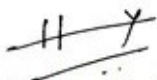


Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:30PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:43PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

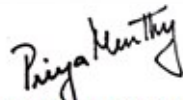
DEPARTMENT OF HAEMATOLOGY

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	16.3	g/dL	13-17	Spectrophotometer
PCV	46.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.13	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	91.2	fL	83-101	Calculated
MCH	31.7	pg	27-32	Calculated
MCHC	34.8	g/dL	31.5-34.5	Calculated
R.D.W	12.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,040	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	46.6	%	40-80	Electrical Impedence
LYMPHOCYTES	40.6	%	20-40	Electrical Impedence
EOSINOPHILS	4.3	%	1-6	Electrical Impedence
MONOCYTES	7.7	%	2-10	Electrical Impedence
BASOPHILS	0.8	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2814.64	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2452.24	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	259.72	Cells/cu.mm	20-500	Calculated
MONOCYTES	465.08	Cells/cu.mm	200-1000	Calculated
BASOPHILS	48.32	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.15		0.78- 3.53	Calculated
PLATELET COUNT	264000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				



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Consultant Pathologist



Dr. Priya Murthy
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Consultant Pathologist



Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:30PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:43PM
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DEPARTMENT OF HAEMATOLOGY

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

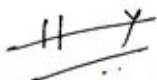
RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

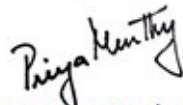
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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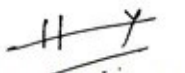



Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:30PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 07:25PM
Visit ID : CINDOPV239689	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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

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


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Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 12:50PM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 04:02PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 04:34PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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
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

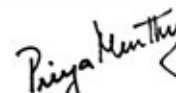
Note:

- 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)	130	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 Priya Murthy
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Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:26PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 03:13PM
Visit ID : CINDOPV239689	Status : Final Report
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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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	128	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.

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

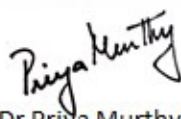
A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:15PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:44PM
Visit ID : CINDOPV239689	Status : Final Report
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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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	195	mg/dL	<200	CHO-POD
TRIGLYCERIDES	135	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	156	mg/dL	<130	Calculated
LDL CHOLESTEROL	128.9	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.00		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.18		<0.11	Calculated


Comment:

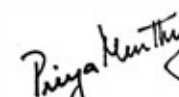
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: IRA240902015

Apollo Health and Lifestyle Limited (CIN - U061107C2800PH6115839)
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Address:
 32/100/125, Doddabangla Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034

Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
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UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:44PM
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Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.04	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.17	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.87	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.8		<1.15	Calculated
ALKALINE PHOSPHATASE	64.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.04	g/dL	6.6-8.3	Biuret
ALBUMIN	4.36	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.68	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. 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. 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.

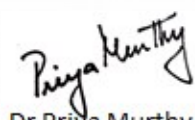
3. Synthetic function impairment:

*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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SIN No:IRA240902015

Apollo Health and Lifestyle Limited

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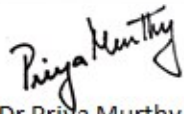
Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:15PM
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DEPARTMENT OF BIOCHEMISTRY

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



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Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
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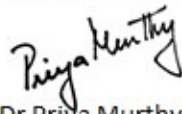
DEPARTMENT OF BIOCHEMISTRY

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	0.94	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	31.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	14.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.66	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.73	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136-146	ISE (Indirect)
POTASSIUM	5.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.04	g/dL	6.6-8.3	Biuret
ALBUMIN	4.36	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.68	g/dL	2.0-3.5	Calculated
A/G RATIO	1.63		0.9-2.0	Calculated



Dr. Govinda Raju N L
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Dr Priya Murthy
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Karnataka - 560034

Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:15PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:38PM
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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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	22.00	U/L	<55	IFCC

Priya Murthy

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



Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:14PM
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Visit ID : CINDOPV239689	Status : Final Report
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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. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.5	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.678	µIU/mL	0.34-5.60	CLIA

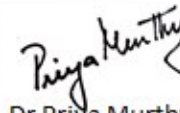
Comment:

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


Dr. Govinda Raju N L
 MSc, PhD (Biochemistry)
 Consultant Biochemistry


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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: IRA240902018

