



PLEASE SCAN QR CODE
TO VERIFY THE REPORT ONLINE



| | | | |
|--------------|--|---------------|------------------------------|
| Name | : MR.MADHU B H | TID/SID | : UMR1657476/ 27779272 |
| Age / Gender | : 41 Years / Male | Registered on | : 19-Jun-2024 / 09:25 AM |
| Ref.By | : ARCOFEMI HEALTH CARE LTD - MEDI WHEELS | Collected on | : 19-Jun-2024 / 09:27 AM |
| Req.No | : BIL4379364 | Reported on | : 19-Jun-2024 / 12:44 PM |
| | | Reference | : Arcofemi Health Care Ltd - |

TEST REPORT

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

| Investigation | Observed Value | Biological Reference Intervals |
|--|------------------|--------------------------------------|
| Physical Examination | | |
| Colour Method:Physical | Pale Yellow | Straw to Yellow |
| Appearance Method:Physical | Clear | Clear |
| Chemical Examination | | |
| Reaction and pH Method:pH- Methyl red & Bromothymol blue | 6.5 | 4.6-8.0 |
| Specific gravity Method:Bromothymol Blue | 1.015 | 1.003-1.035 |
| Protein Method:Tetrabromophenol blue | Negative | Negative |
| Glucose Method:Glucose oxidase/Peroxidase | Negative | Negative |
| Blood Method:Peroxidase | Positive (Trace) | Negative |
| Ketones Method:Sodium Nitroprusside | Negative | Negative |
| Bilirubin Method:Dichloroanilinediazonium | Negative | Negative |
| Leucocytes Method:3 hydroxy5 phenylpyrrole + diazonium | Negative | Negative |
| Nitrites Method:Diazonium + 1,2,3,4 tetrahydrobenzo (h) quinolin 3-ol | Negative | Negative |
| Urobilinogen Method:Dimethyl aminobenzaldehyde | 0.2 | 0.2-1.0 mg/dl |
| Microscopic Examination | | |
| Pus cells (leukocytes) Method:Microscopy | 0-1 | 2 - 3 /hpf |
| Epithelial cells Method:Microscopy | 0-1 | 2 - 5 /hpf |
| RBC (erythrocytes) Method:Microscopy | 1-2 | Absent |
| Casts Method:Microscopy | Absent | Occasional hyaline casts may be seen |



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| | | |
|-------------------|--------|---|
| Crystals | Absent | Phosphate, oxalate, or urate crystals may be seen |
| Method:Microscopy | | |
| Others | Nil | Nil |
| Method:Microscopy | | |

Method: Semi Quantitative test ,For CUE

Reference: Godkar Clinical Diagnosis and Management by Laboratory Methods, First South Asia edition. Product kit literature.

Interpretation:

The complete urinalysis provides a number of measurements which look for abnormalities in the urine. Abnormal results from this test can be indicative of a number of conditions including kidney disease, urinary tract infection or elevated levels of substances which the body is trying to remove through the urine . A urinalysis test can help identify potential health problems even when a person is asymptomatic. All the abnormal results are to be correlated clinically.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Kavya SN

Dr.Kavya S N
Consultant Pathologist



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Req.No : BIL4379364 Reported on : 19-Jun-2024 / 13:29 PM
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TEST REPORT

DEPARTMENT OF HEMATOPATHOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

| Parameter | Results |
|----------------------|----------|
| Blood Grouping (ABO) | O |
| Rh Typing (D) | POSITIVE |

Method: Hemagglutination Tube Method by Forward & Reverse Grouping

Reference: Tulip kit literature

Interpretation: The ABO grouping and Rh typing test determines blood type grouping (A,B, AB, O) and the Rh factor (positive or negative). A person's blood type is based on the presence or absence of certain antigens on the surface of their red blood cells and certain antibodies in the plasma. ABO antigens are poorly expressed at birth, increase gradually in strength and become fully expressed around 1 year of age.

