

Patient Name	: Mr.PUNEET TRIVEDI	Collected	: 10/Aug/2024 08:22AM
Age/Gender	: 36 Y 0 M 4 D/M	Received	: 10/Aug/2024 10:09AM
UHID/MR No	: CMYS.0000061766	Reported	: 10/Aug/2024 12:11PM
Visit ID	: CMYSOPV128209	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7497		

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

  
Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240208244



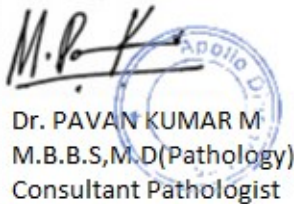
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	14.3	g/dL	13-17	Spectrophotometer
PCV	45.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.21	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	86.4	fL	83-101	Calculated
MCH	27.4	pg	27-32	Calculated
MCHC	31.7	g/dL	31.5-34.5	Calculated
R.D.W	12.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,730	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	58	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	7	%	1-6	Electrical Impedance
MONOCYTES	4	%	2-10	Electrical Impedance
BASOPHILS	1	%	0-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	5063.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2619	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	611.1	Cells/cu.mm	20-500	Calculated
MONOCYTES	349.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	87.3	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.93		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	253000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	06	mm at the end of 1 hour	0-15	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

R.B.C: Majority are normocytic normochromic.



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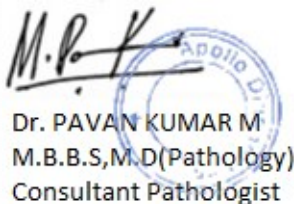
**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

**W.B.C:** Are normal in number,morphology and increase in eosinophils.

**Platelets:** Adequate and are seen in singles and clumps.

**Hemoparasites:** Not seen.

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH EOSINOPHILIA.**



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



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Patient Name	: Mr.PUNEET TRIVEDI	Collected	: 10/Aug/2024 08:22AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	117	mg/dl	74-106	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)	92	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
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SIN No:EDT240085156



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**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

**HbA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA**

HbA1C, GLYCATED HEMOGLOBIN	<b>6.1</b>	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	128	mg/dL	Calculated

**Comment:**

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

REFERENCE GROUP	HbA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

**Note:** Dietary preparation or fasting is not required.

- 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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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	191	mg/dl	0-200	CHOD
TRIGLYCERIDES	140	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	40	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	<b>151</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>123.27</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	28	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.81		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	<b>0.19</b>		<0.11	Calculated

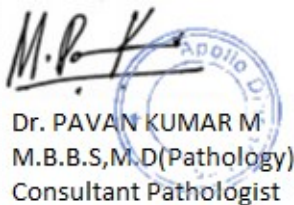
**Comment:**

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

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

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.37	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.25	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	59	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	U/l	0-35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.5		<1.15	Calculated
ALKALINE PHOSPHATASE	108.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	7.30	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		0.9-2.0	Calculated

**Comment:**

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

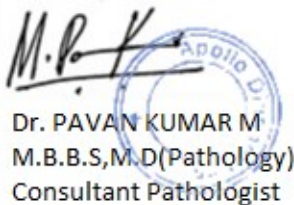
1. Hepatocellular Injury:

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



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\*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.  
4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) WITH GGT , SERUM</b>				
BILIRUBIN, TOTAL	0.37	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.25	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	59	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	U/l	0-35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.5		<1.15	Calculated
ALKALINE PHOSPHATASE	108.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	7.30	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		0.9-2.0	Calculated
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT)	46.00	U/l	0-55	IFCC

**Comment:**


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

1. Hepatocellular Injury:

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



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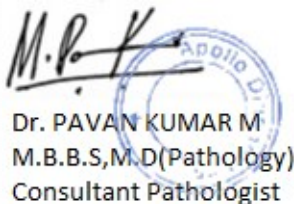
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and sex. \*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

