

Name : Mr. Prasanth Sagar Babu

Age: 42 Y

Sex: M

Address : ECITY

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

UHID:CELE.0000129871



OP Number:CELEOPV342116

Bill No :CELE-OCR-55521

Date : 08.03.2024 08:10

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
3	2D ECHO	
4	LIVER FUNCTION TEST (LFT) - 12	
5	GLUCOSE, FASTING	
6	HEMOGRAM + PERIPHERAL SMEAR	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG	
12	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
13	DENTAL CONSULTATION - 15	
14	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
15	URINE GLUCOSE(FASTING)	
16	HbA1c, GLYCATED HEMOGLOBIN	
17	X-RAY CHEST PA	
18	ENT CONSULTATION - 06	
19	FITNESS BY GENERAL PHYSICIAN - 25	
20	BLOOD GROUP ABO AND RH FACTOR	
21	LIPID PROFILE	
22	BODY MASS INDEX (BMI)	
23	OPHTHAL BY GENERAL PHYSICIAN - 05 - 5	
24	ULTRASOUND - WHOLE ABDOMEN - 08	
25	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

Audio-3, Physio-14, ~~10~~

c/s/b Dr. Yashaswi
 Nose - DNS
 Throat - NAD
 Ear - B/L
 TM (N) intact.
 Δ:- DNS
 Rx
 FURAMIST nasal spray
 1 spray
 1-0-1x3 nose.

Dr. YASHASWI, MBBS, DLO
 FELLOW IN RHINOLOGY
 ALLERGY SPECIALIST
 REG. No.: 71613
 MOB.: 9448089291 / 9945126633

MEDICAL FITNESS CERTIFICATE

NAME: Mr. Prasanth Sagar

AGE/SEX:

UHID:

DATE:

CHIEF COMPLAINTS:

- K/c/o T2DM - on medications

PAST/FAMILY HISTORY:-

Father - T2DM.

ALLERGIES:-

—

GENERAL EXAMINATION:-

PULSE: 102	BP: 128/90	TEMP: 98.6°F	RR: 22/min
HT: 167	WT: 75.4	WAIST: 94	BMI: 27.0

SYSTEMIC EXAMINATION: -

HbA1c - 9.9

VISION SCREENING

<u>Vision</u>	<u>Rt</u>	<u>Lt</u>	<u>With Corrections</u>
<u>DISTANT</u>	6/6	6/6	
<u>NEAR</u>	N6	N6	
<u>COLOUR</u>			

Chest:
CVS:
P/A:

} NAD.

IMPRESSION:-

FINAL RECOMMENDATIONS:-

GENERAL PHYSICIAN



MC-6146

Patient Name	: Mr.PRASANTH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 11:41AM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 02:57PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	17.2	g/dL	13-17	Spectrophotometer
PCV	51.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.77	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	88.8	fL	83-101	Calculated
MCH	29.9	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,690	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	49	%	40-80	Electrical Impedance
LYMPHOCYTES	30.3	%	20-40	Electrical Impedance
EOSINOPHILS	10.3	%	1-6	Electrical Impedance
MONOCYTES	9.6	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3278.1	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2027.07	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	689.07	Cells/cu.mm	20-500	Calculated
MONOCYTES	642.24	Cells/cu.mm	200-1000	Calculated
BASOPHILS	53.52	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.62		0.78- 3.53	Calculated
PLATELET COUNT	336000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	3	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

Page 1 of 16

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

Dr Priya Murthy
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SIN No:BED240060988

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



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WBCs: are normal in total number with relative increase in eosinophils.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH RELATIVE EOSINOPHILIA.

Kindly correlate clinically.

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Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 11:41AM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 03:48PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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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. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

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MC-5146

Patient Name	: Mr.PRASANTH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 12:18PM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 04:31PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	227	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of $>$ 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)	384	mg/dL	70-140	HEXOKINASE

Comment:

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

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	10.5	%		HPLC

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SIN No:EDT240027489

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IAC-6146

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DEPARTMENT OF BIOCHEMISTRY

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

ESTIMATED AVERAGE GLUCOSE 255 mg/dL Calculated
(eAG)

Comment:

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

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

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
A: HbF >25%
B: Homozygous Hemoglobinopathy.
(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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MC-6146

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Age/Gender : 42 Y 7 M 9 D/M
UHID/MR No : CELE.0000129871
Visit ID : CELEOPV342116
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS13081

Collected : 08/Mar/2024 08:24AM
Received : 08/Mar/2024 11:58AM
Reported : 08/Mar/2024 02:14PM
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. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	198	mg/dL	<200	CHO-POD
TRIGLYCERIDES	81	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	45	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	153	mg/dL	<130	Calculated
LDL CHOLESTEROL	136.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	16.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.39		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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SIN No:SE04653488

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



IAC-8146

Patient Name : Mr.PRASANTH SAGAR BABU
Age/Gender : 42 Y 7 M 9 D/M
UHID/MR No : CELE.0000129871
Visit ID : CELEOPV342116
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS13081

Collected : 08/Mar/2024 08:24AM
Received : 08/Mar/2024 11:58AM
Reported : 08/Mar/2024 02:14PM
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

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UHID/MR No : CELE.0000129871
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.78	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.65	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	60	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	30.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	96.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.92	g/dL	6.6-8.3	Biuret
ALBUMIN	4.56	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.36	g/dL	2.0-3.5	Calculated
A/G RATIO	1.93		0.9-2.0	Calculated

Comment:

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

Common patterns seen:

