

Patient Name : Mr.SWAPNIL S BENGALI
Age/Gender : 39 Y 3 M 16 D/M
UHID/MR No : STAR.0000055954
Visit ID : STAROPV58995
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : GJ01 20000115279

Collected : 06/May/2023 08:51AM
Received : 06/May/2023 10:44AM
Reported : 06/May/2023 12:34PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

Methodology : Microscopic
RBC : Normocytic normochromic
WBC : Normal in number, morphology and distribution. No abnormal cells seen
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Normocytic normochromic blood picture
Note/Comment : Please Correlate clinically



SIN No:BED230108576

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers,
Begumpet, Hyderabad, Telangana - 500016

Address:

156, Famous Cine Labs, Behind Everest Building,
Tardeo (Mumbai Central), Mumbai, Maharashtra
Ph: 022 4332 4500

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|-----------|--------|------|-----------------|--------|

HEMOGRAM , WHOLE BLOOD-EDTA

| | | | | |
|-----------------------------|--------------|---------------|------------|--------------------------------|
| HAEMOGLOBIN | 13.6 | g/dL | 13-17 | Spectrophotometer |
| PCV | 42.20 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 4.78 | Million/cu.mm | 4.5-5.5 | Electrical Impedence |
| MCV | 88 | fL | 83-101 | Calculated |
| MCH | 28.4 | pg | 27-32 | Calculated |
| MCHC | 32.2 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 15.3 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 3,900 | cells/cu.mm | 4000-10000 | Electrical Impedence |

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

| | | | | |
|-------------|----|---|-------|----------------------|
| NEUTROPHILS | 55 | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 37 | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 03 | % | 1-6 | Electrical Impedence |
| MONOCYTES | 05 | % | 2-10 | Electrical Impedence |
| BASOPHILS | 00 | % | <1-2 | Electrical Impedence |

ABSOLUTE LEUCOCYTE COUNT

| | | | | |
|---|------------|-------------------------|---------------|----------------------|
| NEUTROPHILS | 2145 | Cells/cu.mm | 2000-7000 | Electrical Impedence |
| LYMPHOCYTES | 1443 | Cells/cu.mm | 1000-3000 | Electrical Impedence |
| EOSINOPHILS | 117 | Cells/cu.mm | 20-500 | Electrical Impedence |
| MONOCYTES | 195 | Cells/cu.mm | 200-1000 | Electrical Impedence |
| PLATELET COUNT | 153000 | cells/cu.mm | 150000-410000 | Electrical impedence |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 10 | mm at the end of 1 hour | 0-15 | Modified Westergren |

PERIPHERAL SMEAR

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DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA | | | | |
|---|----------|--|--|--|
| 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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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

| | | | | |
|-------------------------------|----|-------|--------|-----------|
| GLUCOSE, FASTING , NAF PLASMA | 90 | mg/dL | 70-100 | GOD - POD |
|-------------------------------|----|-------|--------|-----------|

Comment:

As per American Diabetes Guidelines

| Fasting Glucose Values in mg/d L | Interpretation |
|----------------------------------|----------------|
| <100 mg/dL | Normal |
| 100-125 mg/dL | Prediabetes |
| ≥126 mg/dL | Diabetes |



| | |
|-------------------------------------|--|
| Patient Name : Mr.SWAPNIL S BENGALI | Collected : 06/May/2023 11:36AM |
| Age/Gender : 39 Y 3 M 16 D/M | Received : 06/May/2023 12:26PM |
| UHID/MR No : STAR.0000055954 | Reported : 06/May/2023 01:33PM |
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DEPARTMENT OF BIOCHEMISTRY

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|-----------|--------|------|-----------------|--------|

| | | | | |
|--|----|-------|--------|-----------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA | 89 | 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.

Ref: Marks medical biochemistry and clinical approach



| | |
|-------------------------------------|--|
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| Age/Gender : 39 Y 3 M 16 D/M | Received : 06/May/2023 03:32PM |
| UHID/MR No : STAR.0000055954 | Reported : 07/May/2023 12:43PM |
| Visit ID : STAROPV58995 | Status : Final Report |
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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

| | | | | |
|---|------------|-------|--|------------|
| HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA | 6.1 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA | 128 | mg/dL | | Calculated |

Comment:

Reference Range as per American Diabetes Association (ADA):

| REFERENCE GROUP | HBA1C IN % |
|-------------------------------|------------|
| NON DIABETIC ADULTS >18 YEARS | <5.7 |
| AT RISK (PREDIABETES) | 5.7 – 6.4 |
| DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

