

Patient Name : Mr.SAGAR POTE	Collected : 26/Oct/2024 09:06AM
Age/Gender : 37 Y 6 M 0 D/M	Received : 26/Oct/2024 11:04AM
UHID/MR No : SPUN.0000050110	Reported : 26/Oct/2024 12:06PM
Visit ID : SPUNOPV68243	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9865323	

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	14.3	g/dL	13-17	Spectrophotometer
PCV	42.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.69	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	90.4	fL	83-101	Calculated
MCH	30.5	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,530	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	39.4	%	40-80	Electrical Impedance
LYMPHOCYTES	49	%	20-40	Electrical Impedance
EOSINOPHILS	4.3	%	1-6	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2966.82	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3689.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	323.79	Cells/cu.mm	20-500	Calculated
MONOCYTES	512.04	Cells/cu.mm	200-1000	Calculated
BASOPHILS	37.65	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	0.8		0.78- 3.53	Calculated
PLATELET COUNT	221000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC's are Normocytic Normochromic
WBC's Lymphocytosis
Platelets are Adequate
No hemoparasite seen.



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



SIN No:BED240241809

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

Apollo Speciality Hospitals Private Limited
(Formerly known as Apollo Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414
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DEPARTMENT OF HAEMATOLOGY

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



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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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Patient Name : Mr.SAGAR POTE	Collected : 26/Oct/2024 11:42AM
Age/Gender : 37 Y 6 M 0 D/M	Received : 26/Oct/2024 12:21PM
UHID/MR No : SPUN.0000050110	Reported : 26/Oct/2024 12:50PM
Visit ID : SPUNOPV68243	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. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	105	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.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	95	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.



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



SIN No:PLP1487523

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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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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)



Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:EDT240093455

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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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	163	mg/dL	<200	CHO-POD
TRIGLYCERIDES	106	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	124	mg/dL	<130	Calculated
LDL CHOLESTEROL	103.21	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.14	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.18		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.07		<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



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M.B.B.S,M.D(Pathology)
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SIN No:SE04839278

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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.34	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.26	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27.09	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.6	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.9		<1.15	Calculated
ALKALINE PHOSPHATASE	59.71	U/L	30-120	IFCC
PROTEIN, TOTAL	6.70	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		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, 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.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.93	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	21.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.49	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.54	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.81	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136.08	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	98.65	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	6.70	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	18.29	U/L	<55	IFCC



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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. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.37	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.31	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.116	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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DEPARTMENT OF IMMUNOLOGY

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High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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Emp/Auth/TPA ID : 9865323	

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
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.009		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 MOUNT AND MICROSCOPY				
PUS CELLS	1 - 2	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0 - 1	/hpf	< 10	Automated Image based microscopy
RBC	0	/hpf	0-2	Automated Image based microscopy
CASTS	NEGATIVE	/lpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	NEGATIVE	/hpf	Occasional-Few	Automated Image based 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.

Page 12 of 14



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



SIN No:UR2417894

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

Apollo Spectra Hospitals Private Limited
(Formerly known as Apollo Specialty Hospitals Private Limited)
CIN- U85100TG2009PTC099414
Regd Off:1-10-52/62, 5th Floor, Ashoka Taghupalli Chambers,
Begumpet, Hyderabad, Telangana - 500016

P. No. 8 & 10, 8th & 9th Floor, Renata Chambers, 8th & 9th Road,
Vijaynagar Colony, Opp. Sansa Play Ground, Sadashiv Peth,
Pune, Maharashtra

Patient Name : Mr.SAGAR POTE
Age/Gender : 37 Y 6 M 0 D/M
UHID/MR No : SPUN.0000050110
Visit ID : SPUNOPV68243
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9865323

Collected : 26/Oct/2024 09:06AM
Received : 26/Oct/2024 12:09PM
Reported : 26/Oct/2024 12:43PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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



