

Patient Name : Mr.MAHENDER KUMAR
Age/Gender : 30 Y 1 M 21 D/M
UHID/MR No : SCHI.0000021889
Visit ID : SCHIOPV32638
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 500297

Collected : 29/Jun/2024 01:38PM
Received : 29/Jun/2024 02:03PM
Reported : 29/Jun/2024 10:10PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

...




Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology
SIN No:BED240168817

Patient Name : Mr.MAHENDER KUMAR
Age/Gender : 30 Y 1 M 21 D/M
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.5	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	44.70	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.9	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	91.2	fL	83-101	Calculated
MCH	29.5	pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	15.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,280	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	50.8	%	40-80	Electrical Impedance
LYMPHOCYTES	34	%	20-40	Electrical Impedance
EOSINOPHILS	4.2	%	1-6	Electrical Impedance
MONOCYTES	10.3	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4206.24	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2815.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	347.76	Cells/cu.mm	20-500	Calculated
MONOCYTES	852.84	Cells/cu.mm	200-1000	Calculated
BASOPHILS	57.96	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.49		0.78- 3.53	Calculated
PLATELET COUNT	226000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.

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NO HEMOPARASITES SEEN



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - 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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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	97	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)	110	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	149	U/L	<50	Visible with P-5-P

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Dr. SHWETA GUPTA
MBBS,MD (Pathology)
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SIN No:SE04765397



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL , SERUM	0.50	mg/dL	0.20-1.20	DIAZO METHOD

Test Name	Result	Unit	Bio. Ref. Range	Method
BUN/CREATININE RATIO , SERUM				
BLOOD UREA NITROGEN	12.6	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase
BUN / CREATININE RATIO	13.97			Calculated



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE , SERUM	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase



Dr. SHWETA GUPTA
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - 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	Physical measurement
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.030		1.002-1.030	Dipstick
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
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Comment:

All urine samples are checked for adequacy and suitability before examination. Microscopy findings are reported as an average of 10 high power fields.

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

Page 9 of 10



Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology
SIN No:UR2377209



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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324



Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology
SIN No:UR2377209



Name : Mr. Mahender Kumar Address : H.NO-1047 SANTOSH NAGAR SECTOR-33 BY PASS ROAD FARIDABAD Plan : ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT	Age: 30 Y Sex: M	UHID: SCHI.0000021889  OP Number: SCHIOPV32638 Bill No : SCHI-OCR-11307 Date : 29.06.2024 13:22
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324	
1	BILIRUBIN, TOTAL - SERUM ✓	
2	GLUCOSE, FASTING ✓	
3	HEMOGRAM + PERIPHERAL SMEAR ✓	
4	ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM ✓	
5	COMPLETE URINE EXAMINATION ✓	
6	PERIPHERAL SMEAR ✓	
7	ECG ✓	
8	CREATININE, SERUM ✓	
9	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) ✓	
10	X-RAY CHEST PA ✓	
11	FITNESS BY GENERAL PHYSICIAN ✓	
12	BLOOD GROUP ABO AND RH FACTOR ✓	
13	OPHTHAL BY GENERAL PHYSICIAN <i>come late</i>	
14	BUN/CREATININE RATIO ✓	

Eye

Height:	164 cm
Weight:	58 kg
B.P.:	120/80 mmHg
Pulse:	82 /min
SP02:	98%

ARCOFEMI Mahender kumar.mat ARCOFEMI ARCOFEMI

आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



नाम / Name
MAHENDER KUMAR

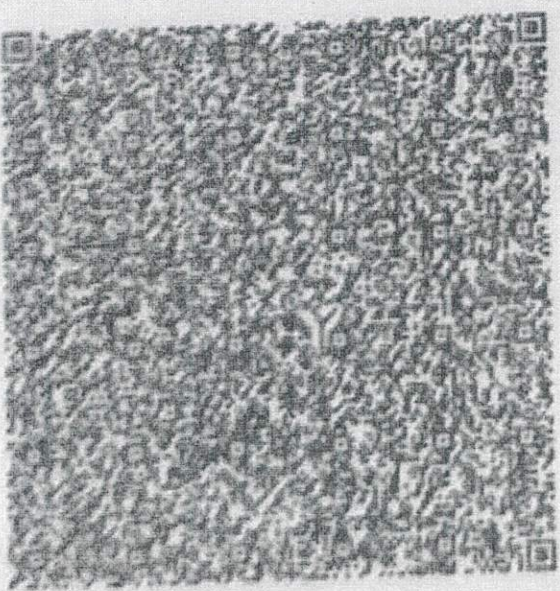
पिता का नाम / Father's Name
BABAN RAM

जन्म की तिथि /
Date of Birth
08/05/1994

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card

BKLP M3407M

सहस्रनामा / Signature
Mahender



14022019

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mahender Kumar on 29/6/24

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

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

Dr. Neenu
 Medical Officer
 The Apollo Clinic, Uppal

This certificate is not meant for medico-legal purposes



PRE - EMPLOYMENT EXAMINATION

Name - Mahender kumar Age / Sex - 30y/M Date - 29/6/24
MRN: 21889 Company's Name: Arcotemi
Significant History: NS.