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

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.82	mg/dL	0.67-1.17	Enzymatic colorimetric
UREA	23.07	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	10.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.90	mg/dL	3.5-7.2	Uricase
CALCIUM	9.60	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.84	mg/dl	2.7-4.5	Molybdate
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.9	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.30	g/dl	6.4-8.3	Biuret
ALBUMIN	4.30	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Range	Method
ALKALINE PHOSPHATASE , SERUM	108.00	U/l	53-128	IFCC (AMP buffer)



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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.35	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	11.06	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.500	µIU/mL	0.38-5.33	CLIA

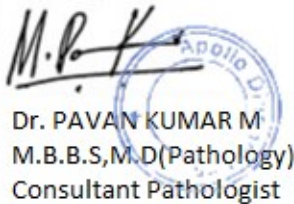
Comment:

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

Page 14 of 22



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218

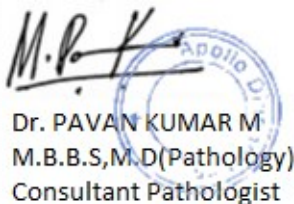


Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 10:09AM
UHID/MR No : CMYS.0000061766	Reported : 10/Aug/2024 12:12PM
Visit ID : CMYSOPV128209	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7497	

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

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



**Dr. PAVAN KUMAR M**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218



Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 10:09AM
UHID/MR No : CMYS.0000061766	Reported : 10/Aug/2024 12:08PM
Visit ID : CMYSOPV128209	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7497	

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN D (25 - OH VITAMIN D) , SERUM	12.58	ng/mL	30 -100	CLIA

**Comment:**

**BIOLOGICAL REFERENCE RANGES**

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10 – 30
SUFFICIENCY	30 – 100
TOXICITY	>100

The biological function of Vitamin D is to maintain normal levels of calcium and phosphorus absorption. 25-Hydroxy vitamin D is the storage form of vitamin D. Vitamin D assists in maintaining bone health by facilitating calcium absorption. Vitamin D deficiency can also cause osteomalacia, which frequently affects elderly patients.

Vitamin D Total levels are composed of two components namely 25-Hydroxy Vitamin D2 and 25-Hydroxy Vitamin D3 both of which are converted into active forms. Vitamin D2 level corresponds with the exogenous dietary intake of Vitamin D rich foods as well as supplements. Vitamin D3 level corresponds with endogenous production as well as exogenous diet and supplements.

Vitamin D from sunshine on the skin or from dietary intake is converted predominantly by the liver into 25-hydroxy vitamin D, which has a long half-life and is stored in the adipose tissue. The metabolically active form of vitamin D, 1,25-di-hydroxy vitamin D, which has a short life, is then synthesized in the kidney as needed from circulating 25-hydroxy vitamin D. The reference interval of greater than 30 ng/mL is a target value established by the Endocrine Society.

**Decreased Levels:**

- Inadequate exposure to sunlight.
- Dietary deficiency.
- Vitamin D malabsorption.
- Severe Hepatocellular disease.
- Drugs like Anticonvulsants.
- Nephrotic syndrome.



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218





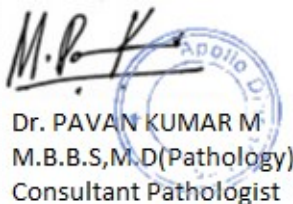
Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 10:09AM
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Emp/Auth/TPA ID : 35E7497	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324

Increased levels:

Vitamin D intoxication.



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218



Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 10:09AM
UHID/MR No : CMYS.0000061766	Reported : 10/Aug/2024 12:12PM
Visit ID : CMYSOPV128209	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7497	

**DEPARTMENT OF IMMUNOLOGY**

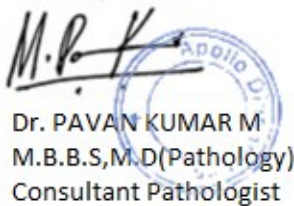
**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN B12 , SERUM	88	pg/mL	120-914	CLIA

**Comment:**

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency.

Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12 . The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.



