


Patient Name : Mr.MR BASULAL
 Age/Gender : 58 Y 2 M 8 D/M
 UHID/MR No : CASR.0000190057
 Visit ID : CASROPV232222
 Ref Doctor : Self
 Emp/Auth/TPA ID : 22E30697

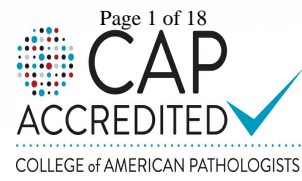
Collected : 14/Sep/2024 10:01AM
 Received : 14/Sep/2024 02:08PM
 Reported : 14/Sep/2024 03:57PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.2	g/dL	13-17	Spectrophotometer
PCV	41.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.53	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	91.9	fL	83-101	Calculated
MCH	31.4	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,310	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	53	%	40-80	Flow cytometry
LYMPHOCYTES	34	%	20-40	Flow cytometry
EOSINOPHILS	4	%	1-6	Flow cytometry
MONOCYTES	8	%	2-10	Flow cytometry
BASOPHILS	1	%	0-2	Flow cytometry
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3344.3	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2145.4	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	252.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	504.8	Cells/cu.mm	200-1000	Calculated
BASOPHILS	63.1	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.56		0.78- 3.53	Calculated
PLATELET COUNT	333000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE				


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



SIN No: ASR240900998

Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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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)

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Siddhartha K.

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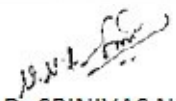


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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate technology
Rh TYPE	Positive			Microplate technology



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CONSULTANT PATHOLOGY

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	90	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:

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	127	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.



Dr.Matta Sujana Reddy
M.B.B.S,M.D(Biochemistry)
Consultant Biochemist



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Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	117	mg/dL		Calculated

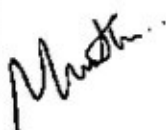
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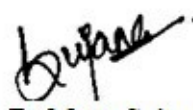
Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

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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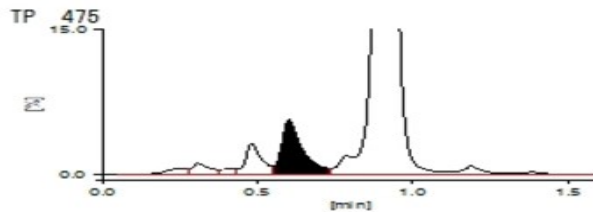
Chromatogram Report

HLC72368 V5.28 1 2024-09-14 16:42:40
 ID ASR240900995
 Sample No. 09140188 SL 0014 - 06
 Patient ID
 Name
 Comment

CALIB	Y = 1.1639X + 0.5319		
Name	%	Time	Area
A1A	0.5	0.25	7.22
A1B	0.8	0.31	11.90
F	0.3	0.41	4.77
LA1C+	1.9	0.48	27.93
SA1C	5.7	0.60	67.52
AO	92.3	0.90	1373.32
H-V0			
H-V1			
H-V2			

Total Area 1492.66

HbA1c 5.7 % **IFCC 39 mmol/mol**
 HbA1 7.0 % HbF 0.3 %



14-09-2024 16:42:40 APOLLO

APOLLO DIAGNOSTICS GLOBAL
 BALANAGER

1 / 1

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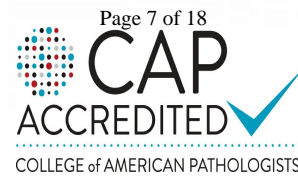
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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	187	mg/dL	<200	CHO-POD
TRIGLYCERIDES	66	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	52	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	135	mg/dL	<130	Calculated
LDL CHOLESTEROL	121.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.60		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

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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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.65	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	21	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.9		<1.15	Calculated
ALKALINE PHOSPHATASE	56.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.55	g/dL	6.6-8.3	Biuret
ALBUMIN	4.19	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.36	g/dL	2.0-3.5	Calculated
A/G RATIO	1.78		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. 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.

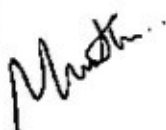
2. Cholestatic Pattern:

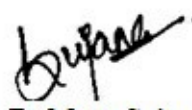
*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex. *Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.