General Physical Examination

Height :	Weight :	BP :
Pulse :	Pallor : NO	Temp: (N)
Edema : NO	Cyanosis : NO	L.N. : NP
JVP : NR	Other : clear	
Jaundice : NO		
Respiratory : B/clear	Cardiovascular: S1S2	
Abdomen : (N)	CNS : NAD.	
Ear Examination: (N)		

Findings

Blood Test : SPT 145
Urine : (N) Stool :
CXR : (N) ECG : (N)

Reports are attached herewith

Recommendation

Final Impression : FIT / UNFIT

Man
(Signature of Consultant)
Ww Jadhav



DIGITAL X-RAY REPORT

NAME: MAHENDER	DATE: 29.06.2024
UHID NO : 21889	AGE: 30 YRS/ SEX: M

X-RAY CHEST PA VIEW

Both the lung fields show no active parenchymal pathology.

Both the costophrenic angles are clear.

Heart size is normal.

Both the domes of diaphragm are normal.

Bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY

Please correlate clinically and with lab investigations


DR. DEEPIKA AGARWAL
Consultant Radiologist

DR. DEEPIKA AGARWAL
Consultant Radiologist
DMC No. 56777
Apollo Speciality Hospitals (P) Ltd.
A-2, Chirag Enclave, Greater Kailash-1
New Delhi-110048

Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048
Ph: 011-40465555, 9910995018 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd.

CIN - U85100TG2009PTC099414

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038
Ph No: 040-4904 7777 | www.apollohl.com

ID: 21889

MAHENDER KUMAR

Male 30Years

Req. No. :