1. Hepatocellular Injury:

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

2. Cholestatic Pattern:

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

3. Synthetic function impairment:

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

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.85	mg/dL	0.67-1.17	Jaffe's, Method
UREA	22.60	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.58	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.88	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	101	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.92	g/dL	6.6-8.3	Biuret
ALBUMIN	4.56	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.36	g/dL	2.0-3.5	Calculated
A/G RATIO	1.93		0.9-2.0	Calculated

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	26.00	U/L	<55	IFCC

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MC-6146

Patient Name	: Mr.PRASANATH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 12:22PM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 02:35PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.08	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.79	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	7.95	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

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

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

Page 11 of 16

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:SPL24040276

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



MC-6146

Patient Name : Mr.PRASANTH SAGAR BABU
Age/Gender : 42 Y 7 M 9 D/M
UHID/MR No : CELE.0000129871
Visit ID : CELEOPV342116
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS13081

Collected : 08/Mar/2024 08:24AM
Received : 08/Mar/2024 12:22PM
Reported : 08/Mar/2024 02:35PM
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

Page 12 of 16

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:SPL24040276

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



MC-6146

Patient Name	: Mr.PRASANTH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 12:22PM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 01:04PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.370	ng/mL	0-4	CLIA

Comment:

Disclaimer: *The results determined by assays using different manufacturers or methods may not be comparable.

Manufacturer: BECKMAN COULTER

Page 13 of 16

DR.SHIVARAJA SHETTY
M.B.B.S.,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24040276

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





MC-6146

Patient Name	: Mr.PRASANATH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 04:07PM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 04:30PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	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	POSITIVE ++++		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	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 14 of 16

Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist

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



SIN No:UR2299583

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



MC-6146

Patient Name : Mr.PRASANTH SAGAR BABU
Age/Gender : 42 Y 7 M 9 D/M
UHID/MR No : CELE.0000129871
Visit ID : CELEOPV342116
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobS13081

Collected : 08/Mar/2024 10:52AM
Received : 08/Mar/2024 04:07PM
Reported : 08/Mar/2024 05:48PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

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





MC-6146

Patient Name	: Mr.PRASANTH SAGAR BABU	Collected	: 08/Mar/2024 08:24AM
Age/Gender	: 42 Y 7 M 9 D/M	Received	: 08/Mar/2024 01:16PM
UHID/MR No	: CELE.0000129871	Reported	: 08/Mar/2024 03:20PM
Visit ID	: CELEOPV342116	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobS13081		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR

Dr. Vidya Aniket Gore
M.B.B.S, M.D(Pathology)
Consultant Pathologist

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

Page 16 of 16



SIN No: UF010926

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

2-D ECHO-CARDIOGRAPHY DOPPLER & COLOUR DOPPLER REPORT

NAME : MR PRASANTH SAGAR BABU

DATE:08/03/2024

AGE/SEX: 42 Y/ M

REF : ARCOFEMI- MEDIWHEEL

UHID:129871/03/31

***** MEASUREMENTS & FLOW VELOCITIES AS DEPICTED IN IMAGES OVERLEAF.**

1. NORMAL VALVES.
2. **M V : FLOW S/O DIASTOLIC DYSFUNCTION GRADE 1 ;** NORMAL FLOW ACROSS OTHER VALVES.
3. NO MR/ AR/ TR.
4. NORMAL GREAT VESSELS.
5. NORMAL SYSTEMIC VEINS & AT LEAST 3 PULMONARY VEINS SEEN DRAINING INTO LA.
6. NORMAL SIZED CHAMBERS.
7. NO REGIONAL WALL MOTION ABNORMALITIES.
8. INTACT SEPTAE (IVS & IAS).
9. GOOD LV & RV SYSTOLIC FUNCTION. **LVDD GRADE 1 ;**
10. PERICARDIUM : NORMAL
11. NO OBVIOUS VEGETATION / CLOTS.



DR (CAPT.)S.V KRISHNA RAO

MD (PGI), DNB (Card)

Senior Consultant – Cardiologist

Reg No : ANP 19780000746KTK

To correlate with clinical findings & other relevant investigations .