Apollo Health and Lifestyle Limited (CIN - U061107C2800PH6115849)
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
 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:
 5th Floor, Deekshapada Building, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


1860 500 7788
 www.apolloclinic.com

Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:14PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 02:13PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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
------	------	------	------	--

Govinda Raju
Dr.Govinda Raju N L
 MSc,PhD(Biochemistry)
 Consultant Biochemistry

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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No:IRA240902018

Apollo Health and Lifestyle Limited

(CIN - U061107C2000PHG115819)
 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:
 32/100/125, Doddabangla Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034

 **1860 500 7788**
www.apolloclinic.com

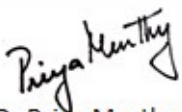
APOLLO CLINICS NETWORK
 Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | 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.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:14PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 01:54PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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	0.870	ng/mL	0-4	CLIA



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



Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:46PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 03:05PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

DEPARTMENT OF CLINICAL PATHOLOGY

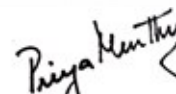
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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	NORMAL		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	0	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	1	/hpf	< 10	Microscopy
RBC	0	/hpf	0-2	Microscopy
CASTS	NEGATIVE	/lpf	0-2 Hyaline Cast	Microscopy
CRYSTALS	NEGATIVE	/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.


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

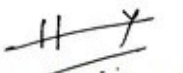



Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 16/Sep/2024 01:52PM
UHID/MR No : CIND.0000171459	Reported : 16/Sep/2024 02:40PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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


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


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



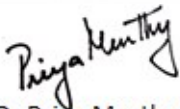
Patient Name : Mr.V HEMANTH KUMAR	Collected : 14/Sep/2024 09:13AM
Age/Gender : 55 Y 1 M 30 D/M	Received : 14/Sep/2024 01:46PM
UHID/MR No : CIND.0000171459	Reported : 14/Sep/2024 04:18PM
Visit ID : CINDOPV239689	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E32029	

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 Priya Murthy
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



Patient Name : Mr.V HEMANTH KUMAR
Age/Gender : 55 Y 1 M 30 D/M
UHID/MR No : CIND.0000171459
Visit ID : CINDOPV239689
Ref Doctor : Self
Emp/Auth/TPA ID : 22E32029

Collected : 14/Sep/2024 09:13AM
Received : 14/Sep/2024 01:46PM
Reported : 14/Sep/2024 04:18PM
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.

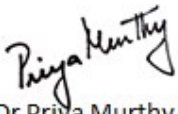
Laboratories not be responsible for any interpretation whatsoever.

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 Priya Murthy
M.B.B.S,M.D(Pathology)
Consultant Pathologist



SIN No:IRA240902020

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

Patient Name	: Mr. V Hemanth Kumar	Age	: 55Yrs 2Mths
UHID	: CIND.0000171459	OP Visit No.	: CINDOPV239689
Printed On	: 14-09-2024 09:10 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E32029		

DEPARTMENT OF RADIOLOGY

ULTRASOUND ABDOMEN AND PELVIS

LIVER: Appears normal in size, **shape and show mild diffusely increased echogenicity**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. **Shows a calculi measuring 10.2mm**. No evidence of abnormal wall thickening noted.

SPLEEN: Appears **enlarged** in size (12.0cm), shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern.

No free fluid or lymphadenopathy is seen.

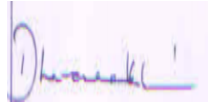
IMPRESSION:

1. GRADE I FATTY LIVER.

2. CHOLELITHIASIS.

3. MILD SPLEENOMEGALY.

---End Of The Report---



Dr.DHANALAKSHMI B
MBBS, DMRD
29543
Radiology

Patient Name	: Mr. V Hemanth Kumar	Age	: 55Yrs 2Mths
UHID	: CIND.0000171459	OP Visit No.	: CINDOPV239689
Printed On	: 14-09-2024 02:10 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E32029		

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.