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



SIN No:UR2417894

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

Apollo Speciality Hospitals Private Limited
(Formerly known as Apollo Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414
Regd Off:1-10-52/62, 5th Floor, Ashoka Taghutsalli Chambers,
Begumpet, Hyderabad, Telangana - 500016

P. No. 8 & 10a, 8th & 9th, Renata Chambers, 82nd Bang Road,
Vijaynagar Colony, Opp. Sansa Play Ground, Sadashiv Peth,
Pune, Maharashtra

Patient Name : Mr.SAGAR POTE	Collected : 26/Oct/2024 09:06AM
Age/Gender : 37 Y 6 M 0 D/M	Received : 26/Oct/2024 12:09PM
UHID/MR No : SPUN.0000050110	Reported : 26/Oct/2024 12:46PM
Visit ID : SPUNOPV68243	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9865323	

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	GOD-POD

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*** End Of Report ***



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



SIN No:UF012138

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

Apollo Speciality Hospitals Private Limited
(Formerly known as Apollo Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414
Regd Off:1-10-52/62, 5th Floor, Ashoka Taghupalli Chambers,
Begumpet, Hyderabad, Telangana - 500016

P. No. 8 & 10a, 8th & 9th Floor, Renata Chambers, Saris Baug Road,
Vijaynagar Colony, Opp. Saris Baug Ground, Sadashiv Peth,
Pune, Maharashtra

Patient Name : Mr.SAGAR POTE
Age/Gender : 37 Y 6 M 0 D/M
UHID/MR No : SPUN.0000050110
Visit ID : SPUNOPV68243
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9865323

Collected : 26/Oct/2024 09:06AM
Received : 26/Oct/2024 12:09PM
Reported : 26/Oct/2024 12:46PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. 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 (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



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



SIN No: UF012138

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

Apollo Speciality Hospitals Private Limited
(Formerly known as Apollo Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414
Regd Off: 1-10-62/52, 5th Floor, Ashoka Baghupathi Chambers,
Begumpet, Hyderabad, Telangana - 500016

P.No.9 & 10a, S.H.O.204, Hanza Chambers, Sree Sree Road,
Miyapur Colony, Opp. Sree Play Ground, Sadashiv Peth,
Pune, Maharashtra

Customer Pending Tests
DENTAL & ENT WILL BE DONE 02-11-2024

Name : Mr. Sagar Pore

Age: 37 Y

UHID:SPUN.0000050110

Sex: M



OP Number:SPUNOPV68243

Address : Sadashivepath, Pune

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Bill No :SPUN-OCR-11778

Date : 26.10.2024 08:43

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2D ECHO (A)	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM - PERIPHERAL SMEAR	
6	DIET CONSULTATION	
7	COMPLETE URINE EXAMINATION	
8	URINE GLUCOSE(POST PRANDIAL) 11:20AM	
9	PERIPHERAL SMEAR	
10	ECG	
11	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
12	DENTAL CONSULTATION	
13	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 11:20AM	
14	URINE GLUCOSE(FASTING)	
15	HbA1c - GLYCATED HEMOGLOBIN	
16	X-RAY CHEST PA	
17	ENT CONSULTATION	
18	FITNESS BY GENERAL PHYSICIAN	
19	BLOOD GROUP AB0 AND RH FACTOR	
20	LIPID PROFILE	
21	BODY MASS INDEX (BMI)	
22	OPHTHAL BY GENERAL PHYSICIAN	
23	ULTRASOUND - WHOLE ABDOMEN	
24	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

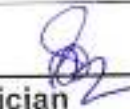
CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Sagar Pote on 26-10-2024

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 	✓
<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, Review after _____ recommended 	
<ul style="list-style-type: none"> • Unfit 	


Dr. Sagar Pote
 General Physician
 Apollo Spectra Hospital Pune

This certificate is not meant for medico-legal purposes

Dr. Sagar Pote
 MBBS MD
 Reg No. 2021097302
 Consultant Internal Medicine
 Apollo Speciality Hospital