**Dr. PAVAN KUMAR M**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218

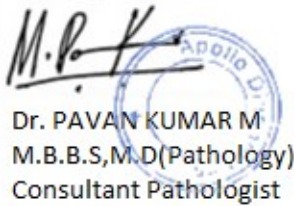


Patient Name	: Mr.PUNEET TRIVEDI	Collected	: 10/Aug/2024 08:22AM
Age/Gender	: 36 Y 0 M 4 D/M	Received	: 10/Aug/2024 10:09AM
UHID/MR No	: CMYS.0000061766	Reported	: 10/Aug/2024 12:08PM
Visit ID	: CMYSOPV128209	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7497		

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b>	0.330	ng/mL	0-4	CLIA



**Dr. PAVAN KUMAR M**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:SPL24130218



Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 11:12AM
UHID/MR No : CMYS.0000061766	Reported : 10/Aug/2024 12:36PM
Visit ID : CMYSOPV128209	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7497	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical measurement
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	POSITIVE ++		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	TRACE		NEGATIVE	LEUCOCYTE ESTERASE
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	3 - 5	/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

**Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods.

Page 20 of 22



**Dr. PAVAN KUMAR M**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UR2401804



Patient Name	: Mr.PUNEET TRIVEDI	Collected	: 10/Aug/2024 08:22AM
Age/Gender	: 36 Y 0 M 4 D/M	Received	: 10/Aug/2024 11:12AM
UHID/MR No	: CMYS.0000061766	Reported	: 10/Aug/2024 12:36PM
Visit ID	: CMYSOPV128209	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 35E7497		

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324**

Microscopy findings are reported as an average of 10 high power fields.



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UR2401804



Patient Name : Mr.PUNEET TRIVEDI	Collected : 10/Aug/2024 08:22AM
Age/Gender : 36 Y 0 M 4 D/M	Received : 10/Aug/2024 11:12AM
UHID/MR No : CMYS.0000061766	Reported : 10/Aug/2024 12:12PM
Visit ID : CMYSOPV128209	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 35E7497	

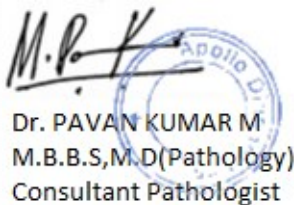
**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN 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 \*\*\*



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UF012019



**Patient Name** : Mr. PUNEET TRIVEDI

**Age/Gender** : 36 Y/M

**UHID/MR No.** : CMYS.0000061766

**OP Visit No** : CMYSOPV128209

**Sample Collected on** :

**Reported on** : 12-08-2024 12:31

**LRN#** : RAD2399753

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 35E7497

---

**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.

**IMPRESSION :NORMAL STUDY .**

**Dr. CHETAN HOLEPPAGOL**  
**MBBS, DNB(RADIO DIAGNOSIS)**  
Radiology

<b>Patient Name</b>	: Mr. PUNEET TRIVEDI	<b>Age/Gender</b>	: 36 Y/M
<b>UHID/MR No.</b>	: CMYS.0000061766	<b>OP Visit No</b>	: CMYSOPV128209
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 12-08-2024 11:53
<b>LRN#</b>	: RAD2399753	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 35E7497		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**LIVER:** It is normal in size, outline and echotexture **shows grade 1 fatty changes** . IHBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is partially distended and normal. No evidence of calculi. .

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** Head and proximal body are normal. Rest of the pancreas is obscured by bowel gases.

**RIGHT KIDNEY:** It measures 11 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 11.5 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is partially distended. The UB wall is normal. No e/o calculi.

**FOOTSTATE:** It is normal in size(15cc), outline and echotexture.

No e/o free fluid in the abdomen.

**IMPRESSION: GRADE I FATTY LIVER .**

Manohar Kumar KR, DNB  
Consultant Radiologist.