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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. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.99	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	27.60	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	12.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.50	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.08	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.98	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.55	g/dL	6.6-8.3	Biuret
ALBUMIN	4.19	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.36	g/dL	2.0-3.5	Calculated
A/G RATIO	1.78		0.9-2.0	Calculated

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

Sujana...
Dr.Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist

Page 11 of 18
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Apo Consultant biochemist

10TG2000PLC115819)
gumpet, Hyderabad, Telangana - 500 016 |

Address:
A-12, # 1-9-71A/12b, Rishab Heights, Rukminipuri Housing Colony,
A S Rao Nagar, Hyderabad, Telangana, India - 500062

1860 500 7788
www.apolloclinic.com

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad
 APOLLO CLINICS NETWORK
 Telangana: Hyderabad (Kondapur) | Karnataka: Bangalore (Basavanagudi) | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road | Mysore (VV Mohalla) | Tamil Nadu: 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.MR BASULAL
Age/Gender : 58 Y 2 M 8 D/M
UHID/MR No : CASR.0000190057
Visit ID : CASROPV232222
Ref Doctor : Self
Emp/Auth/TPA ID : 22E30697

Collected : 14/Sep/2024 10:01AM
Received : 14/Sep/2024 02:37PM
Reported : 14/Sep/2024 03:44PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

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



Dr. Matta Sujana Reddy
M.B.B.S, M.D (Biochemistry)
Consultant Biochemist



Patient Name : Mr.MR BASULAL	Collected : 14/Sep/2024 10:01AM
Age/Gender : 58 Y 2 M 8 D/M	Received : 14/Sep/2024 02:36PM
UHID/MR No : CASR.0000190057	Reported : 14/Sep/2024 09:46PM
Visit ID : CASROPV232222	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E30697	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.94	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.36	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.993	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

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

Sujana
Dr.Matta Sujana Reddy
 M.B.B.S.,M.D(Biochemistry)
 Consultant Biochemist



Patient Name	: Mr.MR BASULAL	Collected	: 14/Sep/2024 10:01AM
Age/Gender	: 58 Y 2 M 8 D/M	Received	: 14/Sep/2024 02:36PM
UHID/MR No	: CASR.0000190057	Reported	: 14/Sep/2024 09:46PM
Visit ID	: CASROPV232222	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E30697		

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--

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

Sujana...
Dr.Matta Sujana Reddy
M.B.B.S.,M.D(Biochemistry)
Consultant Biochemist



Patient Name : Mr.MR BASULAL
Age/Gender : 58 Y 2 M 8 D/M
UHID/MR No : CASR.0000190057
Visit ID : CASROPV232222
Ref Doctor : Self
Emp/Auth/TPA ID : 22E30697

Collected : 14/Sep/2024 10:01AM
Received : 14/Sep/2024 02:36PM
Reported : 14/Sep/2024 09:44PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.210	ng/mL	0-4	CLIA



Dr. Matta Sujana Reddy
M.B.B.S, M.D (Biochemistry)
Consultant Biochemist



Patient Name : Mr.MR BASULAL	Collected : 14/Sep/2024 10:01AM
Age/Gender : 58 Y 2 M 8 D/M	Received : 14/Sep/2024 04:50PM
UHID/MR No : CASR.0000190057	Reported : 14/Sep/2024 05:48PM
Visit ID : CASROPV232222	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E30697	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	CLEAR		CLEAR	Scattering of light
pH	5.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.009		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	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1	/hpf	< 10	Microscopy
RBC	0	/hpf	0-2	Microscopy
CASTS	ABSENT	/lpf	0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT	/hpf	Occasional-Few	Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.