Date : 26-10-2024
MRNO :
Name : Sagar Pote
Age/Gender :
Mobile No : 97 1m

Department : Internal Medicine
Consultant :
Reg. No : DR. SAMRAT SHAH
Qualification : MBBS, MD

Consultation Timing :

Pulse : 80b/m	B.P. : 140/90 mmHg	Resp : 20b/m	Temp : Afebrile
Weight : 53.5	Height : 164cm	BMI : 19.9	Waist Circum :

SpO2 - 98%

General Examination / Allergias
History

Clinical Diagnosis & Management Plan

found fit to join duty

Follow up date:

Dr. Samrat Shah
MBBS MD
Reg No. 2021097302
Consultant Internal Medicine
Apollo Speciality Hospital



Doctor Signature

Patient Name : Mr SAGAR POTE
 Age/Gender : 37 Y 6 M 0 D/M
 UHID/MR No : SPUN.0000050110
 Visit ID : SPUNOPV58243
 Ref Doctor : Dr SELF
 Emp/Auth/TPA ID : 9585323

Collected : 26/Oct/2024 09:06AM
 Received : 26/Oct/2024 11:04AM
 Reported : 26/Oct/2024 12:06PM
 Status : Final Report
 Sponsor Name : 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
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.3	g/dL	13-17	Spectrophotometer
PCV	42.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.59	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	90.4	fL	83-101	Calculated
MCH	30.5	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7.530	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	39.4	%	40-80	Electrical Impedance
LYMPHOCYTES	49	%	20-40	Electrical Impedance
EOSINOPHILS	4.3	%	1-5	Electrical Impedance
MONOCYTES	6.8	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2968.82	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3689.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	323.79	Cells/cu.mm	20-500	Calculated
MONOCYTES	512.04	Cells/cu.mm	200-1000	Calculated
BASOPHILS	37.65	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	0.8		0.78- 3.53	Calculated
PLATELET COUNT	221000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

RBC's are Normocytic Normochromic
 WBC's Lymphocytosis
 Platelets are Adequate
 No hemoparasite seen.

Page 1 of 14



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



SIN No: BDD240241809

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Posh Pure, Diagnostics Lab

Patient Name	: Mr.SAGAR POTE	Collected	: 26/Oct/2024 09:06AM
Age/Gender	: 37 Y 6 M 0 DM	Received	: 26/Oct/2024 11:04AM
UHID/MR No	: SPLN 0000350110	Reported	: 26/Oct/2024 12:06PM
Visit ID	: SPUNOPV69243	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9865323		

DEPARTMENT OF HAEMATOLOGY

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

Page 2 of 14



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

SN No:BED240241809

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Path, Durgam, Diagnostics Lab

Patient Name	Mr SAGAR POTE	Collected	25/Oct/2024 09:06AM
Age/Gender	37 Y 6 M O D/M	Received	25/Oct/2024 11:04AM
UHID/MR No	SPUN.0000050110	Reported	25/Oct/2024 12:10PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr. SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auto/TPA ID	:9865323		

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 FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



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

SIN No. BE10240241809

This test has been performed at Apollo Health and Lifestyle Ltd., Sreechitra Park, Pune, Diagnostics Lab



Patient Name	: Mr.SAGAR POTE	Collected	: 26/Oct/2024 11:42AM
Age/Gender	: 37 Y 6 M 0 D/M	Received	: 26/Oct/2024 12:21PM
UH/DMR No	: SPUN 0000050110	Reported	: 26/Oct/2024 12:50PM
Visit ID	: SPLN0PV68243	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9865323		

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	105	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
- Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	95	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, antylin analogues, or conditions such as overproduction of insulin.