**Dr. CHETAN HOLEPPAGOL**  
**MBBS, DNB(RADIO DIAGNOSIS)**  
Radiology



8, 9, eye

Name : Mr. PUNEET TRIVEDI

Age: 36 Y

Sex: M

UHID:CMYS 0000061766



OP Number:CMYSOPV128209

Bill No :CMYS-OCR-23844

Date : 10.08.2024 08:20

Address : MYSORE

Plan : ARCOFEMI MEDIWHEEL AHC CREDIT PAN INDIA OP AGREEMENT

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL FULL BODY ADVANCED AHC AND VITAMIN MALE - 2D ECHO - PAN INDIA - FY2324	
1	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
2	LIVER FUNCTION TEST (LFT) WITH GGT	
3	2 D ECHO → P	
4	LIVER FUNCTION TEST (LFT)	
5	GLUCOSE, FASTING	
6	HEMOGRAM + PERIPHERAL SMEAR	
7	DIET CONSULTATION → P	
8	COMPLETE URINE EXAMINATION	86.2
9	URINE GLUCOSE (POST PRANDIAL)	165
10	BP MEASUREMENT	120/80
11	PERIPHERAL SMEAR	
12	EKG	
13	RENAL PROFILE RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	VITAMIN D - 25 HYDROXY (D2+D3)	
17	URINE GLUCOSE (FASTING)	
18	HbA1c, GLYCATED HEMOGLOBIN	
19	ALKALINE PHOSPHATASE - SERUM/PLASMA	
20	X-RAY CHEST PA	
21	HEIGHT	
22	ENT CONSULTATION → P	
23	FITNESS BY GENERAL PHYSICIAN → P	
24	BLOOD GROUP ABO AND RH FACTOR	
25	VITAMIN B12	
26	LIPID PROFILE	
27	BODY MASS INDEX (BMI)	
28	WEIGHT	
29	OPHTHAL BY GENERAL PHYSICIAN	
30	ULTRASOUND - WHOLE ABDOMEN	
31	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination

of Mr. Jeevan Reddy on 18/08/24

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

	Tick
<ul style="list-style-type: none"> <li>Medically Fit</li> </ul>	✓
<ul style="list-style-type: none"> <li>Fit with restrictions/recommendations</li> </ul> <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"> <li>Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> <li>Unfit</li> </ul>	

*[Handwritten Signature]*

Dr. \_\_\_\_\_  
Medical Officer  
The Apollo Clinic, Mysore.

**Apollo Clinic**  
# 23, 1st Floor,  
Kandasa Road, Mysore - 02  
Ph : 0821-4006040/41

*This certificate is not meant for medico-legal purposes.*

**Apollo Health and Lifestyle Limited**  
 (A) Apollo Hospitals, 225/226/227, 11th Cross,  
 Ring Road, 1st Floor, 2nd A Cross, High Road, Chaitanyam, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
 (B) Apollo Hospitals, 11th Cross, 225/226/227, 11th Cross, High Road, Chaitanyam, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
**APOLLO CLINICS NETWORK KARNATAKA**  
 Bangalore | Davanagere | Bellary | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli |  
 Kuvempur | Mysore | Mysore - VV Mohalla |  
 Online appointments: [www.apollohospitals.com](http://www.apollohospitals.com)

TO BOOK AN APPOINTMENT  
 **1860 500 7788**

Date : 10-08-2024  
MR NO : CMYS.0000061766

Department : GENERAL  
Doctor :

Name : Mr. PUNEET TRIVEDI

Registration No :

Age/ Gender : 36 Y / Male

Qualification :

Consultation Timing: 08:19

Height : 165	Weight : 86.2	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Report  
noted

- ① vit B12 deficiency
- ② vit D deficiency

To  
review  
after  
3 months

Clinical Diagnosis & Management Plan

for routine check-up  
No complaints  
on exam  $120/80$  (NT)  
BP 120/80 mmHg  
wt 86.2 kg  
Ht 165 cm  
P.R. clear  
P.A. SFCRTG  
No organomegaly  
Ash  
① L4 brachial plexus  
② External B2  
① any x ② any

Follow up date :