29-06-2024 15:08:49

HR : 75 bpm

P : 120 ms

PR : 157 ms

QRS : 85 ms

QT/QTcBz : 370/414 ms

P/QRS/T : 56/67/39 °

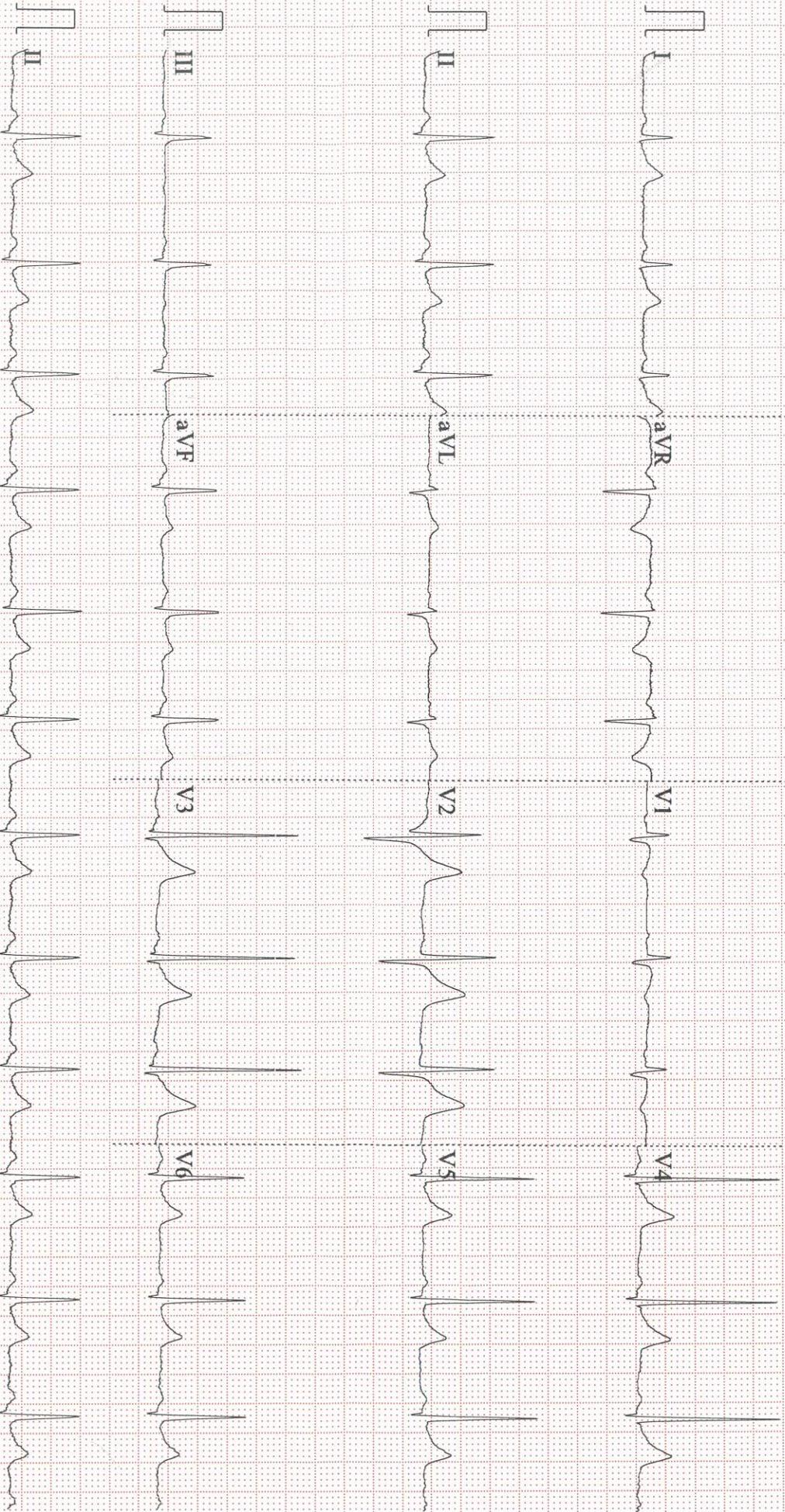
RV5/SVI : 1.935/0.258 mV

Diagnosis Information:

Sinus Arrhythmia

WNL

Report Confirmed by:



0.67~25Hz AC50 25mm/s 10mm/mV 4*2.5s+1r

V2.22

SEMIP V1.92

APOLLO SPECIALTY HOSPITALS

Mr. Mahender Kumar
30/M

Eye checkup
Housing glass

No H/O systemic disease & binocularity

V_A < 6/6 B/C

V_A < 6/60 EPH 6/18
6/6

UC < 16
16 } - myopia

POG < +4.00 DS / +0.50 DC x 175
Plano

BCVA < +4.00 DS / +0.75 DC x 30° 6/18 EPH NI V_A < 6/18
6/6
No Acceptance 6/6 - NS
eg (w) 6/6

Slit Lamp exam
A/S Normal B/C

Color V_A < Normal
B/C

Pupil reaction Normal B/C

Fundus < wNL B/C

Adv

- add Refresh Tear TDS B/C x 1 month

Danakhani
11/07/24

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NO HEMOPARASITES SEEN



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GLUCOSE, FASTING , NAF PLASMA	97	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
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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. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	110	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	149	U/L	<50	Visible with P-5-P

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Consultant Pathology
SIN No:SE04765397



Patient Name : Mr.MAHENDER KUMAR
Age/Gender : 30 Y 1 M 21 D/M
UHID/MR No : SCHI.0000021889
Visit ID : SCHIOPV32638
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 500297

Collected : 29/Jun/2024 01:38PM
Received : 29/Jun/2024 02:03PM
Reported : 29/Jun/2024 06:07PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.



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Age/Gender : 30 Y 1 M 21 D/M	Received : 29/Jun/2024 02:03PM
UHID/MR No : SCHI.0000021889	Reported : 29/Jun/2024 04:41PM
Visit ID : SCHIOPV32638	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL , SERUM	0.50	mg/dL	0.20-1.20	DIAZO METHOD

Test Name	Result	Unit	Bio. Ref. Range	Method
BUN/CREATININE RATIO , SERUM				
BLOOD UREA NITROGEN	12.6	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase
BUN / CREATININE RATIO	13.97			Calculated



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Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE , SERUM	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase



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Patient Name : Mr.MAHENDER KUMAR	Collected : 29/Jun/2024 01:38PM
Age/Gender : 30 Y 1 M 21 D/M	Received : 29/Jun/2024 03:46PM
UHID/MR No : SCHI.0000021889	Reported : 29/Jun/2024 06:11PM
Visit ID : SCHIOPV32638	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 500297	

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	Physical measurement
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.030		1.002-1.030	Dipstick
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
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Comment:

All urine samples are checked for adequacy and suitability before examination. Microscopy findings are reported as an average of 10 high power fields.

*** End Of Report ***

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Patient Name : Mr.MAHENDER KUMAR
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