Reported : 24/Mar/2024 11:05AM
Visit ID : CUPPOPV131368	Status : Final Report
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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)	80	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.

K. Anusha

Dr.K.Anusha
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Consultant Biochemist

SIN No:PLP1436631

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	134	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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- 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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SIN No:EDT240036724

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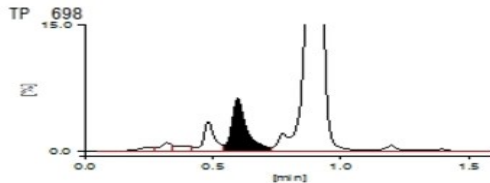
Chromatogram Report

I V5.28 1 2024-03-23 16:31:17
 ID EDT240036724
 Sample No. 03230217 SL 0019 - 07
 Patient ID
 Name
 Comment

CALIB Name	%	Time	Area
A1A	0.4	0.25	7.74
A1B	0.6	0.32	10.95
F	0.5	0.39	10.31
LA1C+	2.1	0.48	39.99
SA1C	6.3	0.60	93.32
AO	91.9	0.90	1730.59
H-V0			
H-V1			
H-V2			

Total Area 1892.90

HbA1c 6.3 % **IFCC 45 mmol/mol**
 HbA1 7.3 % HbF 0.5 %



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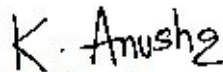
DEPARTMENT OF BIOCHEMISTRY

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	150	mg/dL	<200	CHO-POD
TRIGLYCERIDES	57	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	36	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated
LDL CHOLESTEROL	102.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	11.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.17		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated


Comment:

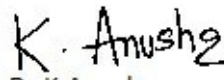
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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.
- 2) NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.


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- 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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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.49	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.38	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	36	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	28.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	93.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.42	g/dL	6.6-8.3	Biuret
ALBUMIN	4.60	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.82	g/dL	2.0-3.5	Calculated
A/G RATIO	1.63		0.9-2.0	Calculated

Comment:

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

Common patterns seen:


1. Hepatocellular Injury:

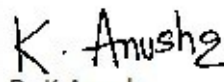
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.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


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



SIN No:SE04673111

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

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

H. No 6-48/3, Peerzadiguda Panchayat, Boduppal,
 R R District., Uppal, Hyderabad, Telangana, India - 500039

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.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 10:11AM
Age/Gender : 35 Y 9 M 13 D/M	Received : 23/Mar/2024 01:11PM
UHID/MR No : CUPP.0000086913	Reported : 23/Mar/2024 05:25PM
Visit ID : CUPPOPV131368	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 96268	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.92	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	13.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.04	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.45	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.43	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.42	g/dL	6.6-8.3	Biuret
ALBUMIN	4.60	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.82	g/dL	2.0-3.5	Calculated
A/G RATIO	1.63		0.9-2.0	Calculated

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

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

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SIN No:SE04673111

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

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 R R District, Uppal, Hyderabad, Telangana, India - 500039

1860 500 7788
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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.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 10:11AM
Age/Gender : 35 Y 9 M 13 D/M	Received : 23/Mar/2024 01:11PM
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Visit ID : CUPPOPV131368	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 96268	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	38.00	U/L	<55	IFCC

K. Anusha

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

SIN No:SE04673111

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



Patient Name : Mr.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 10:11AM
Age/Gender : 35 Y 9 M 13 D/M	Received : 23/Mar/2024 01:25PM
UHID/MR No : CUPP.0000086913	Reported : 23/Mar/2024 03:42PM
Visit ID : CUPPOPV131368	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 96268	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.01	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.86	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.612	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

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

TSH	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

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



SIN No:SPL24053690

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

Patient Name : Mr.CHIDURALA KIRAN KUMAR
Age/Gender : 35 Y 9 M 13 D/M
UHID/MR No : CUPP.0000086913
Visit ID : CUPPOPV131368
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 96268

Collected : 23/Mar/2024 10:11AM
Received : 23/Mar/2024 01:25PM
Reported : 23/Mar/2024 03:42PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

K. Anusha

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

SIN No:SPL24053690

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

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Patient Name : Mr.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 10:11AM
Age/Gender : 35 Y 9 M 13 D/M	Received : 23/Mar/2024 01:35PM
UHID/MR No : CUPP.0000086913	Reported : 23/Mar/2024 04:21PM
Visit ID : CUPPOPV131368	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 96268	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		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. B Pavani
 M.B.B.S, M.D(pathalogy)
 Consultant Pathologist