  
Apollo Clinic  
# 23, 1st Floor,  
Kalidasa Rd, Mysore - 02  
Ph : 0821-4006040/41

Date : 10-08-2024  
MR NO : CMYS.0000061766

Department : GENERAL  
Doctor :

Name : Mr. PUNEET TRIVEDI

Registration No : H Praveen Kumar R  
Qualification : MS (ENT)

Age/ Gender : 36 Y / Male

Consultation Timing: 08:19

Height : 165	Weight : 86.2	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

came for regular health check

EAR Bilateral PM - normal

Nose - normal mucosa normal

oral cavity L. oropharynx - (2)

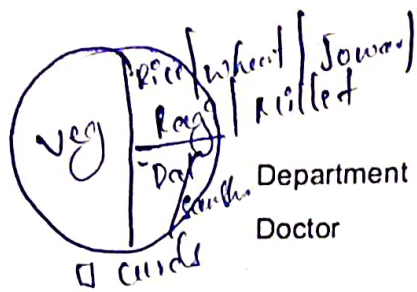
neck (2)

As

Causes none up

Follow up date :

pl  
Apollo Clinic  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41



Date : 10-08-2024  
MR NO : CMYS.0000061766

Department : GENERAL Dietetics  
Doctor : Madhura. B.P

Name : Mr. PUNEET TRIVEDI

Registration No :

Age/ Gender : 36 Y / Male

Qualification : M.Sc Nutrition & Dietetics  
PHD\*

Consultation Timing: 08:19

Height : 165	Weight : 86.2	BMI : 31.6 kg/m <sup>2</sup>	Waist Circum : 120/80
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies History

Clinical Diagnosis & Management Plan

FBS - 117  
HBA1C - 6.1%  
Non HDL - 151  
LDL - 123.27  
Vitamin D - 12.58  
Vitamin B<sub>12</sub> - 88

Δ<sup>sis</sup> - Grade 1 Fatty Liver.  
→ Advised low fat, diabetic diet with fiber rich foods.  
→ Avoid fruits like Mango, Sapota, Jackfruits, custard apple & big banana.  
→ Avoid root vegetables like potato, sweet potato, Yam & Arbi.  
→ Dietary guidelines chart is given.

Follow up date :

Doctor Signature  
**Apollo Clinic**  
# 23, 1st Floor  
Kalidasa Road, Mysore-02  
Ph : 0821-4006040/41

Date : 10-08-2024  
MR NO : CMYS.0000061766

Department : GENERAL (Ophthalmology)  
Doctor :

Name : Mr. PUNEET TRIVEDI

Registration No :

Age/ Gender : 36 Y / Male

Qualification :

Consultation Timing: 08:19

Height : 165	Weight : 86.2	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Distance  
with glasses

OD

OS

6/6

6/6

Next

N6

N6

Colour vision

Normal

Normal

Follow up date :

Doctor Signature:  
Apollo Clinic  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 07  
Ph : 0821-4000040/41

Date : 10-08-2024  
 MR NO : CMYS.0000061766  
 Name : Mr. PUNEET TRIVEDI  
 Age/ Gender : 36 Y / Male

Department : GENERAL (dental)  
 Doctor : Dr. S. S. Bishara  
 Registration No :  
 Qualification :

Consultation Timing: 08:19

Height : 165	Weight : 86.2	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 120/80

General Examination /  
 Allergies History

Clinical Diagnosis & Management Plan

O/E

CA++ ST+

Adv. Oral Prophylaxis

Gen. Teeth attention noted

Follow up date :

*S. S. Bishara*  
**Apollo Clinic**  
 # 23, 1st Floor,  
 Doctor Signature  
 Kambasa Road, Mysore - 02  
 Ph : 0821-4006040/41