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

SIN No:ASR240901000

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Patient Name	: Mr.MR BASULAL	Collected	: 14/Sep/2024 10:01AM
Age/Gender	: 58 Y 2 M 8 D/M	Received	: 14/Sep/2024 03:29PM
UHID/MR No	: CASR.0000190057	Reported	: 14/Sep/2024 04:14PM
Visit ID	: CASROPV232222	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E30697		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

M. Muttavarapu

Dr. Muttavarapu Viswanath
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



Patient Name : Mr.MR BASULAL	Collected : 14/Sep/2024 10:01AM
Age/Gender : 58 Y 2 M 8 D/M	Received : 14/Sep/2024 04:51PM
UHID/MR No : CASR.0000190057	Reported : 14/Sep/2024 05:54PM
Visit ID : CASROPV232222	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E30697	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

*** End Of Report ***



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

SIN No:ASR240900999



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

A-12, # 1-S-71/A/12/B, Rishab Heights, Rukminipuri Housing Colony,
A S Rao Nagar, Hyderabad, Telangana, India - 500062



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.MR BASULAL
Age/Gender : 58 Y 2 M 8 D/M
UHID/MR No : CASR.0000190057
Visit ID : CASROPV232222
Ref Doctor : Self
Emp/Auth/TPA ID : 22E30697

Collected : 14/Sep/2024 10:01AM
Received : 14/Sep/2024 04:51PM
Reported : 14/Sep/2024 05:54PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.



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



SIN No:ASR240900999

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

Patient Name	: Mr. MR BASULAL	Age	: 58Yrs 2Mths 9Days
UHID	: CASR.0000190057	OP Visit No.	: CASROPV232222
Printed On	: 14-09-2024 06:57 AM	Advised/Pres Doctor	: Dr. VIVEK BELDE
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E30697		

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

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

Gall bladder is distended normal. No evidence of calculus. Wall thickness appears normal.

No evidence of peri GB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein is normal.

Pancreas appears normal in echo pattern. No focal/mass lesion/calcification. No evidence of per pancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echo pattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney measures : 102 x 40 mm Left kidney measures : 108 x 44 mm .

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

Prostate is normal in size and echo texture. No evidence of necrosis/calcification seen.

IMPRESSION:- Grade I Fatty Liver.

Suggested clinical correlation and further evaluation if necessary.

---End Of The Report---



Dr.K PRAVEEN BABU

--

--

Radiology

Patient Name	: Mr. MR BASULAL	Age	: 58Yrs 2Mths 9Days
UHID	: CASR.0000190057	OP Visit No.	: CASROPV232222
Printed On	: 14-09-2024 01:07 PM	Advised/Pres Doctor	: Dr. VIVEK BELDE
Department	: Cardiology	Qualification	: MBBS, DFM(UK)
Referred By	: Self	Registration No.	: TMC/FMR/24141
Employeer Id	: 22E30697		

DEPARTMENT OF CARDIOLOGY

Ao (ed)	2.5 CM
LA (es)	3.9 CM
LVID (ed)	3.44CM
LVID (es)	2.36CM
IVS (Ed)	1.3 CM
LVPW (Ed)	1.6 CM
EF	68.00%
%FD	37.00%
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

COLOUR AND DOPPLER STUDIES:

PJV= 1.3

AJV= 1.1

E=.4 m/s

A= .6 m/s

IMPRESSION:-

CONCENTRIC LVH.

LA ENLARGEMENT

NO RWMA

LVEF

GRADE I DIASTOLIC DYSFUNCTION.

NO CLOT /P-E

---End Of The Report---

DR. SHILPI MOHAN
MBBS, MD(MEDICINE), DNB(CARDIOLOGY)
20417
Cardiology

Patient Name	: Mr. MR BASULAL	Age	: 58Yrs 2Mths 10Days
UHID	: CASR.0000190057	OP Visit No.	: CASROPV232222
Printed On	: 15-09-2024 09:59 AM	Advised/Pres Doctor	: Dr. VIVEK BELDE
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E30697		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

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

For clinical correlation and further evaluation if necessary.