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

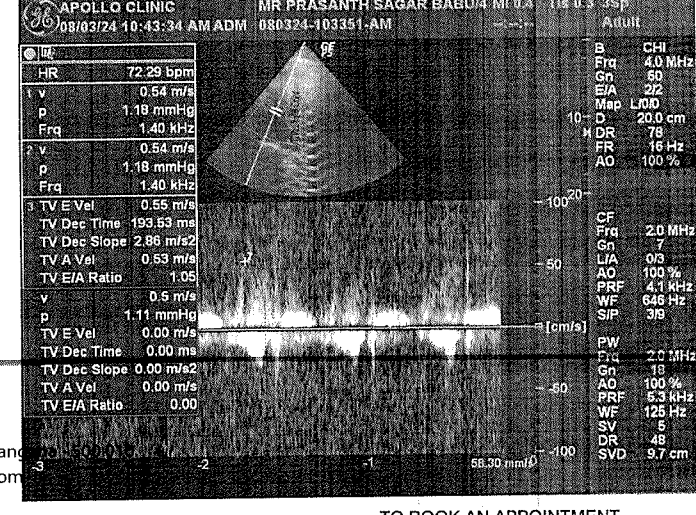
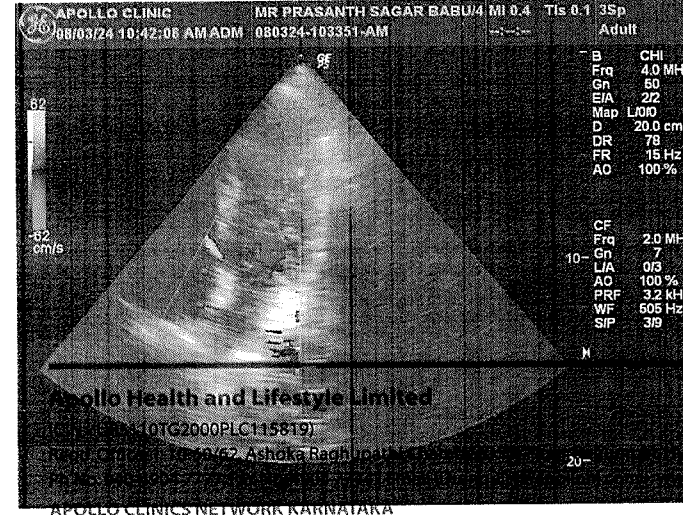
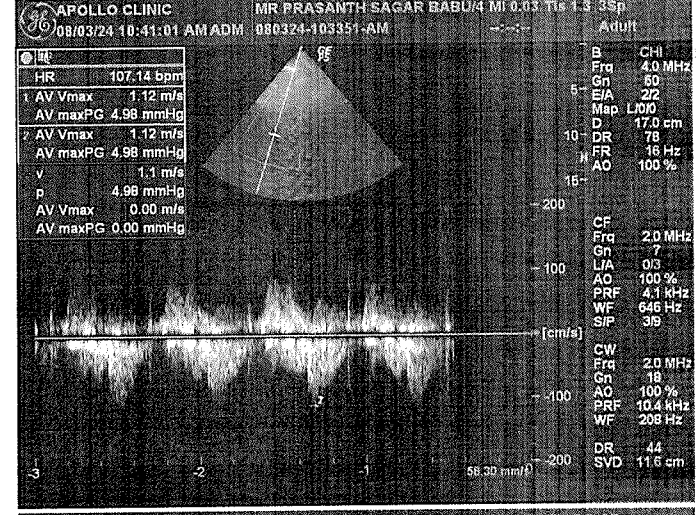
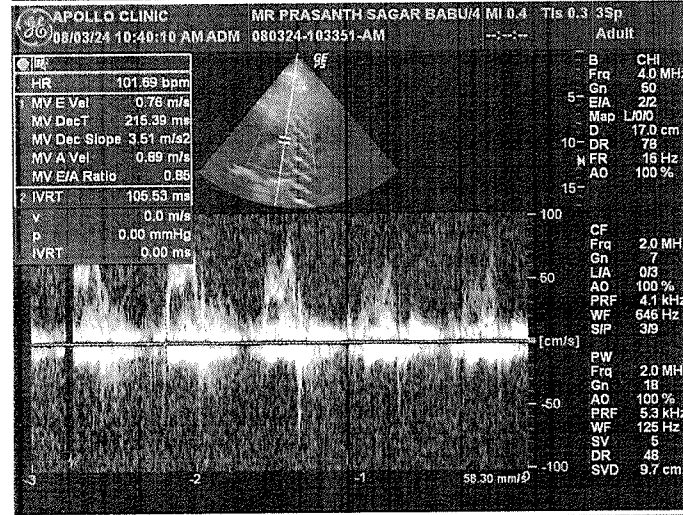
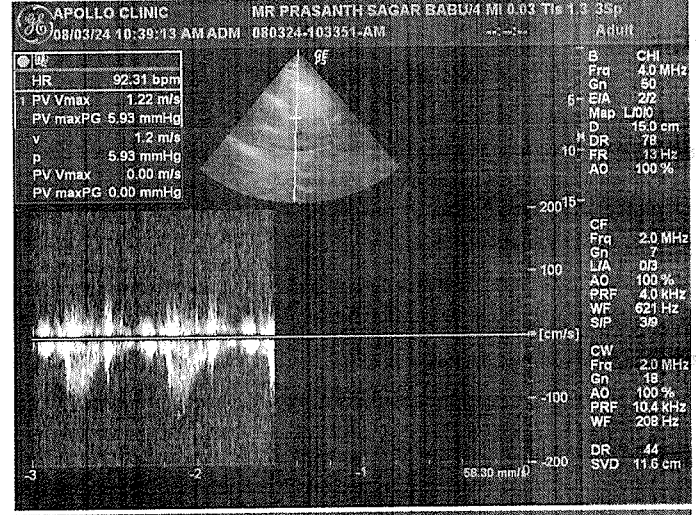
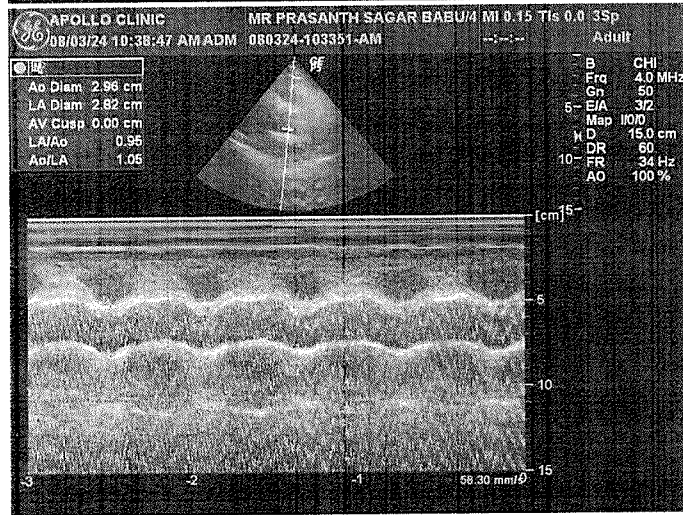
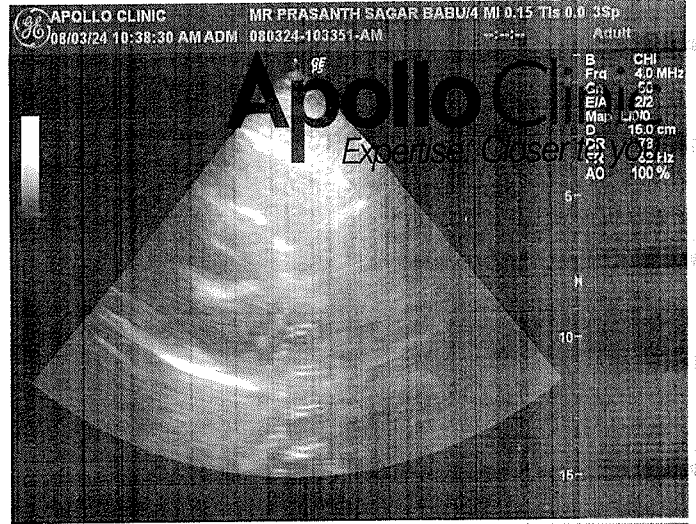
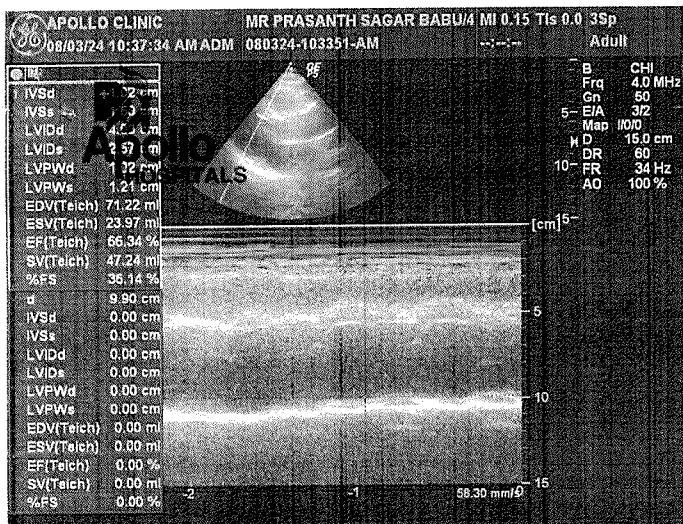
APOLLO CLINICS NETWORK KARNATAKA