10-08-2024 12:01:21 PM

ID: 61766

MR PUNEET TRIVEDI

Male 36Years

165cm 86kg 120/80 mmHg

**Apollo Clinic**

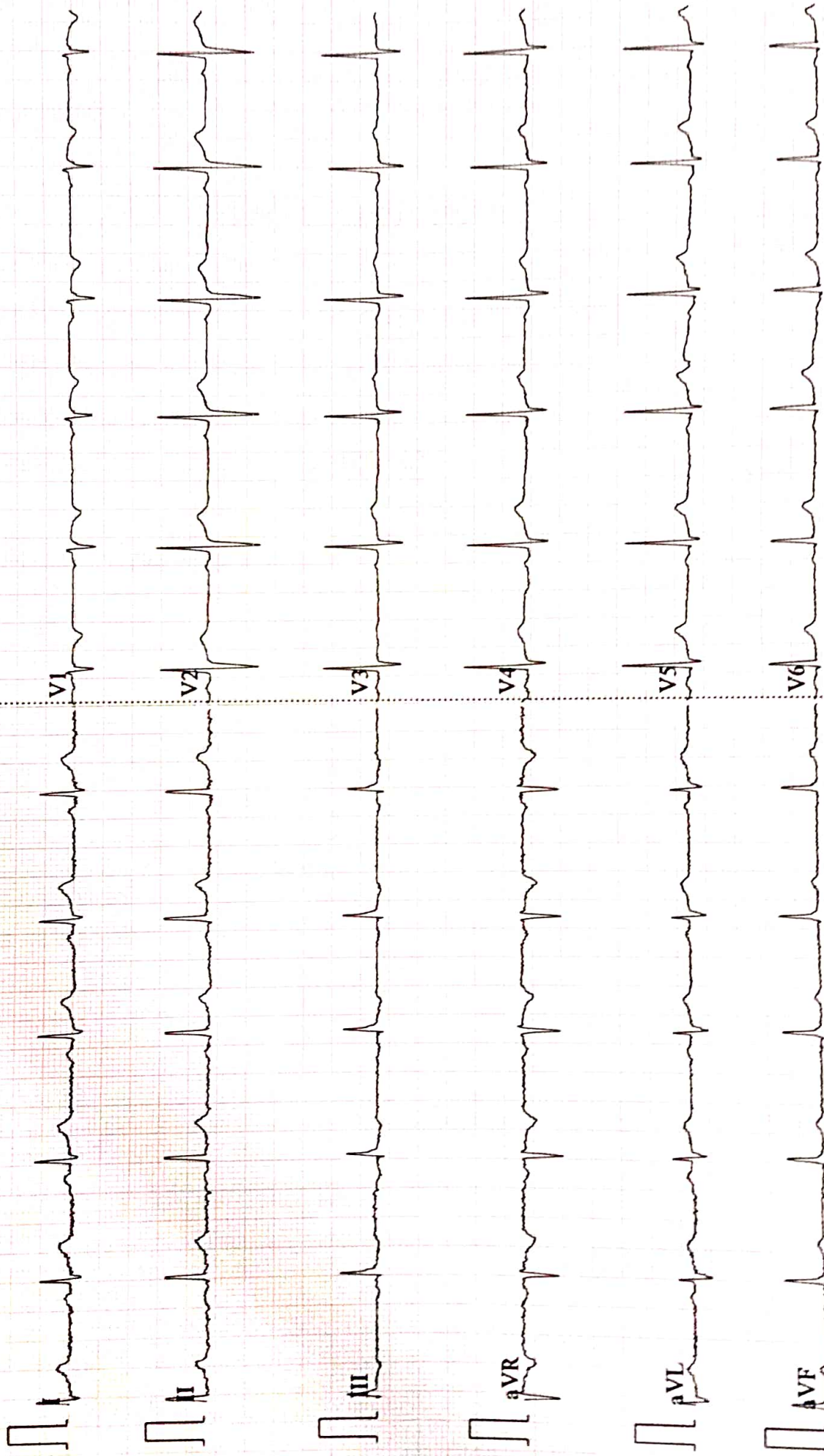
# 23, 1st Floor,

Kalidasa Road, Mysore - 02

Ph : 0821-4006040/41

Diagnosis Information:

Unconfirmed Report.