SIN No:UR2314323

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



Patient Name : Mr.CHIDURALA KIRAN KUMAR
 Age/Gender : 35 Y 9 M 13 D/M
 UHID/MR No : CUPP.0000086913
 Visit ID : CUPPOPV131368
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 96268

Collected : 23/Mar/2024 02:12PM
 Received : 24/Mar/2024 10:31AM
 Reported : 24/Mar/2024 11:27AM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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



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

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SIN No:UPP017344

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

Patient Name : Mr.CHIDURALA KIRAN KUMAR	Collected : 23/Mar/2024 10:11AM
Age/Gender : 35 Y 9 M 13 D/M	Received : 23/Mar/2024 01:45PM
UHID/MR No : CUPP.0000086913	Reported : 23/Mar/2024 04:24PM
Visit ID : CUPPOPV131368	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 96268	


DEPARTMENT OF CLINICAL PATHOLOGY

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

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

***** End Of Report *****

Result/s to Follow:
PERIPHERAL SMEAR


Dr. B Pavani
M.B.B.S, M.D(pathalogy)
Consultant Pathologist

SIN No:UF011359

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

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The Apollo Clinic

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Expertise. Care for you.

PHYSICAL EXAMINATION FORM

Date

23/3/24

Age

35y/m

Name

Mr. Chidurala Kiran
Kumar

UHID:

86913

Height

170 Cms

BMI

25.9

Weight

73.2 Kgs

BP

140/80

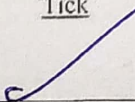
Apollo Clinic, H NO.6-48/3, PEERZADIGUDA, BESIDE RAMRAJ
COTTONS, BODUPPAL, R RDISTRCT, HYD PH. NO.04049503373/74

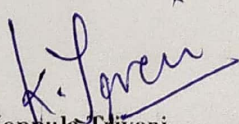


CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of
Mr. C. Kiran kumar on 25/3/24.

After reviewing the medical history and on clinical examination it has been found that
he/ she is'

<ul style="list-style-type: none"> • Medically Fit 	<u>Tick</u> 
<ul style="list-style-type: none"> • Fit with Restrictions/ Recommendations <p>Though following restrictions have been revealed in my opinion, these are not impediments to the job.</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>However the candidate should follow the advice medication that has been communicated to him/her.</p> <p>Review after</p>	
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after.....recommended.</p>	
<ul style="list-style-type: none"> • Unfit 	


Dr. Koppula Triveni
 Reg No :05078
 Consultant physician
 Apollo Clinic
 Uppal
Dr. KOPPULA TRIVENI
MBBS
TSMC/ FMR/05078
APOLLO FAMILY PHYSICIAN

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TELANGANA & AP

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)
Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

POWER PRESCRIPTION

NAME: C. KIRAN KUMAR

GENDER: M/F

DATE: 23/3/20

AGE: 25

UHID: 86913

RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE				6/6
NEAR				20/20

LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE				6/6
NEAR				20/20

COLOUR VISION : Normal

DIAGNOSIS :
 OTHER FINDINGS : Jovii

INSTRUCTIONS :