LIPID PROFILE , SERUM

| | | | | |
|---------------------|------------|-------|--------|-------------|
| TOTAL CHOLESTEROL | 203 | mg/dL | <200 | CHE/CHO/POD |
| TRIGLYCERIDES | 60 | mg/dL | <150 | |
| HDL CHOLESTEROL | 61 | mg/dL | >40 | CHE/CHO/POD |
| NON-HDL CHOLESTEROL | 142 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 130 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 12 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 3.33 | | 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 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 ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
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|-----------|--------|------|-----------------|--------|

| LIVER FUNCTION TEST (LFT) , SERUM | | | | |
|--|-------------|-------|---------|-------------------|
| BILIRUBIN, TOTAL | 0.60 | mg/dL | 0.1-1.2 | Azobilirubin |
| BILIRUBIN CONJUGATED (DIRECT) | 0.10 | mg/dL | 0.1-0.4 | DIAZO DYE |
| BILIRUBIN (INDIRECT) | 0.50 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 26 | U/L | 4-44 | JSCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 21.0 | U/L | 8-38 | JSCC |
| ALKALINE PHOSPHATASE | 75.00 | U/L | 32-111 | IFCC |
| PROTEIN, TOTAL | 7.00 | g/dL | 6.7-8.3 | BIURET |
| ALBUMIN | 4.70 | g/dL | 3.8-5.0 | BROMOCRESOL GREEN |
| GLOBULIN | 2.30 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 2.04 | | 0.9-2.0 | Calculated |



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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
|---|--------------|--------|------------|------------------|
| CREATININE | 0.70 | mg/dL | 0.6-1.1 | ENZYMATIC METHOD |
| UREA | 12.00 | mg/dL | 17-48 | Urease |
| BLOOD UREA NITROGEN | 5.6 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 6.30 | mg/dL | 4.0-7.0 | URICASE |
| CALCIUM | 9.70 | mg/dL | 8.4-10.2 | CPC |
| PHOSPHORUS, INORGANIC | 3.60 | mg/dL | 2.6-4.4 | PNP-XOD |
| SODIUM | 142 | mmol/L | 135-145 | Direct ISE |
| POTASSIUM | 4.3 | mmol/L | 3.5-5.1 | Direct ISE |
| CHLORIDE | 101 | mmol/L | 98-107 | Direct ISE |



SIN No:SE04365496

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DEPARTMENT OF BIOCHEMISTRY

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| Test Name | Result | Unit | Bio. Ref. Range | Method |
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| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM | 20.00 | U/L | 16-73 | Glycylglycine Kinetic method |



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DEPARTMENT OF IMMUNOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

| | | | | |
|-----------------------------------|-------------|--------|-----------|------|
| TRI-IODOTHYRONINE (T3, TOTAL) | 1.15 | ng/mL | 0.67-1.81 | ELFA |
| THYROXINE (T4, TOTAL) | 9.70 | µg/dL | 4.66-9.32 | ELFA |
| THYROID STIMULATING HORMONE (TSH) | 3.530 | µIU/mL | 0.25-5.0 | ELFA |

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

| 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 |



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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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 | 6.0 | | 5-7.5 | Bromothymol Blue |
| SP. GRAVITY | 1.010 | | 1.002-1.030 | Dipstick |


BIOCHEMICAL EXAMINATION

| | | | | |
|------------------------|----------|--|----------|----------------------------|
| URINE PROTEIN | NEGATIVE | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NEGATIVE | | NEGATIVE | GOD-POD |
| URINE BILIRUBIN | NEGATIVE | | NEGATIVE | AZO COUPLING |
| URINE KETONES (RANDOM) | NEGATIVE | | NEGATIVE | NITROPRUSSIDE |
| UROBILINOGEN | NEGATIVE | | NORMAL | EHRlich |
| BLOOD | NEGATIVE | | NEGATIVE | Dipstick |
| NITRITE | NEGATIVE | | NEGATIVE | Dipstick |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | PYRROLE HYDROLYSIS |

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

| | | | | |
|------------------|--------|------|------------------|------------|
| PUS CELLS | 1-2 | /hpf | 0-5 | Microscopy |
| EPITHELIAL CELLS | 0-1 | /hpf | <10 | MICROSCOPY |
| RBC | ABSENT | /hpf | 0-2 | MICROSCOPY |
| CASTS | NIL | | 0-2 Hyaline Cast | MICROSCOPY |
| CRYSTALS | ABSENT | | ABSENT | MICROSCOPY |

*** End Of Report ***



DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



Dr.Sandip Kumar Banerjee
M.B.B.S.,M.D(PATHOLOGY),D.P.B
Consultant Pathologist



SIN No:UR2108567

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OP Visit No : STAROPV58995

Sample Collected on :

Reported on : 06-05-2023 16:09

LRN# : RAD1992642

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : GJ01 20000115279

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. VINOD SHETTY
Radiology

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DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is well distended and reveals normal wall thickness. There is no evidence of calculus seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.43 x 3.96 cms and the **LEFT KIDNEY** measures 10.59 x 4.97 cms in size. Both kidneys are normal in size, shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appears normal. There is no free fluid or any lymphadenopathy seen in the abdomen.

PROSTATE : The prostate measures 4.1 x 3.3 x 3.2 cms and weighs 23.81 gms. It is normal in size, shape and echotexture. No prostatic calcification is seen.

URINARY BLADDER : The urinary bladder is well distended and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.

IMPRESSION : No significant abnormality noted on this examination.



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