---End Of The Report---



Dr.RAMESH G
MBBS, DMRD
27462
Radiology

Name : Mr. V Hemanth Kumar

Address : Indiranagar Bangalore Karnataka INDIA 560038

Age : 55Y 1M 30D

sex : Male

UHID : CIND.0000171459



CIND.0000171459

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
PAN INDIA OP AGREEMENT

OP No: CINDOPV239689

Bill No: CIND-OCR-101603

Date: Sep 14th, 2024, 8:54 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
1	DENTAL CONSULTATION	Consultation	<input type="checkbox"/>
2	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) <i>after 10am</i>	Biochemistry	<input type="checkbox"/>
3	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
4	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
5	ULTRASOUND - WHOLE ABDOMEN <i>-9</i>	Ultrasound Radiology	<input type="checkbox"/>
6	OPHTHAL BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
7	ENT CONSULTATION <i>-5</i> <i>after 10:30 am</i>	Consultation	<input type="checkbox"/>
8	DIET CONSULTATION	Consultation	<input type="checkbox"/>
9	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
10	2 D ECHO <i>-9</i>	Consultation	<input type="checkbox"/>
11	X-RAY CHEST PA <i>-10</i> <i>after 9:30 am</i>	Cardiology	<input type="checkbox"/>
12	ECG <i>-6</i>	X Ray Radiology	<input type="checkbox"/>
13	BODY MASS INDEX (BMI) <i>-6</i>	Cardiology	<input type="checkbox"/>
14	BLOOD GROUP ABO AND RH FACTOR	General	<input type="checkbox"/>
15	COMPLETE URINE EXAMINATION	Blood Bank	<input type="checkbox"/>
16	HEMOGRAM + PERIPHERAL SMEAR	Clinical Pathology	<input type="checkbox"/>
17	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Haematology	<input type="checkbox"/>
18	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
19	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	URINE GLUCOSE(POST PRANDIAL)	Biochemistry	<input type="checkbox"/>
22	URINE GLUCOSE(FASTING)	Clinical Pathology	<input type="checkbox"/>
23	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Clinical Pathology	<input type="checkbox"/>
24	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)
Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor : Amceterpet, Hyderabad 500038, Telangana.
www.apolloh.com | Email ID: enquiry@apolloh.com, Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal | Andhra Pradesh: Vizag (Seethamma Peta) | Koramangala | Bengaluru (Bassavanagurthi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kuntechahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamil Nadu: Chennai (Anna Nagar | Kotturpuram | T Nagar | Velamangalam) | Maharashtra: Pune (Aundh | Nadi Pradhikaran | Viman Nagar | Warowade) | Karnataka: Bengaluru (Indiranagar)

GSTIN: 29AADCA0733E1Z3

Address: 2012, 1st Floor, 100 Feet Road, HAL 2nd stage, Indira Nagar: 560038

1860 500 7788

Mr. V Anantha Kumar
55 y/m

Height : 171 cm	Weight : 87.2 kg	BMI : 29.8 kg/m ²	Waist Circum : 109 cm
Temp : 98.6°+	Pulse : 72 bpm	Resp : 18 cpm	B.P : 140/82 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Date : 14/09/2024 Department : ENT
 Patient Name : Mr. V Hemanth Kumar Doctor : Dr.RAVINDRANATH KUDVA
 UHID : CIND.0000171459 Registration No. : 18554
 Age / Gender : 55Yrs 1Mths 30Days / Male Qualification : M.B.B.S, D.L.O (ENT)
 Consultation Timing : 8:55 AM

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

ARROW CC

Mr v hemanth
ID: 171459

15.07.1969
55 Years

Male

14.09.2024 13:54:13
APOLLO CLINIC
INDIRAWAGAR
BANGALORE

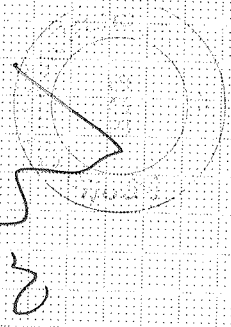
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

