

neelambuj_007 (a yahoo. 6. in neilsaundrya 3 (a gonail.com



: Mr. NEELAMBUJ SAUNDRYA Name

Age: 39Y 3M 13D

Address : Kondhwa Bk Pune Maharashtra INDIA 411048

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT

PAN INDIA OP AGREEMENT

sex: Male

UHID: CWAN.0000137960

OP No: CWANOPV239997 Bill No: CWAN-OCR-52104

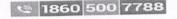
		Date: Sep 16th, 2024, 8:29 AM
Sno.	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D	ECHO - PAN INDIA - FY2324
1	COMPLETE URINE EXAMINATION	Clinical Pathology
2	OPTHAL BY GENERAL PHYSICIAN	Consultation
1 2	GAMMA GLUTAMYL TRANFERASE (GGT)	Biochemistry
1	DENTAL CONSULTATION	Consultation
5		General
\ 6	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry
	URINE GLUCOSE(FASTING)	Clinical Pathology
0	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry
	GLUCOSE, FASTING	Biochemistry
. 14	A WASTE A PROMEN	Ultrasound Radiology
		Consultation
VI		Biochemistry
1	THE TAX PROPERTY (LET)	Biochemistry
	THE STANDARD (POST PRIANDIAL)	Clinical Pathology
1.		Haematology
	The second of th	Haematology
1	/	X Ray Radiology
		General
	TOTAL PUNCTION TEST (PET/KET)	Biochemistry
<u> </u>	DE LA CTOR	Blood Bank
7-25		Cardiology
	2 D ECHO	Consultation
	FITNESS BY GENERAL PHYSICIAN	Biochemistry
	LIPID PROFILE 24 ECG	Cardiology

Ht. 169cm 14 73.4/eg BP-130180



Apollo Health and Lifestyle Limited

GSTIN: 27AADCA0733E1Z7



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Neclambig Sceendrya on 17/9/2024 After reviewing the medical history and on clinical examination it has been found that	
he she is	Tick
Medically Fit	H 2
Fit with restrictions/recommendations	
Though following restrictions have been revealed, in my opinion, these are no impediments to the job.	t
2 Mild Sugars in Pre-dicebetic levels. 3 2-D-Echo-Bordeline LV4	
2 Mill Sugars in fre-dicebetic levels.	
3 2-D-Echo - Borderline LV4	
However the employee should follow the advice/medication that has been communicated to him/her.	3
Review after	
Currently Unfit.	
Review afterrecommend	ded
• Unfit	

This certificate is not meant for medico-legal purposes

DR. MUSHFIYA BAHRAINWALA
M.B.B.S
Reg. No.: 47527
Apollo Clinic Wanewarie
NIBM Road, Kondhwa.

The Apollo Clinic, (Location)

Medical Officer





Date

UHID

: 9/16/2024

Department

:General Physician

Patient Name

: Mr. NEELAMBUJ

Doctor

: Dr.MUSHFIYA BAHRAINWALA

SAUNDRYA

Registration No.

: 2020010062

Age / Gender

: CWAN.0000137960

: MBBS and PG in Hospital

Management

Consulation Timing

Height: 169cm.

: 8:30 AM

Weight:

Pulse:

: 39Yrs 3Mths 13Days / Male Qualification

BMI:

Resp:

Waist Circum:

General Examination / Allergies

History

Temp:

H/0 49~ 0/1 meds sine ly

Fert'- D-MI HETN.

Clinical Diagnosis & Management Plan

For ALC

- I's ed freq. annalina.

Ole:- CVS

CNS

Resp. NAS

Abdy

Flogic Deports

ATHOLOGY Follow up date:

Doctor Signature

Apollo Clinic, Wanowrie

"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Taluka Haveli, Pune, Pin: 411048 | Phone: (020) 2683 0291/95

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Website

: www.apolloclinic.com



The Apollo Clinic

Wanowrie Pune-411048

PATIENT NAME: - Mr. Neelamby Saundryg

DATE: 16/9/24

AGE/SEX:-

394/19

UHID: 137960

EYE CHECK UP

COMPLETE

PREMEDICAL/OTHER

	RIGHT EYE	LEFT EYE
Far Vision	6/6	6/6
Near Vision	N/6	N/6
Anterior Segment Pupil	NORMAL	NORMAL 1
Fundus	NORMAL	NORMAL -
Colour Vision	NORMAL	NORMAL 1
lop	NORMAL	NORMAL L
Family History/Medical History	-	-

IMPRESSION: Both Eyes Normed vision with glass.

Advice :-

Opthalmologist



: Mr. NEELAMBUJ SAUNDRYA

Age

: 39Yrs 3Mths 13Days

UHID

: CWAN.0000137960

OP Visit No.

