

Patient Name	: Mr.SHARMA ASHISH	Collected	: 08/Mar/2024 10:43AM
Age/Gender	: 31 Y 5 M 16 D/M	Received	: 08/Mar/2024 11:35AM
UHID/MR No	: CMAN.0000086894	Reported	: 08/Mar/2024 12:33PM
Visit ID	: CKONOPV643380	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: DUIPS6906Q		

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	14.2	g/dL	13-17	Spectrophotometer
PCV	43.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.69	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	92	fL	83-101	Calculated
MCH	30.3	pg	27-32	Calculated
MCHC	32.8	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	67	%	40-80	Electrical Impedance
LYMPHOCYTES	23	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	08	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3953	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1357	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	118	Cells/cu.mm	20-500	Calculated
MONOCYTES	472	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.91		0.78- 3.53	Calculated
PLATELET COUNT	222000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC :Normocytic Normochromic.

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Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



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WBC : TLC and DLC Within normal limits.

PLATELETS :Adequate on the smear.



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UHID/MR No : CMAN.0000086894	Reported : 08/Mar/2024 12:25PM
Visit ID : CKONOPV643380	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination




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Patient Name	: Mr.SHARMA ASHISH	Collected	: 08/Mar/2024 11:51AM
Age/Gender	: 31 Y 5 M 16 D/M	Received	: 08/Mar/2024 12:46PM
UHID/MR No	: CMAN.0000086894	Reported	: 08/Mar/2024 01:18PM
Visit ID	: CKONOPV643380	Status	: Final Report
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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	110	mg/dL	70-100	GOD - POD

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	145	mg/dL	70-140	GOD - POD

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.



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Age/Gender : 31 Y 5 M 16 D/M	Received : 08/Mar/2024 02:03PM
UHID/MR No : CMAN.0000086894	Reported : 08/Mar/2024 03:48PM
Visit ID : CKONOPV643380	Status : Final Report
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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	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	126	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)


Dr. RAJESH BATTINA
 PhD.(Biochemistry)
 Consultant Biochemist


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



SIN No:EDT240027806

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

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

Address:
 The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,
 Hyderabad, Telangana, India - 500032


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)

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DEPARTMENT OF BIOCHEMISTRY

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

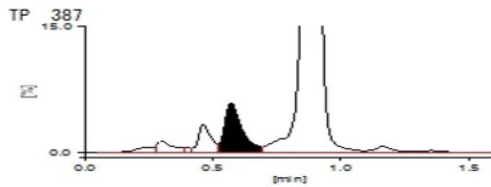
Chromatogram Report

HLC72368 V5.28.1 2024-03-08 15:08:02
 ID EDT240027806
 Sample No. 03080124 SL 0002 - 01
 Patient ID
 Name
 Comment

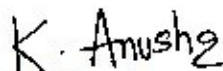
CALIB			
Name	%	Time	Area
A1A	0.6	0.23	9.41
A1B	1.0	0.30	16.75
F	0.2	0.39	2.62
LA1C+	2.0	0.46	31.66
SA1C	6.0	0.57	78.64
A0	91.6	0.88	1482.67
H-V0			
H-V1			
H-V2			

Total Area 1621.75

HbA1c 6.0 % **IFCC 42 mmol/mol**
 HbA1 7.6 % HbF 0.2 %




Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist



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



SIN No:EDT240027806

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

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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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	230	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	165	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	46	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	184	mg/dL	<130	Calculated
LDL CHOLESTEROL	151	mg/dL	<100	Calculated
VLDL CHOLESTEROL	33	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.00		0-4.97	Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- 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.



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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	42	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	39.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	110.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.40	g/dL	6.3-8.2	Biuret
ALBUMIN	4.30	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		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 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.



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.80	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	24.90	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.50	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.10	mg/dL	2.5-4.5	PMA Phenol
SODIUM	136	mmol/L	135-145	Direct ISE
POTASSIUM	4.0	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	103	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.40	g/dL	6.3-8.2	Biuret
ALBUMIN	4.30	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.10	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.00	U/L	15-73	Glycylglycine Nitoranalide



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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)	1.11	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	6.8	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.731	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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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DEPARTMENT OF CLINICAL PATHOLOGY

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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	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
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. Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Patient Name : Mr.SHARMA ASHISH	Collected : 08/Mar/2024 10:43AM
Age/Gender : 31 Y 5 M 16 D/M	Received : 08/Mar/2024 11:35AM
UHID/MR No : CMAN.0000086894	Reported : 08/Mar/2024 12:39PM
Visit ID : CKONOPV643380	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : DUIPS6906Q	

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

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

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

Result/s to Follow:
PERIPHERAL SMEAR




Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist

APOLLO CLINIC

CONSENT FORM

PATIENT NAME Mr. Sharma Ashish AGE:- 31yrs.