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

SIN No:PLP1487523

This test has been performed at Apollo Health and Lifestyle Inc, Sadaabhi Park, Apollo Diagnostics Lab

Patient Name	Mr SAGAR POTE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y 6 M 0 DM	Received	26/Oct/2024 11:04AM
LHID/MR No	SPUN.000050110	Reported	26/Oct/2024 02:24PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Accn/TPA ID	9865323		

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) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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 (< 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 (<5.7%) 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 >2%

B. Hemoglobinemia/hemoglobinopathy

C. Clotrophoresis is recommended method for detection of Hemoglobinopathy



Sheha Shah
 Dr Sheha Shah
 MBBs, MD (Pathology)
 Consultant Pathologist

SIN No. EDT20095455

This test has been performed at Apollo Health and Lifestyle (6th-7th Floor), Sadashiv Peth Pune, Diagnostics Lab

Patient Name	Mr SAGAR POTE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y 6 M 0 D/M	Received	26/Oct/2024 11:15AM
UHID/MR No	SPUN.0000050110	Reported	26/Oct/2024 12:35PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	9865323		

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	163	mg/dL	<200	CHO-POD
TRIGLYCERIDES	106	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	124	mg/dL	<130	Calculated
LDL CHOLESTEROL	103.21	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.14	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.18		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.07		<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

Page 6 of 14



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

SIN No:SE04834278

This test has been performed at Apollo Health and Lifestyle (In-Salashiva) Path. Diagnostic Lab.



Patient Name	: Mr.SAGAR POTE	Collected	: 26/Oct/2024 09:08AM
Age/Gender	: 37 Y 6 M 0 D/M	Received	: 26/Oct/2024 11:15AM
UHID/MR No	: SPUN 0000250110	Reported	: 26/Oct/2024 12:35PM
Visit ID	: SPUNOPV58243	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/AUTH/TPA ID	: 9865323		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.34	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.26	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27.09	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.6	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.9		<1.15	Calculated
ALKALINE PHOSPHATASE	59.71	U/L	30-120	IFCC
PROTEIN, TOTAL	6.70	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		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'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.




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

SIN No:SP04839278

This test has been performed at Apollo Health and Lifestyle Inc- Sudashini Path, Apollo Diagnostics Lab.

Patient Name	Mr SAGAR POPE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y 6 M 0 D/M	Received	26/Oct/2024 11:15AM
UHID/MR No	SPUN.0000050110	Reported	26/Oct/2024 12:35PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	9865323		

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), SERUM				
CREATININE	0.93	mg/dL	0.72 - 1.18	Modified Jaffe, Kinetic
UREA	21.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.49	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.54	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.81	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136.05	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	98.65	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.70	g/dL	6.6-8.3	Biuret
ALBUMIN	3.90	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.39		0.9-2.0	Calculated

Page 8 of 14



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



SIN No: SE04839278

This test has been performed at Apollo Health and Lifestyle Ltd., Sadasibabu Pet, Pune, Diagnostics Lab.



THROU 46 LIVES



APOLLO HEALTHCARE LIMITED



Patient Name	Mr SAGAR POTE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y 6 M 0 D M	Received	26/Oct/2024 11:15AM
UHID/MR No	SPUN000050110	Reported	26/Oct/2024 12:35PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auto/TPA ID	9865323		

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 TRANSPEPTIDASE (GGT) - SERUM	18.29	U/L	<55	IFCC

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

SIN No: SEH4879278

This test has been performed at Apollo Health and Lifestyle Ltd. Sadasilab Pathology Diagnostics Lab.



Patient Name	Mr SAGAR POTE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y G M O D/M	Received	26/Oct/2024 11:15AM
UHID/MR No	: SPUN.0000050110	Reported	26/Oct/2024 12:10PM
Visit ID	: SPLNOPV68243	Status	Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/IFA ID	: 5865323		

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				
TRI-IODOETHYRONINE (T3, TOTAL)	1.37	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.31	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.116	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.

Page 10 of 14



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

SIN No. SPL24144869

This test has been performed at Apollo Health and Lifestyle Ind- Sadaashiv Path. Pune. Diagnostics Lab.