---End Of The Report---



Dr.K PRAVEEN BABU

--

--

Radiology

From: Corporate Apollo Clinic
Sent: 12 September 2024 19:43
To: Ajay Babu
Cc: Syamsunder M; Sneha Krishnamurthy; Operation Labs; Kiran Raj; Vijaya Kumari; Asraonagar Apolloclinic; HC Alwarpet; Annanagar Apolloclinic; Aundh Apolloclinic; Basavanagudi Apolloclinic; Bellandur Apolloclinic; Electronic City; Hsr Apolloclinic; Indiranagar Apolloclinic; FO Cradle; JP Nagar Apollo Clinic; Hitechcity Apolloclinic; Koramangala Apolloclinic; madipakkam@apolloclinic.com; Manikonda Clinic; Nigdi Apolloclinic; Nizampet Apolloclinic; Sarjapur Apolloclinic; Helpdesk MRC; Valasaravakkam Clinic; ITPL CLINIC; FO ITPL; Velachery Apolloclinic; Vimannagar Apolloclinic; Mysore Apolloclinic; Wanowrie Apolloclinic
Subject: RE: MediBuddy Appointment Request For Health Check up
Attachments: Copy of APOLLO SYSTEM CONFIRMED DATA SEP 12-2024.xlsx

Namaste Team,

Greetings from Apollo Clinics,

Please find the attachment for appointments status.

Thanks & Regards,

Anvesh M | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: corporate@apolloclinic.com | www.apolloclinic.com |

From: Ajay Babu <ajay.babu@medibuddy.in>
Sent: Thursday, September 12, 2024 3:40 PM
To: Corporate Apollo Clinic <corporate@apolloclinic.com>
Cc: Syamsunder M <syamsunder.m@apollohl.com>; Sneha Krishnamurthy <sneha.krishnamurthy@medibuddy.in>; Operation Labs <operation.labs@medibuddy.in>; Kiran Raj <kiran.raj@medibuddy.in>
Subject: MediBuddy Appointment Request For Health Check up

Dear Team,

Kindly schedule the below appointment as per the details given below.

Please acknowledge the mail & confirm the appointment

- Should not disclose bill copies to the clients. It should be maintained confidentially.
- Should Handover original copy of Medical Reports to clients directly.
- Should raise credit Bill to PHASORZ Services Pvt. Ltd.
- **Please click on the link below and login to the Medibuddy portal to update attendance and upload the lab reports.**
Portal Link: labwise.medibuddy.in

Or

- Should send Soft copy of reports to below Email Id's, once the reports are ready. (On the same day or on the next day)

· corporate.reports@medibuddy.in

Regards,

Aj Ajay



Operations,

Bangalore.



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Government of India

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Unique Identification Authority of India

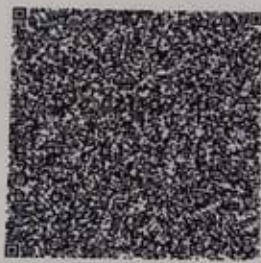
రిజిస్ట్రేషన్/ Enrolment No.: 2081/12144/09342

To
బసులార్
Basulal
C/O: Kwshram Late
H.No 6-8/489/40P/N
Aditya Nagar
Dammaiguda, Keesara Mandal
Balaji Nagar Borwells
Nagaram
Nagaram
Medchal-malkajiri Telangana - 500083
9704987307

Download Date: 17/04/2021



Issue Date: 03/04/2021

Signature valid




మీ ఆధార్ సంఖ్య / Your Aadhaar No. :
2174 4221 2717
VID : 9165 0126 9091 9109

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India



బసులార్
Basulal
పుట్టిన తేదీ/DOB: 06/04/1966
పురుషుడు/ MALE

Issue Date: 03/04/2021

2174 4221 2717
VID : 9165 0126 9091 9109

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 2081/12144/09477

To
రాజేశ్వరి
Rajeshwari
C/O: Basulal
H.No 6-8/489/40P/N
Aditya Nagar
Dammaiguda, Keesara Mandal
Balaji Borwells
Nagaram
Nagaram
Medchal-malkajiri Telangana - 500083
9866094729

Download Date: 25/04/2021

Issue Date: 06/04/2021

Signature valid



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :
8556 6826 0675
VID : 9185 3195 2351 4917

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India



రాజేశ్వరి
Rajeshwari
పుట్టిన తేదీ/DOB: 13/11/1971
స్త్రీ/ FEMALE

Issue Date: 06/04/2021

8556 6826 0675
VID : 9185 3195 2351 4917

నా ఆధార్, నా గుర్తింపు