UHID NUMBER 86894. COMPANY NAME Arcofem Mediwheel

✓ I MR/MRS/MS Sharma Ashish EMPLOYEE OF Arcofem mediwheel

COMPANY WANT TO INFORM YOU THAT I AM ~~NOT~~ INTERESTED IN

GETTING Optical ~~At the time of Reports collection~~
~~since doc optometrist not available~~
Recently done

TEST DONE WHICH IS A PART OF MY ROUTINE HEALTH CHECK PACKAGE.

AND I CLAIM THE ABOVE STATEMENT IN MY FULL CONSCIOUSNESS.

PATIENT SIGNATURE As

DATE:- 8/3/24.

Patient Name : Mr. SHARMA ASHISH

Age/Gender : 31 Y/M

UHID/MR No. : CMAN.0000086894

OP Visit No : CKONOPV643380

Sample Collected on :

Reported on : 08-03-2024 16:29

LRN# : RAD2260108

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : DUIPS6906Q

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

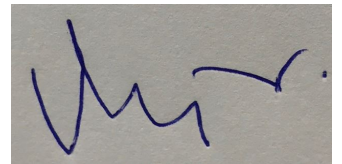
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist

Patient Name	: Mr. SHARMA ASHISH	Age/Gender	: 31 Y/M
UHID/MR No.	: CMAN.0000086894	OP Visit No	: CKONOPV643380
Sample Collected on	:	Reported on	: 08-03-2024 12:04
LRN#	: RAD2260108	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: DUIPS6906Q		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

Gall bladder :-SPC.

Spleen appears normal. 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 measures 97 x 45 mm.

Left kidney measures 101 x 44 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 and echo texture. No evidence of necrosis/calcification seen. Prostate measures 30 x 31 x 32mm, Volume--17cc.

Patient Name : Mr. SHARMA ASHISH

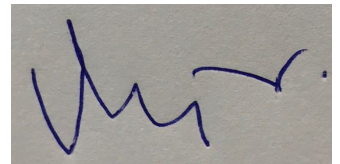
Age/Gender : 31 Y/M

IMPRESSION:-

****MILD FATTY CHANGES IN 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. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist



Bill Of Supply

Name : Mr. SHARMA ASHISH
 Age/Gender : 31 Y M
 Contact No : +918716040317
 Address : HYD
 UHID : CMAN.0000086894
 Corporate Name : ARCOFEMI HEALTHCARE LIMITED
 Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CKON-OCR-122572
 Bill/Reg Date : 08.03.2024 10:31
 Referred by : SELF
 Center : Kondapur
 Emp No/Auth Code : DUIPS6906Q

#	Department	Description Of Service	SAC/HSN Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTGST Amt	Net Value
1	Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,000.00	2,000.00	0.00	0.00	0.00	0.00	0.00	2,000.00

Bill Amount: 2,000.00
Total Discount: 0.00

You can download your report from "www.apolloclinic.com" Enter user name as CKONOPV643380 and password as 189930

Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited

(CIN : U05110TG2000PLC115819)
 Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad 500038, Telangana, I
 www.apollohli.com | Email ID: enquiry@apollohli.com, Ph. No: 040-4908 7777, Fax No: 4004 7734

APOLLO CLINICS NETWORK

Telangana: Hyderabad (A5 Rao Nagar) | Chaitany Nagar | Kondapur (Hitech City) | Nizampet | Madhavaram | Uppal | Andhra Pradesh: Vijay
 Vittala (Pond) | Karnataka: Bangalore (Begur Road) | Bellandur | Electronic City | HSR Layout | Indira Nagar | Jc Nagar | Koramangala |
 Madhavaram | Sanjay Road | Mysore (Vijaya Vittala) | Tamil Nadu: Chennai (Anna Nagar) | Porur | T Nagar | Vyasaram | Kerala: Vellay
 Madhavaram | Pune (Aundh) | Odisha: Bhubaneswar | West Bengal: Kolkata (Salt Lake) | Gujarat: Gandhinagar | Andhra Pradesh: Hyderabad (Ameerpet)

GSTIN: 36SAADCA9733E1Z8

Address:
 #7-1-617/A, 615 & 616, Imperial Towers,
 7th Floor, Ameerpet, Hyderabad, Telangana