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**



Apolllo Health and Lifestyle Limited

10TG2000PLC115819

62 Ashoka Road, 62 Ashoka Road, 62 Ashoka Road

erabad, Telangana
apollolhl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

NAME:	MR. PRASANTH SAGAR BABU
AGE / SEX:	42 YRS/ MALE
DATE:	08/03/2024
REFERRED BY:	ARCOFEMI

ABDOMINAL ULTRASONOGRAPHY REPORT

LIVER: appear normal in size and increased echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal

GALL BLADDER: moderately distended and appears normal. No abnormal wall thickening / pericholecystic fluid seen.

PANCREAS: Normal to the extent visualized.

SPLEEN: normal in size and echo texture. No focal lesion noted.

KIDNEYS: Both kidneys are normal in size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus / hydronephrosis on both sides.

PELVIC ORGANS:

Urinary bladder is moderately distended and appears normal.

Prostate appear normal in size and echogenicity.

No free fluid in the abdomen and pelvis.

IMPRESSION:

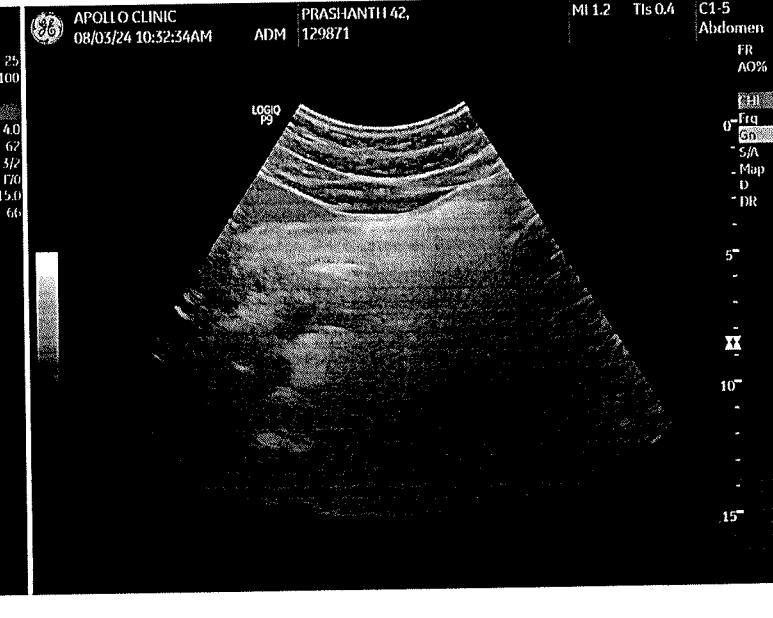
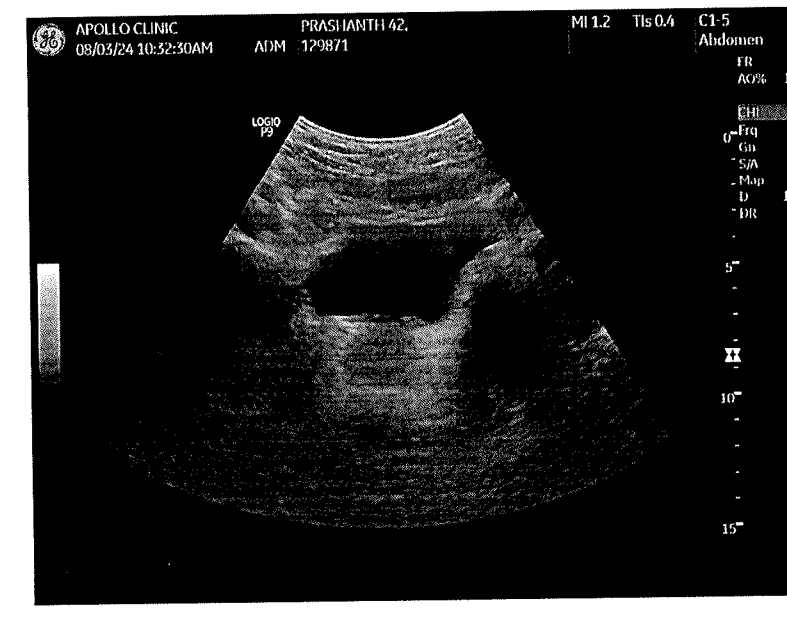
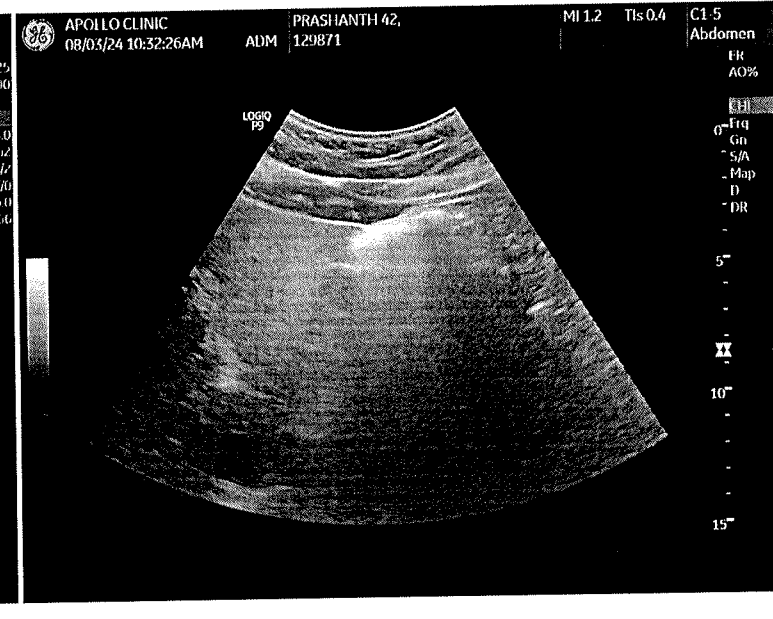
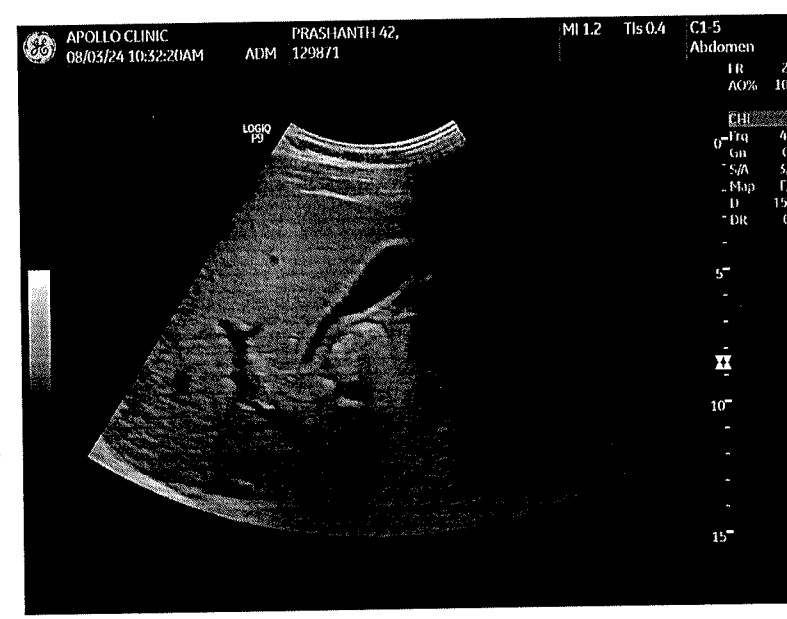
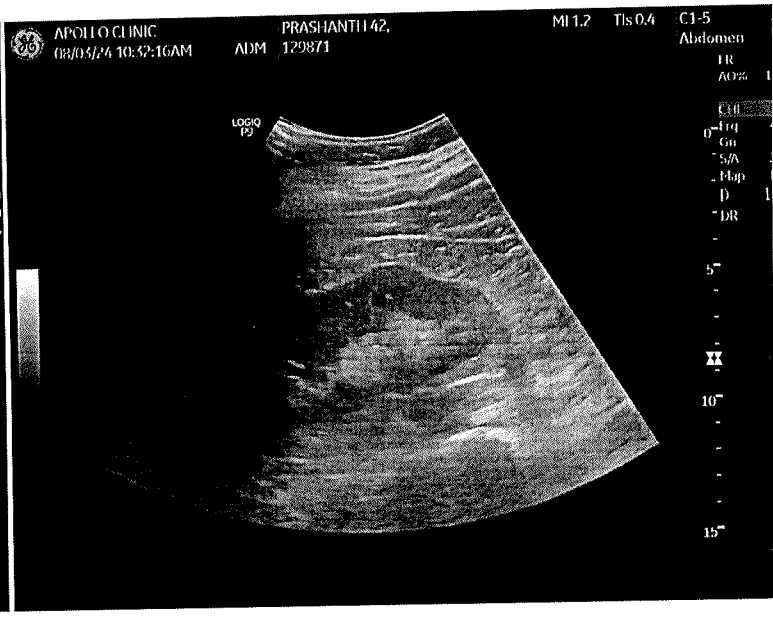
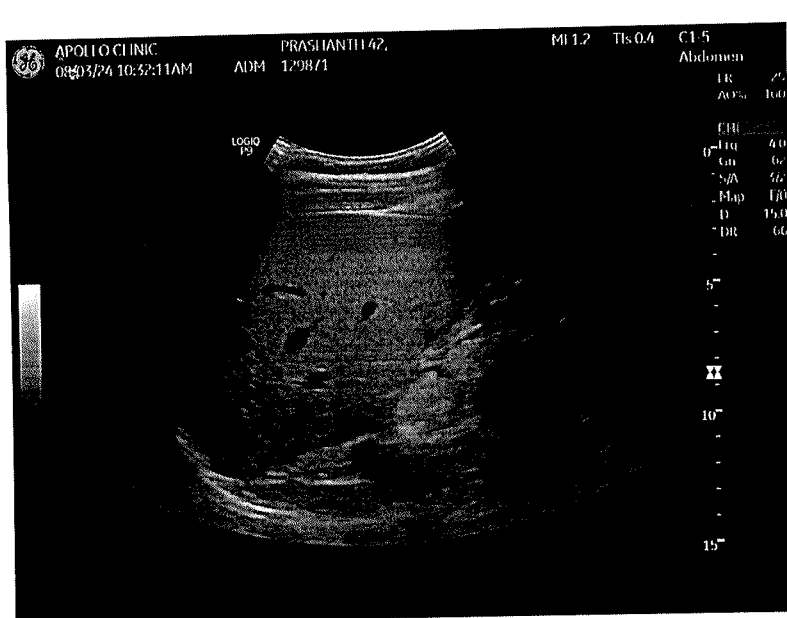
- **Grade I fatty liver.**