: CWANOPV239997

Printed On

: 16-09-2024 01:20 PM

Advised/Pres Doctor : --

. ---

Department

: Radiology

Qualification

. __

Referred By

: Self

Registration No.

: --

Employeer Id

: 22E33348

DEPARTMENT OF RADIOLOGY

Chest PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Cardiac shadow is normal.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen.

---End Of The Report---

 $\begin{array}{c} \text{Dr.SATINDER LAMBA} \\ \text{MBBS, DMRE, MD (USAIM)} \end{array}$

2004/02/386 Radiology



2D ECHOCARDIOGRAPHY & COLOR DOPPLER STUDY

Name: Mr. NEELAMBUJ SAUNDRYA Age/Sex: 39/M Date: 16/09/2024

2D Echo:-

Cardiac chamber dimensions -Normal

Borderline concentric LV hypertrophy.

Wall motion abnormalities - no RWMA

LV systolic function - Normal, LVEF -60%

LV diastolic function - No LV Diastolic dysfunction.

Cardiac valves -

Mitral valve -Normal, no mitral regurgitation.

Aortic valve - Three thin leaflets, no aortic regurgitation, Aortic PG -8 mm Hg

Tricuspid valve - no tricuspid regurgitation, No PAH.

Pulmonary valve - normal

Septae (IAS/IVS) - intact

Clot/vegetation/Pericardial effusion - No

Great Arteries (Aorta/pulmonary artery) - Normal

IVC - Normal

Measurements -

Aorta	LA	IVS	PWD	LVIDd	LVIDs	LVEF
27	31	12	10	42	35	60%

Conclusion:-

Borderline concentric LV hypertrophy.

No RWMA, normal LV systolic function, LVEF - 60%

No LV Diastolic dysfunction.

Normal PA pressure.

Dr. Bhushan Bari

DNB Medicine, DNB Cardiology

Consultant and Interventional Cardiologist



: Mr. NEELAMBUJ SAUNDRYA

UHID

: CWAN.0000137960

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Qualification

: --

Registration No.

: --

DEPARTMENT OF RADIOLOGY

Liver appears normal in size and shows bright echotexture. No focal lesion is seen. PV and CBD normal.

No dilatation of the intrahepatic biliary radicals.

Gall bladder is distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion.

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.

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

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

No free fluid / retroperitoneal lymphadenopathy seen.

No obvious bowel mass detected.

IMPRESSION:-

Grade I Hepatic steatosis.

No other significant abnormality detected.

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.

---End Of The Report---

Dr.SATINDER LAMBA MBBS, DMRE , MD (USAIM) 2004/02/386 Radiology







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Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC's are Normocytic Normochromic WBC's are normal in number and morphology Platelets are Adequate No hemoparasite seen.

Page 1 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900522









: Mr.NEELAMBUJ SAUNDRYA

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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. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.8	g/dL	13-17	Spectrophotometer
PCV	49.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.95	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	83	fL	83-101	Calculated
MCH	26.6	pg	27-32	Calculated
MCHC	32	g/dL	31.5-34.5	Calculated
R.D.W	14.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,110	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	58.2	%	40-80	Electrical Impedance
LYMPHOCYTES	29.3	%	20-40	Electrical Impedance
EOSINOPHILS	3.5	%	1-6	Electrical Impedance
MONOCYTES	8.3	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5302.02	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2669.23	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	318.85	Cells/cu.mm	20-500	Calculated
MONOCYTES	756.13	Cells/cu.mm	200-1000	Calculated
BASOPHILS	63.77	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.99		0.78- 3.53	Calculated
PLATELET COUNT	198000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	5	mm at the end of 1 hour	0-15	Modified Westergrer
PERIPHERAL SMEAR				

RBC's are Normocytic Normochromic

WBC's are normal in number and morphology

Platelets are Adequate

No hemoparasite seen.

Page 2 of 18



Consultant Pathologist SIN No:CWA240900522

MBBS, MD (Pathology)

Dr Sneha Shah

APOLLO CLINICS NETWORK

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab



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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra, India - 411018









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960 : CWANOPV239997

Visit ID Ref Doctor

: CWANOP

: Self

Emp/Auth/TPA ID

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Collected

: 16/Sep/2024 08:34AM

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: 16/Sep/2024 12:38PM

Reported Status : 16/Sep/2024 01:55PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Page 3 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900522









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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDT.	A		
BLOOD GROUP TYPE	0			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 4 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900522











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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING, NAF PLASMA	115	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.

Page 5 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900523









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	115	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.