1860 500 7788

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

नाम/ Name
ASHISH SHARMA

DUIPS6906Q

पिता का नाम/ Father's Name
RAMESH CHANDER SHARMA

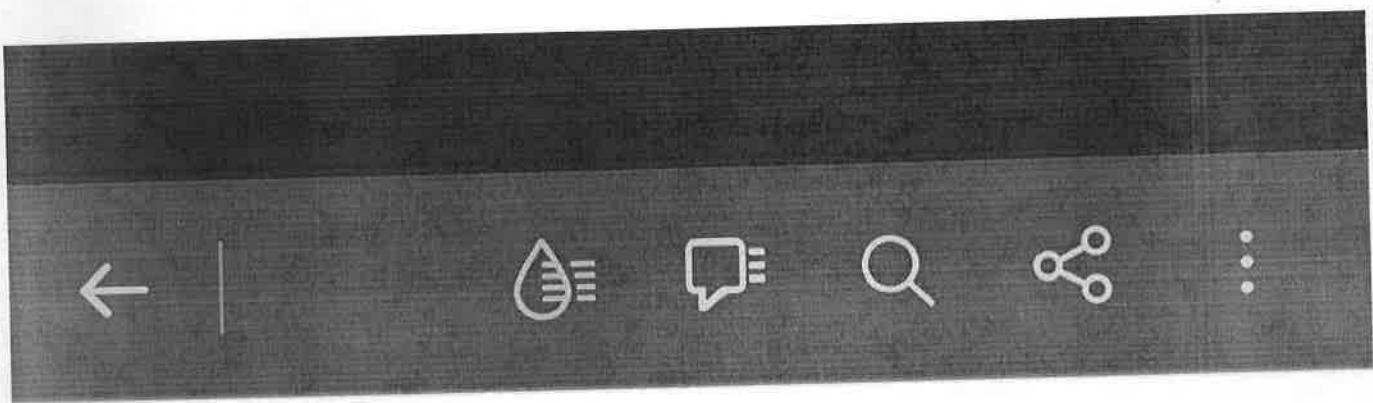
जन्म की तारीख/ Date of Birth
29/08/1992

आयकर संख्या

हस्ताक्षर/ Signature



14102017



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. SHARMA ASHISH
EC NO.	124673
DESIGNATION	IRAC DEVELOPMENT (BACKEND) IRAC OPERATIONS, TROUBLESHOOTING
PLACE OF WORK	HYDERABAD,DISASTER RECOVERY SI
BIRTHDATE	29-08-1992
PROPOSED DATE OF HEALTH CHECKUP	08-03-2024
BOOKING REFERENCE NO.	23M124673100097544E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **06-03-2024** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

2

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

Name: Mr. SHARMA ASHISH
Age/Gender: 31 Y/M
Address: HYD
Location: HYDERABAD, TELANGANA
Doctor:
Department: GENERAL
Rate Plan: KONDAPUR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CMANI.0000086894
Visit ID: CKONOPY643380
Visit Date: 08-03-2024 10:31
Discharge Date:
Referred By: SELF

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 & Hip Ratio	User
08-03-2024 12:23	62	110/70	Rate/min	F	173 cms	75 Kgs	%	%	Years	25.06	cms	101 cms	88 cms	AHLL03268

Patient Name	: Mr. SHARMA ASHISH	Age	: 31 Y/M
UHID	: CMAN.0000086894	OP Visit No	: CKONOPV643380
Reported By:	: Dr. VENKATA RAYUDU NEKKANTI	Conducted Date	: 08-03-2024 16:54
Referred By	: SELF		

ECG REPORT

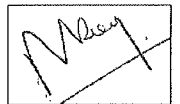
Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 62beats 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 seen.

Impression:

WITH IN NORMAL LIMITS.