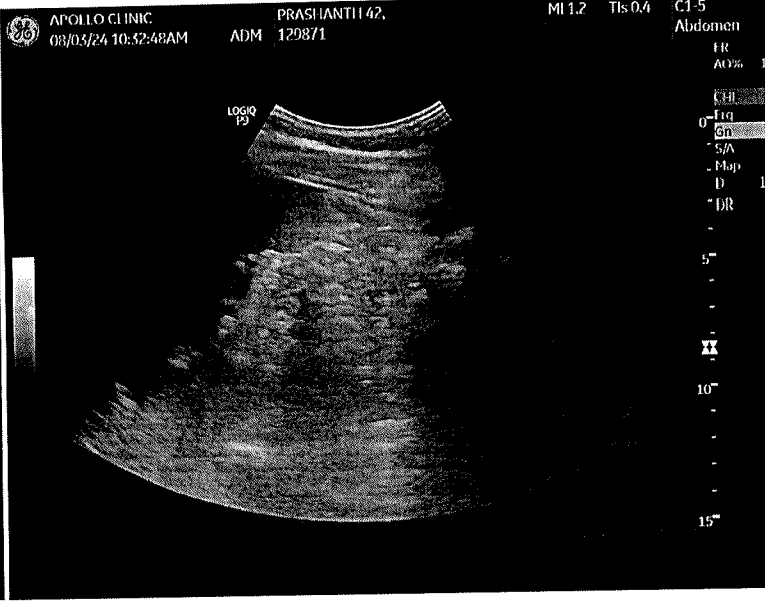
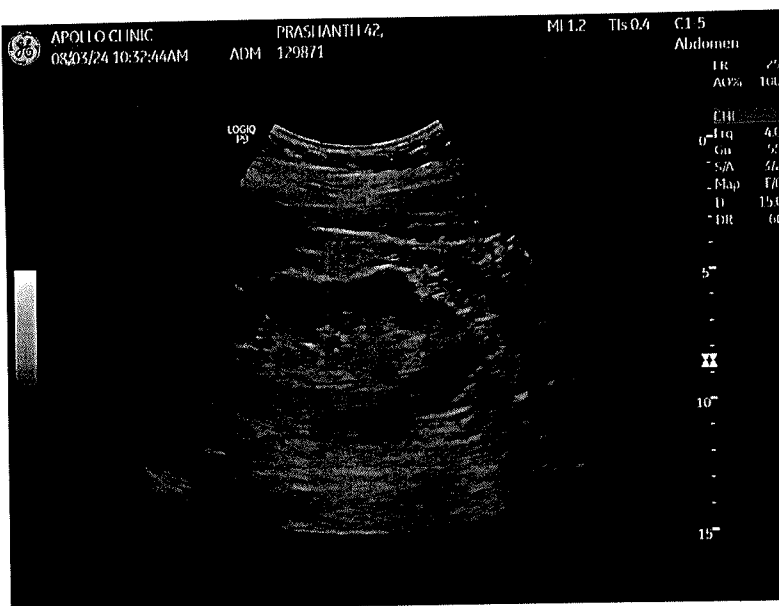
*To correlate clinically & with other investigations.
Not for medico-legal purpose*