Patient Name	: Mr.SAGAR POTE	Collected	: 26/Oct/2024 09:06AM
Age/Gender	: 37 Y 6 M 0 D/M	Received	: 26/Oct/2024 11:15AM
UHID/MR No	: SPUN.0000350110	Reported	: 26/Oct/2024 12:10PM
Visit ID	: SPUNOPV68243	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Audit/TPA ID	: 9865323		

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--




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

SIN No: SPL24:44869

This test has been performed at Apollo Health and Lifestyle Ltd, Santashiv Park Phase, Diagnostics Lab

Patient Name : Mr SAGAR POTE
 Age/Gender : 37 Y 6 M 0 D/M
 UHID/MR No : SPUN 0000050110
 Visit ID : SPUNOPV68243
 Ref Doctor : Dr SELF
 Emp/Auto/TPA ID : 9865323

Collected : 26/Oct/2024 09:05AM
 Received : 26/Oct/2024 12:09PM
 Reported : 26/Oct/2024 12:43PM
 Status : Final Report
 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
pH	5.5		5-7.5	Bromothymol Blue
SP GRAVITY	1.009		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 MOUNT AND MICROSCOPY				
PUS CELLS	1 - 2	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0 - 1	/hpf	< 10	Automated Image based microscopy
RBC	0	/hpf	0-2	Automated Image based microscopy
CASTS	NEGATIVE	/hpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	NEGATIVE	/hpf	Occasional-Few	Automated Image based 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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DR Sanjay Ingle
 M.B.B.S.M.DiPathology
 Consultant Pathologist



SIN No:LR2417894

This test has been performed at Apollo Health and Lifestyle Ltd, Sadashiv, Path Banga, Diagnostics Lab

Patient Name	Mr.SAGAR POTE	Collected	26/Oct/2024 09:06AM
Age/Gender	37 Y 6 M 0 D/M	Received	26/Oct/2024 12:09PM
UHID/MR No	SPUN 0000050110	Reported	26/Oct/2024 12:43PM
Visit ID	SPUNOPV68243	Status	Final Report
Ref Doctor	Dr.SELF	Sponsor Name	ARCOFEMI HEALTHCARE LIMITED
Emp/Auto/TPA ID	9865323		

DEPARTMENT OF CLINICAL PATHOLOGY

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

Page 11 of 14



DR. Sen, Jayanthi
M.B.B.S M.D(Pathology)
Consultant Pathologist

SIN No:LR2417894

This test has been performed at Apollo Health and Lifestyle Ltd, Sadasully, Beroo Page, Diagnostics Lab

Patient Name	: Mr.SAGAR POTE	Collected	: 26/Oct/2024 09:05AM
Age/Gender	: 37 Y 6 M 0 DYM	Received	: 26/Oct/2024 12:09PM
UHID/MR No	: SPUN.0000250110	Reported	: 26/Oct/2024 12:48PM
Visit ID	: SPUNOPV58243	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9885323		

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	GOD-POD

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*** End Of Report ***

Page 19 of 19




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

SIN No:UP012138

This test has been performed at Apollo Health and Lifestyle Inc, Sahayadr, Deh-Pune, Diagnostics Lab

Patient Name	M: SAGAR POTE	Collected	26/Oct/2024 09:05AM
Age/Gender	37 Y 6 M 0 D/M	Received	26/Oct/2024 12:09PM
UHID/MR No	SPUN 0000050110	Reported	26/Oct/2024 12:46PM
Visit ID	SPUNOPV68243	Status	: Final Report
Ref Doctor	Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	9685323		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. 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 (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



DR. Saini, ng's
M.B.B.S.M. (D Pathology)
Consultant Pathologist

S/N No: UF012126

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



X-RAY CHEST PA VIEW

FINDINGS

Normal heart and mediastinum.
There is no focal pulmonary mass lesion is seen.
No collapse or consolidation is evident.
The apices, costo and cardiophrenic angles are free.
No hilar or mediastinal lymphadenopathy is demonstrated.
There is no pleural or pericardial effusion.
No destructive osseous pathology is evident.