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



Dr. VENKATA RAYUDU NEKKANTI

Apollo Health and Lifestyle Limited

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

APOLLO CLINICS NETWORK

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

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

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

TO BOOK AN APPOINTMENT



1860 500 7788

Mr shara ashish
ID: 86894

08.03.2024 10:59:29
APOLLO MEDICAL CENTRE
HYDERABAD

31 Years Male

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

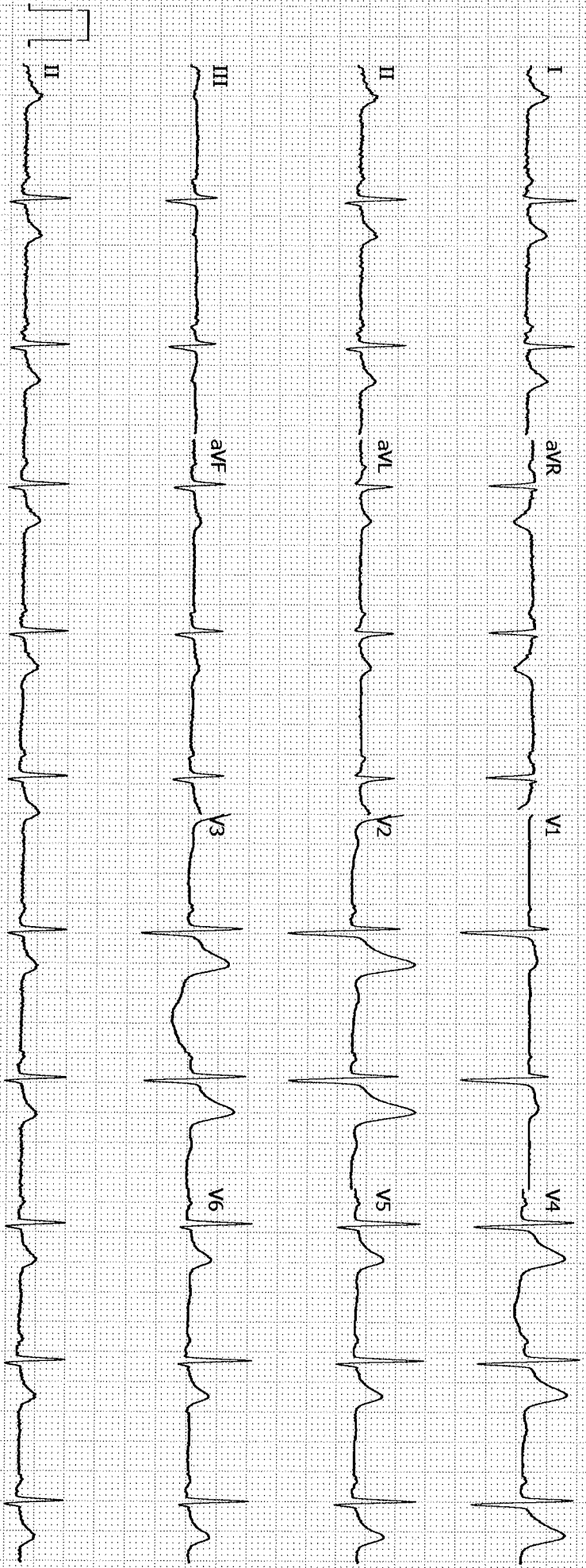
Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

62 bpm
--/-- mmHg

QRS : 80 ms
QT / QTcBaz : 368 / 373 ms
PR : 142 ms
P : 96 ms
RR / PP : 966 / 967 ms
P / QRS / T : 24 / 18 / 22 degrees

Normal sinus rhythm
Normal ECG



Patient Name	: Mr. SHARMA ASHISH	Age	: 31 Y/M
UHID	: CMAN.0000086894	OP Visit No	: CKONOPV643380
Conducted By:	: Dr. VENKATA RAYUDU NEKKANTI	Conducted Date	: 08-03-2024 13:39
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.02 CM
LA (es)	3.05CM
LVID (ed)	4.95 CM
LVID (es)	2.43CM
IVS (Ed)	0.8CM
LVPW (Ed)	0.7 CM
EF	64.00%
%FD	38.00%

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

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

COLOUR AND DOPPLER STUDIES

NORMAL FLOW

Apollo Health and Lifestyle Limited

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

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TO BOOK AN APPOINTMENT

1860 500 7788

IMPRESSION:-
NORMAL STUDY.



Dr. VENKATA
RAYUDU
NEKKANTI

Apollo Health and Lifestyle Limited

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

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Cardiology



Name	Mr. Sharma Ashish	Date	08/03/24
Age	31	UHID No.	86894
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Ref. Physician	DR. Venkata Rajesh A & C Fem
Ref. Diagnosis			



Echocardiogram Report





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




DIMENSIONS	NORMAL	DIMENSIONS	NORMAL
Ao (ed) 3.02 cm	(1.5cm / m2)	IVS (Ed) 0.8 cm	(0.6 - 1.2 cm)
LA (es) 3.05 cm	(1.5cm / m2)	LVPW (Ed) 0.7 cm	(0.6 - 1.1 cm)
RVID (ed) _____ cm	(0.9 cm / m2)	EF 64%	(0.62 - 0.85)
LVID (ed) 4.95 cm	(2.6 - 3.4 cm / m2)	% FD 38%	(2.8% - 42%)
LVID (es) 2.43			

MORPHOLOGICAL DATA

Mitral Valve AML 
 PML 

Interatrial septum 
 Interventricular septum 

Aortic Valve 
 Tricuspid valve 
 Pulmonary valve 
 Right ventricle 

Pulmonary artery 
 Aorta 
 Right atrium 
 Left atrium 