DR. VIGNESH K

CONSULTANT RADIOLOGIST





Patient Name : Mr. Prasanth Sagar Babu
UHID : CELE.0000129871
Reported on : 08-03-2024 14:12
Adm/Consult Doctor :

Age : 42 Y M
OP Visit No : CELEOPV342116
Printed on : 08-03-2024 14:12
Ref Doctor : SELF

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

Printed on:08-03-2024 14:12

---End of the Report---


For **Dr. VIGNESH K**
MBBS, MD Radio-Diagnosis
Radiology

Date: IST: 2024-03-08 08:44:42

Report ID: AHLLP_00XHE1PV6TE0091_V6TE00A1

Personal Details
 UHID: 00XHE1PV6TE0091
 PatientID: 129871
 Name: MR. PRASANTH SAGAR BABU
 Age: 42
 Gender: Male
 Mobile: 8095813897

Pre-Existing Medical Conditions
Symptoms

Vitals

Measurements
 HR: 92 BPM
 PR: 143 ms
 PD: 116 ms
 QRSD: 93 ms
 QRS Axis: 60 deg
 QT/QTc: 361/361 ms

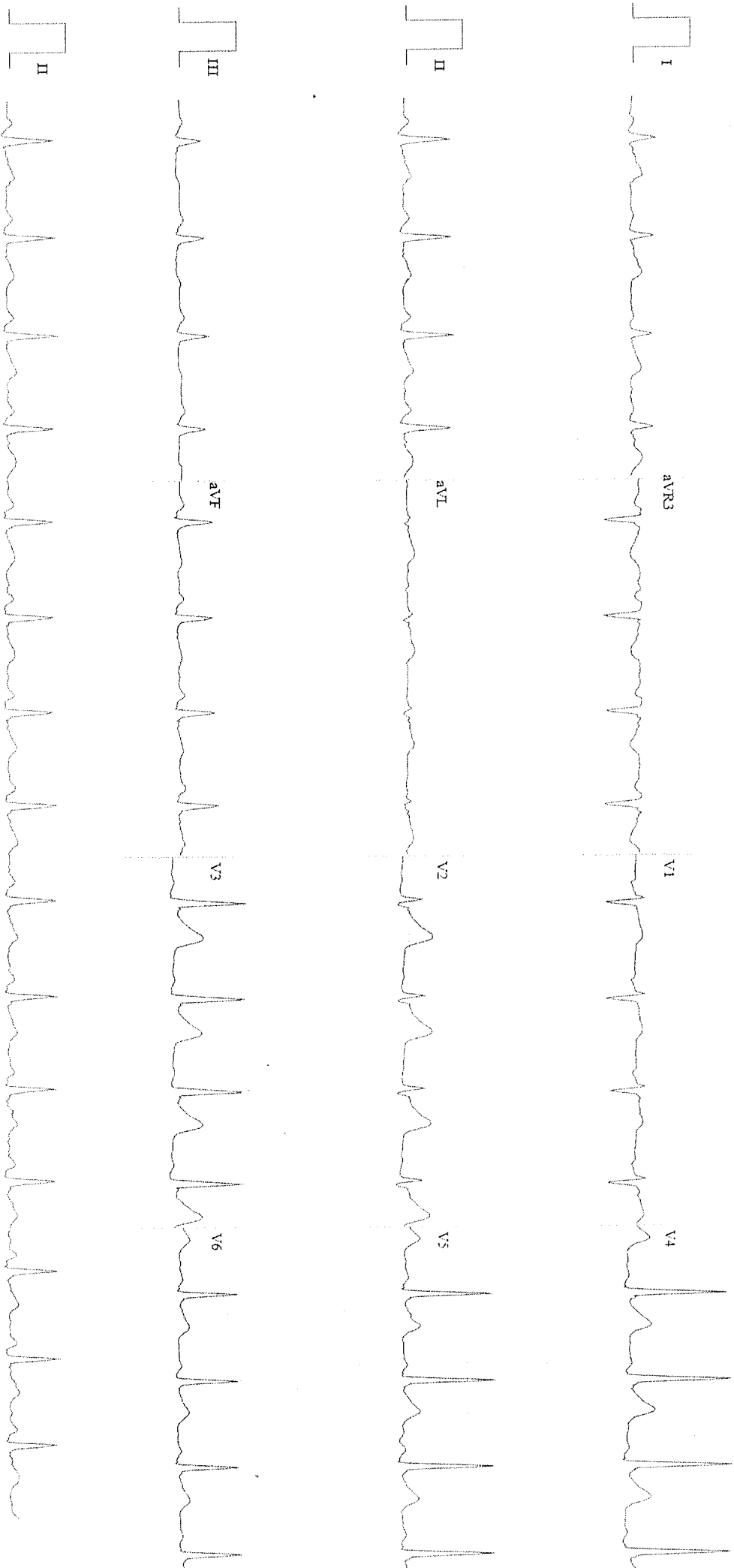
Interpretation
 Sinus Rhythm Regular
 Normal Axis

Authorized by



Dr. Yogesh Kothari
 MD, DNB, FESC, FEP
 Reg. No. - KMC 44065

Apollo
 Hospitals
 Chennai



Speed: 25 mm/sec F: 0.05 - 40 Hz Lamb: 10 mm/mV Chest: 10 mm/mV

no. Lines: 1. Analysis on this report is based on 12-lead ECG. Single-lead should be used as an adjunct to clinical history. Interpretation of this report is based on available data. Final interpretation is important. Normal ECG does not rule out any disease. Measurement of ECG is not always mean. Always have clinical data. Final interpretation is important.