IMPRESSION:

No significant abnormality is seen.



Dr.Santhosh Kumar DMRD,DNB
Consultant Radiologist
Reg.No: 59248

CONFIDENTIALITY:

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PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

Patient's Name :- Mr.Sagar Pote
Ref Doctor :- Health Checkup

AGE : 37 Yrs/M.
DATE: 26/10/2024

USG ABDOMEN & PELVIS

Liver : appears normal in size but shows increased echogenicity due to fatty infiltration. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder : is well distended. No evidence of calculus. Wall thickness appears normal.

Spleen: appears normal in size and echotexture. Splenic vein appears normal.

Pancreas : appears normal in echopattern. No focal lesion/calcification.

Both the kidneys : appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.
Right kidney- 8.8 x 4.1 cms Left kidney – 9 x 4.1 cms

Urinary Bladder - is well distended and appears normal. No evidence of any wall thickening or abnormality.

Prostate is normal in size and echotexture. No evidence of calcification seen. Seminal vesicles appear normal.

No obvious free fluid or lymphadenopathy is noted in the abdomen.

IMPRESSION:-

Grade I fatty liver.

No other significant abnormality detected.


Dr. Rajeev Munot, M.D
Consultant Radiologist

Apollo Spectra Hospitals: Saras Baug Road, Opp. Saras Play Ground, Sadashiv Peth, Pune, Maharashtra - 411030
Ph No: 022 - 6720 6500 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd. (CIN - U85100TG2009PTC099414)
(Formerly known as Nova Specialty Hospital Ltd.)

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

2D ECHO / COLOUR DOPPLER

Name : Mr. Sagar Pote
Ref by : Health Checkup

Age : 37 YRS / M
Date : 26/10/2024

LA – 32 AO – 26 IVS¹ – 10 PW – 10
LVIDD – 37 LVIDS - 25
EF 55 %

Normal LV size and systolic function.
No diastolic dysfunction
Normal LV systolic function, LVEF 55 %
No regional wall motion abnormality
Normal sized other cardiac chambers
Mitral valve has thin leaflets with normal flow.
Aortic valve has three thin leaflets with normal structure and function. No aortic regurgitation. No LVOT gradient
Normal Tricuspid & pulmonary valves.
No tricuspid regurgitation.
PA pressures Normal

Intact IAS and IVS.
No clots, vegetations, pericardial effusion noted.

IMPRESSION
NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.
NO RWMA. NO PULMONARY HTN
NO CLOTS/VEGETATIONS

DR.SAMRAT SHAH
MD, CONSULTANT PHYSICIAN

EYE REPORT



ASH/PUN/OPHTH/06/02-0216

Name: Mr. Sagar Pote

Date: 26/10/2024

Age / Sex: 37 yrs, M

Ref No.:

Complaint: For routine eye checkup

Examination

Vision $\left\{ \begin{array}{l} R \ 6/6, N6 \\ L \ 6/6, N6 \end{array} \right\}$ unaided

Spectacle Rx

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance								
Read								
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

Remarks:

Color vision - $\left\{ \begin{array}{l} R \\ L \end{array} \right\}$ PGP
 Slit lamp exam - $\left\{ \begin{array}{l} R \\ L \end{array} \right\}$ NAD

Medications:

Trade Name	Frequency	Duration

Follow up: After one year.