SIGNATURE

86913
35 Years

ch.kiran
Male

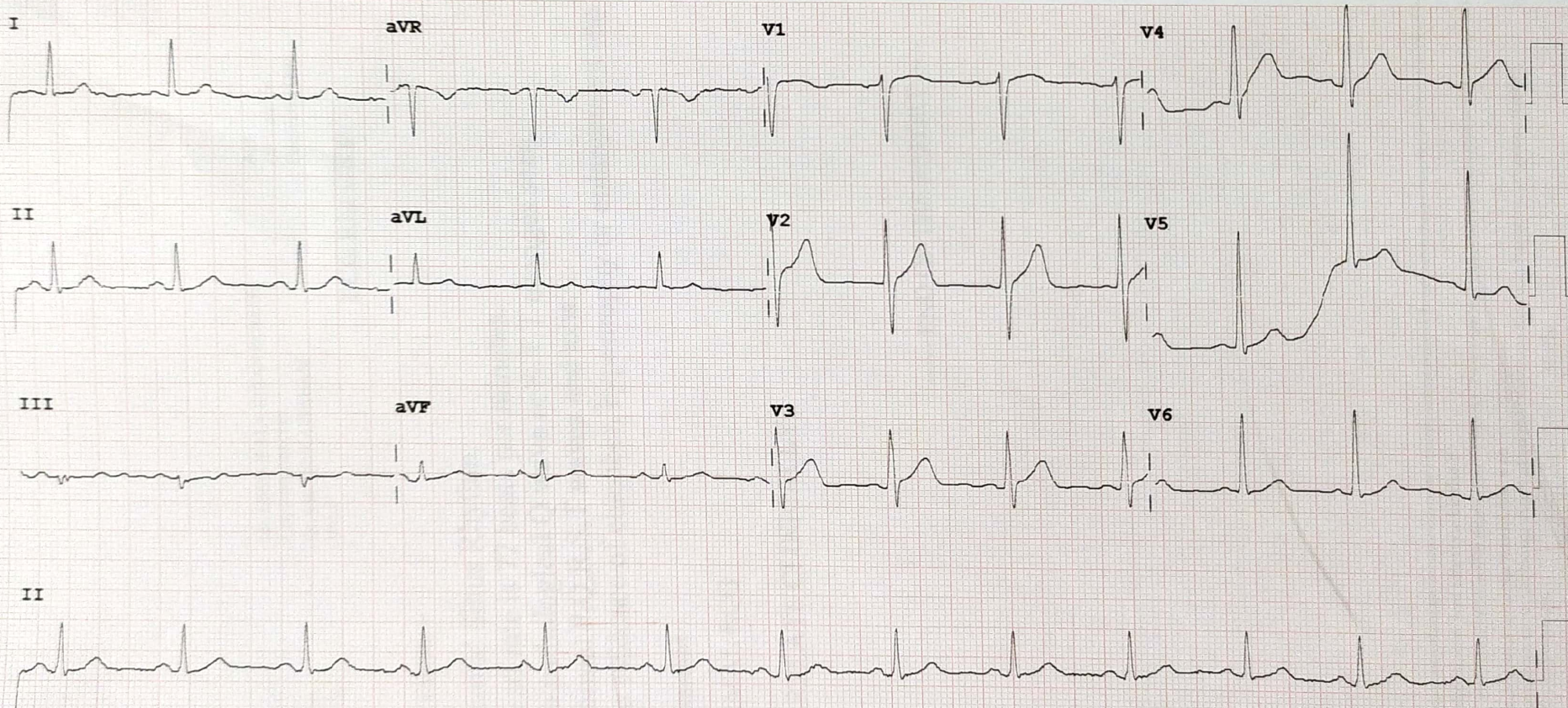
03/01/2010 06:51:15

Apollo Clinic A S Rao Nagar

Rate 77 . Sinus rhythm
RR 779 . Borderline ST elevation, anterior leads
PR 157 . Baseline wander in lead(s) V1,V2,V4,V5
QRSD 90
QT 364
QTcB 412
QTcF 396
--AXIS--
P 53
QRS 19
T 35
12 Lead; Standard Placement

Normal

Unconfirmed Diagnosis





Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50~ 0.15- 40 Hz

PH100B CL P?

PHILIPS

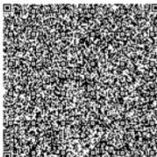



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Government of India

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Unique Identification Authority of India

రిజిస్ట్రేషన్/Enrolment No.: 0000/00620/51825



To
 చ కిరణ్ కుమార్
 Ch Kiran Kumar
 Kiran Kumar Chidurala,
 3-44-29/B/422,
 Ganesh Nagar Colony,
 Near water tank, Pochamma temple,
 VTC: Chengicherla,
 PO: Boduppal,
 District: Medchal-malkajgiri,
 State: Telangana,
 PIN Code: 500092,
 Mobile: 8247610909



Signature Not Verified
 Digitally signed by Kiran Kumar
 DN: cn=Kiran Kumar, o=Government of India, email=Kiran.Kumar@nic.gov.in, c=IN
 Date: 2023.08.11 11:30:23
 GMT+05:30


మీ ఆధార్ సంఖ్య / Your Aadhaar No. :
2883 5462 8026
 VID : 9111 0462 9711 6807

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India





చ కిరణ్ కుమార్
 Ch Kiran Kumar
 పుట్టిన తేదీ/DOB: 10/06/1988
 పురుషుడు/ MALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమే, పౌరత్వం లేదా పుట్టిన తేదీ కి కాదు. ఇది ధృవీకరణతో మాత్రమే ఉపయోగించాలి (అన్లైన్ ప్రమాణీకరణ లేదా QR కోడ్ / అన్లైన్ XML యొక్క స్కానింగ్).