Version: 1.0 Copyright © Apollo Hospitals



Apollo Clinic

Consent Form

Patient Name: Prasant Sagar Baba Age: 42

UHID Number: Company Name:

I Mr/Mrs/Ms..... Employee of

(Company) want to inform you that I am not getting the Diet, opthal & Dental Dr. not
Available due to festival
test done which is a part of routine health check package.

Reason if any:

.....

And I claim the above statement in my full consciousness.

Patient signature: Sagar Date: 8/3/24

PHYSIOTHERAPY SCREENING FORM

Date _____

1 ABOUT YOU

Name Prasanth
Age 42 Gender M F Other

Occupation

- Desk Work
 Active / On the Move
 Stay-at-home Parent
 Retired

Mobile Number _____
Email _____

2 PAIN HISTORY

Have you undergone physiotherapy any time in the past?
Yes No

Have you recently felt any physical pain or discomfort? (in the last 3 months)
Yes No

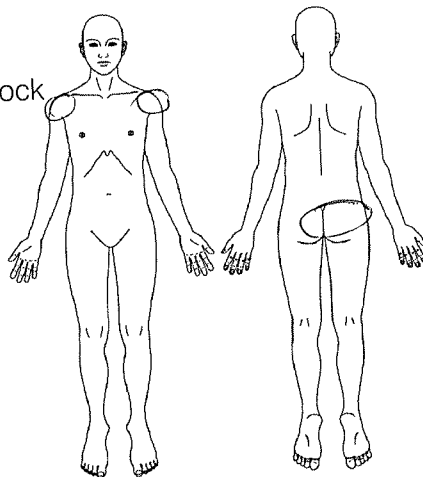
If yes, please fill the next section.

FOR OFFICE USE: If any answer is "Yes", please refer to Physiotherapist for review.

3 PAIN INFORMATION

Indicate your area of pain:

- Neck
 Upper / Mid-Back
 Lower Back / Buttock
 Elbow
 Wrist / Hand
 Ankle / Foot
 Shoulder
 Hip
 Knee
 Legs



For how long have you had this pain?

How will you rate your pain level on a scale of 1 to 10? (Circle your pain level)

1 2 3 4 5 6 7 8 9 10
Least painful Most painful

What treatment are you undergoing for the same?

us + IFT & Shoulder
Shoulder & low back

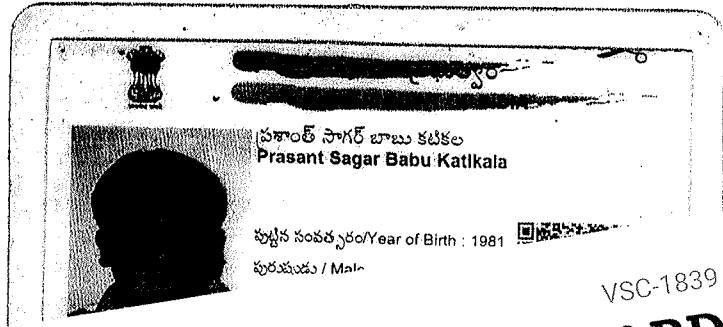
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To book an appointment

1860 500 7788



VSC-1839

VITALITY SCORE CARD

Date:

Name:



www.reliva.in
9920991584

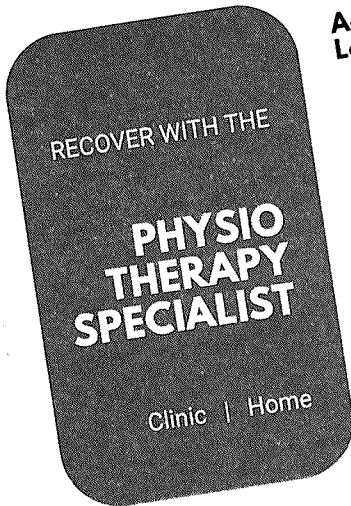
BMI :
Posture Issues, if any

Forward Neck
Rounded Shoulders
Scoliosis / Lordosis

Sedentary | Active

Activity Levels

Work Profile
Lifestyle



Fitness & Strength Assessment

Lower Limb (30s CST)	16	22
Upper Limb (Bicep Curl)	16	22
Mobility (TUG)	7s	11s
Balance 4 Stance	2	3

Higher strength, mobility and balance correlates with lower incidence of pain and lower risks of injuries.

MSK issues, if any

Advice:



Scan here to watch video

Patient First Name

Prasanth

Patient Last Name

Sagar Babu

Patient Mobile Number

8904896783

Patient E-mail ID

chaitanya.31137@gmail.com

Date of Birth

02-02-1982

Gender

male

Client

ARCOFEMI HEALTHCARE LIMITED

Agreement Name

(1) ARCOFEMI MEDIWHEEL MALE AHC

Package Name

(1) ARCOFEMI - MEDIWHEEL - FULL
BODY ANNUAL PLUS ABOVE 50Y MALE

Visit Type

in-clinic

Visit Status

Report Status

Order Confirmed

City

Clinic

ELECTRONIC CITY

Order Date

05-03-2024

Appointment Date

08-03-2024

Slot Time

08:30-08:45



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Net Amount