Consultant: Dr. A.C. Bhargava

Apollo Spectra Hospitals

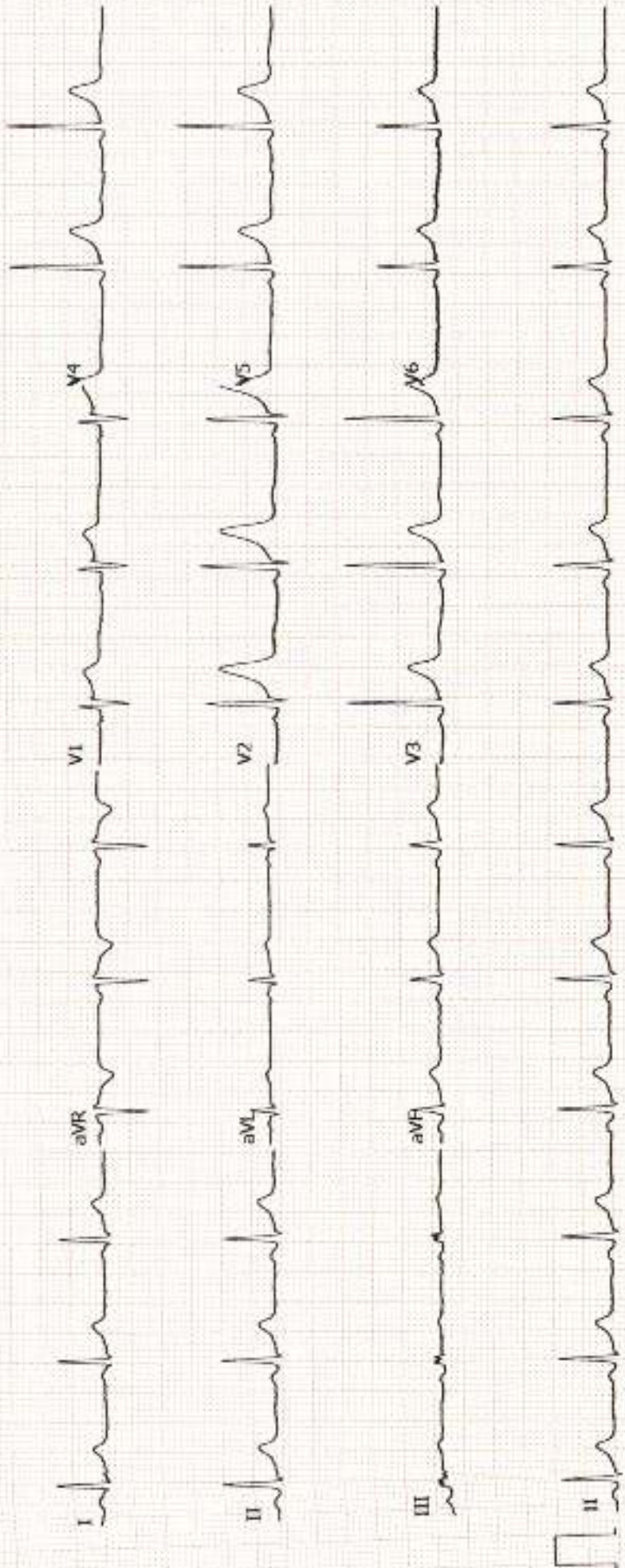
Opp. Saras Sports Ground, Saras Baug, Sadashiv Peth, Pune, Maharashtra- 411030
 Ph : 020 67206500 | Fax: 020 67206523 | www.apollospectra.com

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

Mr - Sagar Pote
8741N

QRS : 72 ms
QT / QTc Baz : 366 / 386 ms
PR : 120 ms
P : 98 ms
RR / pp : 896 / 895 ms
P / QRS / T : 51 / 42 / 49 degrees

Normal sinus rhythm with sinus arrhythmia
Increased R/S ratio in V1, consider early transition or posterior
infarct.
Abnormal ECG



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320774	ARKIVY TECHNOLOGIES PRIVATE LIMITED	Private	Aarti Mangem, Sainwale	arkivy@arkivy.com	arkivy@arkivy.com	Private	Aarti Mangem, Sainwale	9527952003	ARKIVY TECHNOLOGIES PRIVATE LIMITED	Private	Aarti Mangem, Sainwale
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S/O. Prashant Pote
Miran Apartment
Bhopalkar Marg
New Parajal Police Station 133rd Sakhav Path
Pune City
S/o. College Pune City Pune
Maharashtra 411000

Call 196 - 176 - 443788 / 44464 - P



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भारत 411000
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