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

2883 5462 8026
 VID : 9111 0462 9711 6807

నా ఆధార్, నా గుర్తింపు

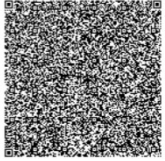



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Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
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చిరునామా:
 కిరణ్ కుమార్ చిదురాల, శ్రీ-భ-౪-౨౯/బి/౪౨౨, గణేశ్ గాంధీ నగర్ కాలనీ, నీరు వాటర్ ట్యాంక్, నామ్మ బెంపుర్, గణేశ్ నగర్ కాలనీ, బోడప్పల్, మేడ్చల్-మల్కాజగిరి, తెలంగాణ - 500092

Address:
 Kiran Kumar Chidurala, 3-44-29/B/422,
 Ganesh Nagar Colony, Near water tank,
 Pochamma temple, Chengicherla, PO:
 Boduppal, DIST: Medchal-malkajgiri,
 Telangana - 500092



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 VID : 9111 0462 9711 6807

1947 | help@uidai.gov.in | www.uidai.gov.in

సమాచారము / INFORMATION

- ఆధార్ అనేది గుర్తింపు రుజువు, పౌరత్వం లేదా పుట్టిన తేదీ కి కాదు. పుట్టిన తేదీ అనేది ఆధార్ సంఖ్య జోల్డర్ సమర్పించిన నిబంధనలలో ఏర్పాటు పుట్టిన తేదీ పత్రం యొక్క రుజువు ఆధారం ద్వారా ఇచ్చిన సమాచారంపై ఆధారపడి ఉంటుంది.
- ఈ ఆధార్ లేఖను UIDAI నియమించిన ప్రమాణీకరణ ఏజెన్సీ ద్వారా అన్లైన్ ప్రమాణీకరణ ద్వారా లేదా యాన్ లైన్లో అందుబాటులో ఉన్న mAadhaar లేదా ఆధార్ QR స్కానర్ యాన్లైన్ ఉపయోగించి లేదా www.uidai.gov.inలో అందుబాటులో ఉన్న సురక్షిత QR కోడ్ ద్వారా యాన్లైన్ ఉపయోగించి QR కోడ్ స్కానింగ్ ద్వారా ధృవీకరణించాలి.
- ఆధార్ ప్రత్యేకమైనది మరియు సురక్షితమైనది.
- ఆధార్ సమాచారం చేసిన తేదీ నుండి ప్రతి 10 సంవత్సరాల తర్వాత గుర్తింపు మరియు చిరునామాకు సంబంధించిన పత్రాలతో ఆధార్ ను సరిదిద్దాలి.
- నిరధి ప్తములకు మరియు ప్రభుత్వాల ప్రయోజనాలు/సేవలను పొందడంలో ఆధార్ మీకు సహాయపడుతుంది.
- మీ మొత్తల్ సంఖ్య మరియు ఈ-మెయిల్ వంటి ఆధార్ లో అందరీ చేసుకోండి.
- ఆధార్ సేవలను పొందేందుకు mAdhaar యాన్లైన్ డౌన్లోడ్ చేసుకోండి.
- ఆధార్ / బయోమెట్రిక్లను ఉపయోగించనప్పుడు తగ్గరను నిర్ధారించడానికి లాక్/అన్లాక్ ఆధార్/బయోమెట్రిక్స్ పద్ధతీ ఉపయోగించండి.
- ఆధార్ను కోర్ సంస్థలు తప్పనిసరిగా సమ్మతి పొందవలసి ఉంటుంది
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAdhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAdhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.



Apollo Clinic Uppal

From: noreply@apolloclinics.info
Sent: Thursday, March 21, 2024 6:15 PM
To: KIRANKUMAR.CHIDURALA@BANKOFBARODA.COM
Cc: Apollo Clinic Uppal; Nishanth Reddy; Syamsunder M
Subject: Your appointment is confirmed



Dear MR. CHIDURALA KIRAN KUMAR,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **UPPAL clinic** on **2024-03-23** at **07:30-07:45**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

**Clinic Address: APOLLO HEALTH AND LIFESTYLE LIMITED HNO- 6-48/3,PEERZADIGUDA
PANCHAYAT, BODUPPAL,R R DISTRICT,HYDERABAD-500039.**

Contact No: (040) 49503373 -74/.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic

Patient Name : Mr. CHIDURALA KIRAN KUMAR Age : 35 Y/M
UHID : CUPP.0000086913 OP Visit No : CUPPOPV131368
Reported By: : Dr. CH VENKATESHAM Conducted Date : 24-03-2024 12:14
Referred By : SELF

ECG REPORT

Observation :-


1. Normal Sinus Rhythm.
2. Heart rate is 77 beats 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 ECG

CORRELATE CLINICALLY.