Apollo Clinic

D VI.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU

CARDIART

♥68

2\*5.0s

10mm/mV

25mm/s

0.5-45Hz AC50



Patient ID:	61766	Patient Name:	MR PUNEET TRIVEDI 36Y
Age:		Sex:	M
Accession Number:		Modality:	CR
Referring Physician:		Study:	CHEST
Study Date:	10-Aug-2024		

**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.

**IMPRESSION :NORMAL STUDY.**

Dr. CHETAN HOLEPPAGOL  
 MBBS, DNB(RADIO DIAGNOSIS)



Date: 10-Aug-2024 16:50:49

**Apollo Health and Lifestyle Limited**

REGD. OFFICE: 110-60-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
 Ph. No: 040 4944 7777 Fax No: 4904 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

**APOLLO CLINICS NETWORK KARNATAKA**  
 Bangalore | Suravahalli | Bellandur | Electronic City | Fraser Town | MSR Layout | Indira Nagar | JP Nagar | Kundalahalli |  
 Karamanagara | Sarjapur Road | Mysore | VV Mohalla

Online appointment: www.apolloclinics.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient Name: Mr. PUNEET TRIVEDI	Date: 10.08.2024	Referring Doctor: Self
Age / Sex : 36 yrs / Male	UHID NO : 61766	
<b>ULTRASONOGRAPHY – ABDOMEN &amp; PELVIS</b>		

**LIVER:** It is normal in size, outline and echotexture shows grade I fatty changes. HBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is partially distended and normal. No evidence of calculi.

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** Head and proximal body are normal. Rest of the pancreas is obscured by bowel gases.

**RIGHT KIDNEY:** It measures 11 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

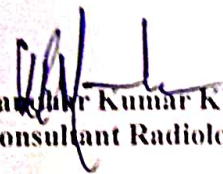
**LEFT KIDNEY:** It measures 11.5 cm with parenchymal thickness of 1.5 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is partially distended. The UB wall is normal. No e/o calculi.

**PROSTATE:** It is normal in size (15cc), outline and echotexture.

No e/o free fluid in the abdomen.

**IMPRESSION:** GRADE I FATTY LIVER.

  
Dr. Manoj Kumar KR, DNB  
Consultant Radiologist.

**Apollo Health and Lifestyle Limited**

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Kumarangala | Lalbagh Road | Mysore: AV Mahalle

Online appointments: www.apolloh.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient's Name : Mr. PUNEET TRIVEDI	Age & Sex; 36Yrs /male
Date : 10.08.2024	UHID No: 61766

## 2D ECHOCARDIOGRAPHY STUDY

### Impression:

- Normal valves and chamber volumes
- No regional wall motion abnormality seen
- Normal left ventricular systolic function. EF 61 %
- No clots. No pericardial effusion

### Findings

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

### **Apollo Health and Lifestyle Limited**

(CIN: U55110TG2000PLC115R19)  
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Koramangala | Sarjapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mr. PUNEET TRIVEDI	Age & Sex; 36Yrs /male
Date : 10.08.2024	UHID No: 61766

Measurements

AO : 2.4 cm  
LA : 2.2 cm

RV : 2.5 cm  
LVIDd : 4.73 cm  
LVIDs : 3.17 cm  
IVSd : 0.98 cm  
IVSs : 1.27 cm  
PWd : 1.05 cm  
PWs : 1.24 cm  
EF : 61.0 %  
FS : 32.0 %

Doppler

MV TV AV PV  
E 0.55 m/s E --- m/s V max 1.30 m/s V max 1.14 m/s  
:

A: 0.63 m/s A --- m/s

**Dr. GURU PRASAD. B. V, MBBS, PGDCC**  
**CONSULTANT – NON-INVASIVE CARDIOLOGY**

Dr. GURU PRASAD. B. V  
MBBS, PGDCC (CARDIO)