69 bpm
--/-- mmHg

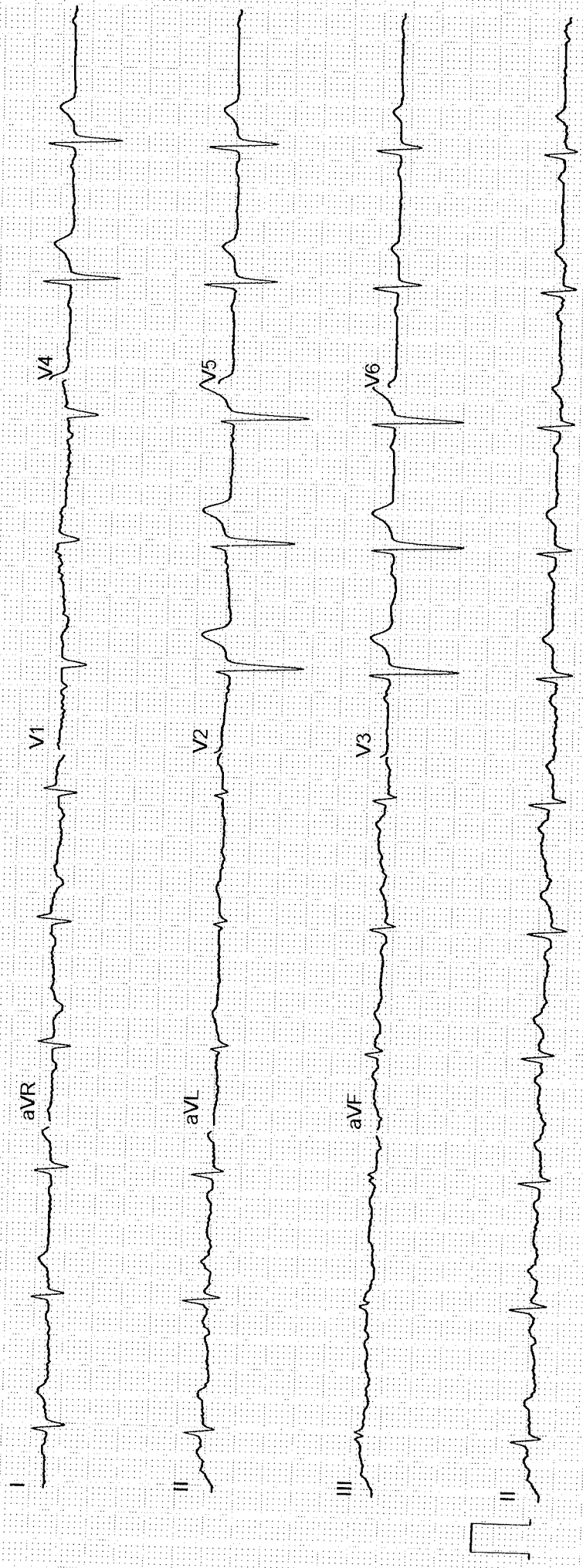
QRS : 88 ms
QT / QTcBaz : 368 / 394 ms
PR : 158 ms
P : 98 ms
RR / PP : 868 / 869 ms
P / QRS / T : 60 / 10 / 9 degrees

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

Handwritten signature



Dr. M. SUDHAKAR RAO
MBBS, MD, DM (Cardio), FACC, FESC, FSCAI
Consultant Cardiologist
Apollo Hospitals
Indirawagar, Bangalore



NAME: MR V HEMANTH KUMAR	AGE/SEX: 55/M	OP NUMBER: 171459
Ref By : SELF	DATE: 14-09-2024	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.5	IVS(D): 1.1	MV: E Vel: 0.84	A Vel : 0.61
LA: 3.2	LVIDD(D): 4.1	AV Peak: 0.94	
	LVPW(D): 1.1	PV peak: 0.83	
	IVS(S):1.4		
	LVID(S): 2.4		
	LVPW(S): 1.5		
	LVEF: 60%		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal

IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chamber and valves

No Regional wall motion abnormality

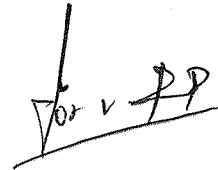
Trivial TR / Normal PA pressure

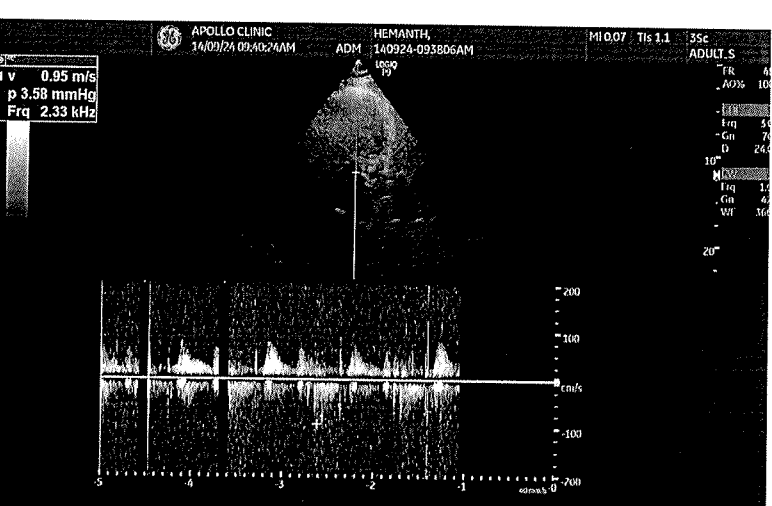
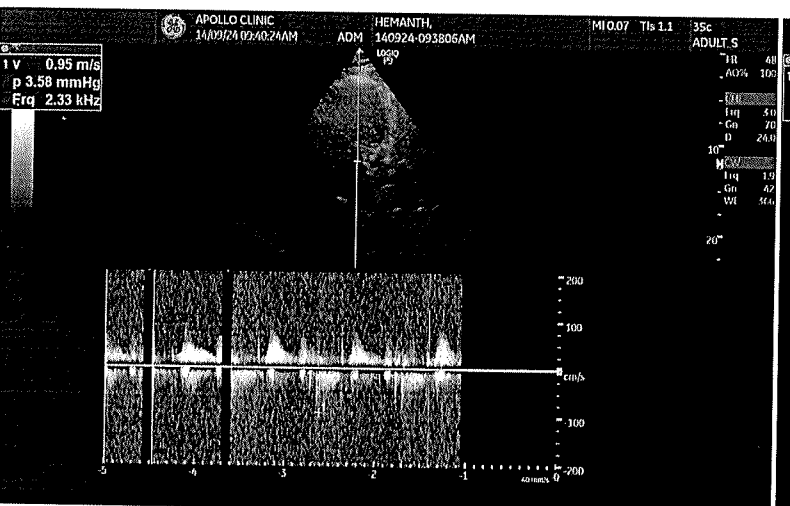
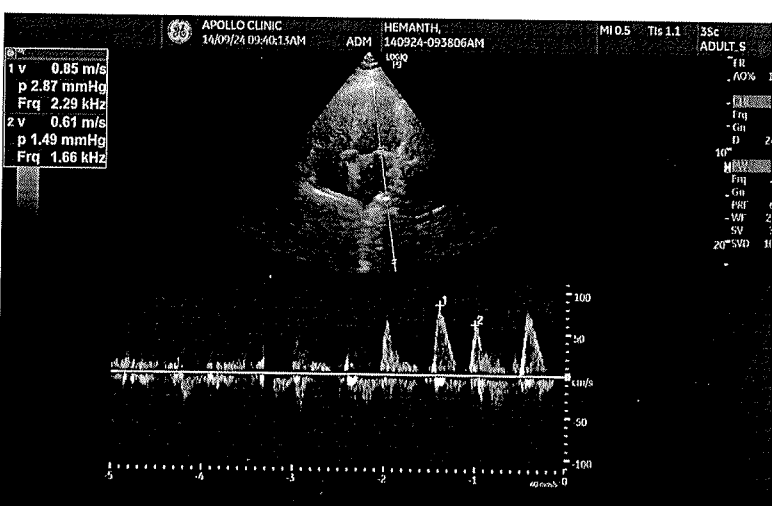
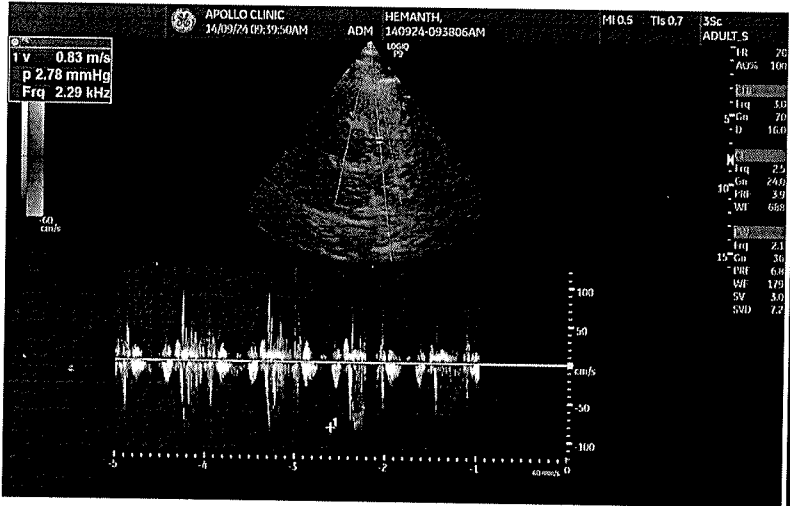
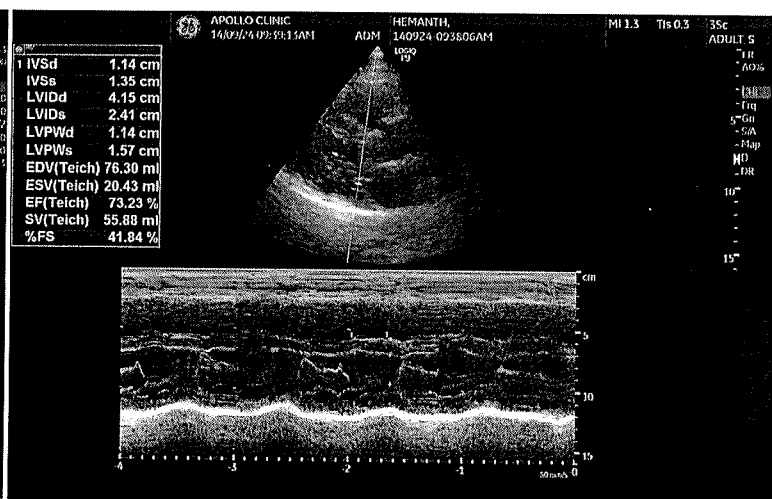
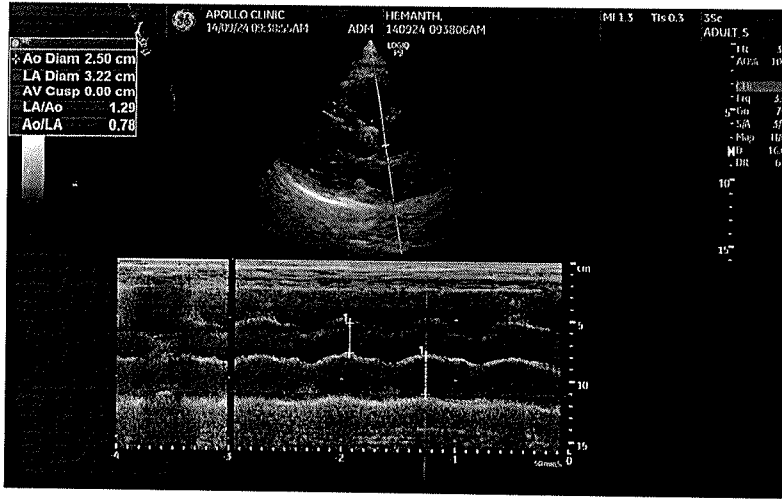
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





From: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>

Sent: Tuesday, September 3, 2024 1:20 PM

To: Corporate Apollo Clinic <corporate@apolloclinic.com>

Cc: Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>; deepak c <deepak.c@apollohl.com>

Subject: Health checkup Appointments no. 80

Dear Team

Please find the attached health checkup booking and confirm the same.

Thanks & Regards

Lav Gupta

Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030




बैंक ऑफ़ बड़ौदा
Bank of Baroda

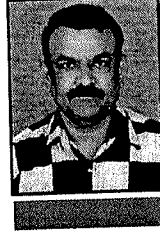
नाम
Name

वी हेमंत कुमार
V Hemanth Kumar

E.C. No.

157762


जारीकर्ता प्राधिकारी
Issuing Authority



V. Hemanth Kumar
धारक के हस्ताक्षर
Signature of Holder