Page 6 of 18



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:CWA240900553









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

Visit ID

: CWANOPV239997

Ref Doctor

: Self

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN), WH	OLE BLOOD EDTA	<u> </u>		
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	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)

Page 7 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900518









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

Visit ID

: CWANOPV239997

Ref Doctor Emp/Auth/TPA ID : Self : 22E33348 Collected

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	242	mg/dL	<200	CHO-POD
TRIGLYCERIDES	411	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	33	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	209	mg/dL	<130	Calculated
VLDL CHOLESTEROL	82.12	mg/dL	<30	Calculated
CHOL / HDL RATIO	7.33		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.74		<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.

Page 8 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900517









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No Visit ID : CWAN.0000137960

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: CWANOPV239997

Ref Doctor Emp/Auth/TPA ID : Self : 22E33348 Collected

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Interval	Method
LDL CHOLESTEROL - (DIRECT LDL)	126.73	mg/dL	<100	CHE/CHO/POD & Catalase

Page 9 of 18



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
IVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.54	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.42	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	51.8	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	27.8	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.5		<1.15	Calculated
ALKALINE PHOSPHATASE	157.50	U/L	30-120	IFCC
PROTEIN, TOTAL	7.65	g/dL	6.6-8.3	Biuret
ALBUMIN	4.78	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.87	g/dL	2.0-3.5	Calculated
A/G RATIO	1.67		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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.

Page 10 of 18



MBBS, MD (Pathology) Consultant Pathologist SIN No:CWA240900517

Dr Sneha Shah

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra. India - 411018









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UHID/MR No

: CWAN.0000137960

Visit ID

: CWANOPV239997

Ref Doctor Emp/Auth/TPA ID

: 22E33348

: Self

Collected

: 16/Sep/2024 08:34AM

Received

: 16/Sep/2024 12:21PM

: Final Report

Reported Status : 16/Sep/2024 01:06PM

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900517









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

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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. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT) , SER	RUM		
CREATININE	0.82	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	30.65	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	14.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.57	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	10.02	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.79	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	140.47	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.6	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	101.04	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.65	g/dL	6.6-8.3	Biuret
ALBUMIN	4.78	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.87	g/dL	2.0-3.5	Calculated
A/G RATIO	1.67		0.9-2.0	Calculated

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900517

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab



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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra, India - 411018









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

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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. Interval	Method	
GAMMA GLUTAMYL	53.27	U/L	<55	IFCC	
TRANSPEPTIDASE (GGT), SERUM					

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900517









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result Unit		Bio. Ref. Interval	Method	
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM	'		<u>'</u>	
TRI-IODOTHYRONINE (T3, TOTAL)	1.49	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	7.28	μg/dL	5.48-14.28	CLIA	
THYROID STIMULATING HORMONE (TSH)	2.351	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

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900519

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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra. India - 411018









: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

Visit ID

: CWANOPV239997

Ref Doctor Emp/Auth/TPA ID : Self : 22E33348 Collected

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DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900519







Patient Name

: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M

UHID/MR No

: CWAN.0000137960

Visit ID Ref Doctor : CWANOPV239997

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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
рН	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.004		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 M	OUNT AND MICROSCOP	Y		
PUS CELLS	1 - 2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2 /hr		< 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.

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MBBS, MD (Pathology) Consultant Pathologist SIN No:CWA240900520

Dr Sneha Shah

APOLLO CLINICS NETWORK

This test has been performed at Apollo Health and Lifestyle ltd-Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra, India - 411018







: Mr.NEELAMBUJ SAUNDRYA

Age/Gender

: 39 Y 3 M 13 D/M : CWAN.0000137960

UHID/MR No Visit ID

Ref Doctor

: CWANOPV239997

Emp/Auth/TPA ID

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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Consultant Pathologist SIN No:CWA240900532

DR.Sanjay Ingle M.B.B.S,M.D(Pathology)







: Mr.NEELAMBUJ SAUNDRYA

Age/Gender UHID/MR No : 39 Y 3 M 13 D/M : CWAN.0000137960

Visit ID

: CWANOPV239997

Ref Doctor

: CWANOPV239

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

*** End Of Report ***

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:CWA240900521

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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"AMBA VATICA", Plot No. B-1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Wanouri, Pune, Maharashtra, India - 411018



Patient Name : Mr.NEELAMBUJ SAUNDRYA

Age/Gender : 39 Y 3 M 13 D/M
UHID/MR No : CWAN.0000137960
Visit ID : CWANOPV239997

Ref Doctor : Self Emp/Auth/TPA ID : 22E33348 Collected : 16/Sep/2024 08:34AM Received : 16/Sep/2024 12:57PM

Reported : 16/Sep/2024 01:54PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

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

Laboratories not be responsible for any interpretation whatsoever.

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

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

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

This report is not valid for medico legal purposes.





SIN No:CWA240900521