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



Dr. CH VENKATESHAM

Patient Name	: Mr. CHIDURALA KIRAN KUMAR	Age/Gender	: 35 Y/M
UHID/MR No.	: CUPP.0000086913	OP Visit No	: CUPPOPV131368
Sample Collected on	:	Reported on	: 23-03-2024 19:53
LRN#	: RAD2278674	Specimen	:
Ref Doctor	: DR SRAVYA SREE		
Emp/Auth/TPA ID	: 96268		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size 130 mm and **increased echotexture**. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

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 in size 80 mm. No focal lesion seen. Splenic vein appears normal.

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 : 99 x 46 mm.

Left kidney : 104 x 49 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.

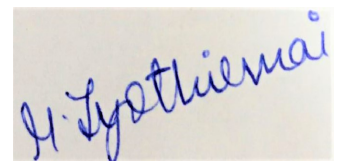
Prostate is normal in size 23 x 30 x 30 mm and echo texture. Volume measure 10 cc. No evidence of necrosis/calcification seen.

IMPRESSION:-

*** GRADE I FATTY LIVER.**

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Dr. MATTA JYOTHIRMAI
MBBS, MDRD
Radiology

Patient Name : Mr. CHIDURALA KIRAN KUMAR

Age/Gender : 35 Y/M

UHID/MR No. : CUPP.0000086913

OP Visit No : CUPPOPV131368

Sample Collected on :

Reported on : 23-03-2024 17:49

LRN# : RAD2278674

Specimen :

Ref Doctor : DR SRAVYA SREE

Emp/Auth/TPA ID : 96268

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

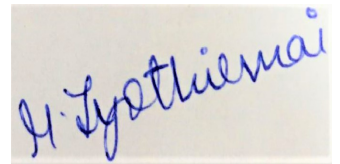
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. MATTA JYOTHIRMAI
MBBS, MDRD
Radiology

Name: Mr. CHIDURALA KIRAN KUMAR
Age/Gender: 35 Y/M
Address: HYD
Location: HYDERABAD, TELANGANA
Doctor:
Department: GENERAL
Rate Plan: UPPAL_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. AYYAPPA SWAMY AMARA

MR No: CUPP.0000086913
Visit ID: CUPPOPV131368
Visit Date: 23-03-2024 09:32
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mr. CHIDURALA KIRAN KUMAR
Age/Gender: 35 Y/M
Address: HYD
Location: HYDERABAD, TELANGANA
Doctor:
Department: GENERAL
Rate Plan: UPPAL_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. KOPPULA TRIVENI

MR No: CUPP.0000086913
Visit ID: CUPPOPV131368
Visit Date: 23-03-2024 09:32
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. CHIDURALA KIRAN KUMAR
Age/Gender: 35 Y/M
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MR No: CUPP.0000086913
Visit ID: CUPPOPV131368
Visit Date: 23-03-2024 09:32
Discharge Date:
Referred By: SELF

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
04-04-2024 17:47	86 Beats/min	140/70 mmHg	22 Rate/min	98.6 F	170 cms	73 Kgs	%	%	Years	25.26	cms	cms	cms		AHLL09781

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Established Patient: No

Vitals

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Established Patient: No

Vitals

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Patient Name : Mr. CHIDURALA KIRAN KUMAR Age : 35 Y/M
UHID : CUPP.0000086913 OP Visit No : CUPPOPV131368
Conducted By: : Dr. CH VENKATESHAM Conducted Date : 23-03-2024 19:38
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.2 CM
LA (es)	3.2 CM
LVID (ed)	4.8 CM
LVID (es)	3.4 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	1.0 CM
EF	68.00%
%FD	34.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL

Patient Name : Mr. CHIDURALA KIRAN KUMAR Age : 35 Y/M
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COLOUR AND DOPPLER STUDIES

AJV - 1.3

PJV - 0.9

E - 0.7

A - 0.6

IMPRESSION :

NORMAL SIZED CARDIAC CHAMBERS& VALVES

NORMAL BLOOD FLOW

NO RWMA / LVH

GOOD LV AND RV FUNCTION

NO CLOT / P- E