Consultant, Non-Invasive Cardiology

**Apollo Health and Lifestyle Limited**

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Koramangala | Sarajalur Road | Mysore (VV Mahalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

**1860 500 7788**

Name: Mr. PUNEET TRIVEDI  
Age/Gender: 36 Y/M  
Address: MYSORE  
Location: MYSORE, KARNATAKA  
Doctor:  
Department: GENERAL  
Rate Plan: MYSORE\_16052024  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. SUJATHA T R

MR No: CMYS.0000061766  
Visit ID: CMYSOPV128209  
Visit Date: 10-08-2024 08:19  
Discharge Date:  
Referred By: SELF

## HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

### Chief Complaints

COMPLAINTS:::: For Corporate Health Checkup,

## SYSTEMIC REVIEW

### \*\*Weight

--->: Stable,

Number of kgs: 86.2,

## HT-HISTORY

### Past Medical History

PAST MEDICAL HISTORY: Nil Significant,

\*\*Cancer: NIL,;

## PHYSICAL EXAMINATION

### PHYSICAL EXAMINATION

Constitutional: Normal ,

Eyes: Normal ,

ENT: Normal ,

Cardiovascular: Normal ,

Respiratory: Normal ,

Gastrointestinal: Normal ,

Genitourinary: Normal ,

Musculoskeletal: Normal ,

Integumentary: Normal ,

Neurological: Normal ,

Psychiatric: Normal ,

Endocrine: Normal ,

Hematologic/Lymphatic/Immuno: Normal ,

Allergic/Immunologic: **Normal** ,

**SYSTEMIC EXAMINATION**

**IMPRESSION**

**IMPRESSION**

Finding Category : **within normal limits**,

**ECG**

: **NORMAL**,

**X-Ray**

: **NORMAL**,

**RECOMMENDATION**

**Fitness Report**

Fitness.: **YES**,

**DISCLAIMER**

Disclaimer: **The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,**

**Doctor's Signature**



भारत सरकार  
Government of India



पुनीत त्रिवेदी  
Puneet Trivedi  
जन्म तिथि / DOB : 06/08/1988  
पुरुष / Male



4504 9167 3472

आधार - आम आदमी का अधिकार

**Fwd: Health Check up Booking Confirmed Request(35E7497),Package Code-PKG10000440, Beneficiary Code-315223**

Puneet Trivedi <bravopuneet730@gmail.com>

Sat 10-08-2024 08:14

To:Mysore Apolloclinic <mysore@apolloclinic.com>

----- Forwarded message -----

From: **Mediwheel** <[wellness@mediwheel.in](mailto:wellness@mediwheel.in)>

Date: Fri, Aug 9, 2024, 11:55

Subject: Health Check up Booking Confirmed Request(35E7497),Package Code-PKG10000440, Beneficiary Code-315223

To: <[bravopuneet730@gmail.com](mailto:bravopuneet730@gmail.com)>

Cc: <[customercare@mediwheel.in](mailto:customercare@mediwheel.in)>

**011-41195959**

Dear **PUNEET . TRIVEDI**,

We are pleased to confirm your health checkup booking request with the following details.

**Hospital Package Name** : Mediwheel Full Body Plus Annual Check Advanced With Vitamin  
: Male

**Patient Package Name** : Executive Health Checkup Male

**Name of Diagnostic/Hospital** : Apollo clinic - VV Mohalla

**Address of Diagnostic/Hospital-** : Apollo Clinic, [23, Kalidasa Road, VV Mohalla, Mysore - 570002](#)

**City** : Mysore

**State** : Karnataka

**Pincode** : 570002

**Appointment Date** : 10-08-2024

**Confirmation Status** : Booking Confirmed

**Preferred Time** : 8:30am

**Booking Status** : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
PUNEET . TRIVEDI	36 year	Male

**Note - Please note to not pay any amount at the center.**

**Instructions to undergo Health Check:**

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).



- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

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Thanks,  
Mediwheel Team  
Please Download Mediwheel App

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