Note: Records of previous blood grouping/Rh typing not available. Please verify before transfusion.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Kavya SN

Dr.Kavya S N
Consultant Pathologist



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 Ref.By : ARCOFEMI HEALTH CARE LTD - MEDI WHEELS Collected on : 19-Jun-2024 / 09:27 AM
 Req.No : BIL4379364 Reported on : 19-Jun-2024 / 12:14 PM
 Reference : Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF HEMATOPATHOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

| Investigation | Observed Value | Biological Reference Intervals |
|---|----------------|--------------------------------|
| Erythrocyte Sedimentation Rate Method:Microphotometrical capillary using stopped flow kinetic analysis | 14 | <=15 mm/hour |

Complete Blood Count (CBC), EDTA Whole Blood

| Investigation | Observed Value | Biological Reference Interval |
|--|----------------|-------------------------------|
| Hemoglobin Method:Spectrophotometry | 16.1 | 13.0-18.0 g/dL |
| Packed Cell Volume Method:Derived from Impedance | 47.9 | 40-54 % |
| Red Blood Cell Count. Method:Impedance Variation | 5.01 | 4.3-6.0 Mill/Cumm |
| Mean Corpuscular Volume Method:Derived from Impedance | 95.6 | 78-100 fL |
| Mean Corpuscular Hemoglobin Method:Derived from Impedance | 32.2 | 27-32 pg |
| Mean Corpuscular Hemoglobin Concentration Method:Derived from Impedance | 33.6 | 31.5-36 g/dL |
| Red Cell Distribution Width - CV Method:Derived from Impedance | 11.6 | 11.5-16.0 % |
| Red Cell Distribution Width - SD Method:Derived from Impedance | 43.7 | 39-46 fL |
| Total WBC Count. Method:Impedance Variation | 7210 | 4000-11000 cells/cumm |
| Neutrophils Method:Impedance Variation, Flowcytometry | 63.0 | 40-75 % |
| Lymphocytes Method:Microscopy | 26.6 | 20-45 % |
| Eosinophils Method:Impedance Variation,Method_Desc= Flow Cytometry | 4.6 | 01-06 % |
| Monocytes Method:Impedance Variation, Flowcytometry | 4.6 | 01-10 % |



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TEST REPORT

| | | |
|--|------|----------------------|
| Basophils. | 1.2 | 00-02 % |
| Method:Impedance Variation,Method_Desc= Flow Cytometry | | |
| Absolute Neutrophils Count. | 4542 | 1500-6600 cells/cumm |
| Method:Calculated | | |
| Absolute Lymphocyte Count | 1918 | 1500-3500 cells/cumm |
| Method:Calculated | | |
| Absolute Eosinophils count. | 332 | 40-440 cells/cumm |
| Method:Calculated | | |
| Absolute Monocytes Count. | 332 | <1000 cells/cumm |
| Method:Calculated | | |
| Absolute Basophils count. | 87 | <200 cells/cumm |
| Method:Calculated | | |
| Platelet Count. | 2.51 | 1.4-4.4 lakhs/cumm |
| Method:Impedance Variation | | |
| Mean Platelet Volume. | 7.5 | 7.9-13.7 fL |
| Method:Derived from Impedance | | |
| Plateletcrit. | 0.19 | 0.18-0.28 % |
| Method:Derived from Impedance | | |

Method: Automated Hematology Analyzer, Microscopy

Reference: Dacie and Lewis Practical Hematology, 12th Edition

Interpretation: A Complete Blood Picture (CBP) is a screening test which can aid in the diagnosis of a variety of conditions and diseases such as anemia, leukemia, bleeding disorders and infections. This test is also useful in monitoring a person's reaction to treatment when a condition which affects blood cells has been diagnosed. All the abnormal results are to be correlated clinically.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Debleena Thakur

Dr Debleena Thakur
Consultant Pathologist



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 Reference : Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CLINICAL CHEMISTRY I

Alanine Aminotransferase (ALT/SGPT), Serum

| Investigation | Observed Value | Biological Reference Interval |
|---|----------------|-------------------------------|
| Alanine Aminotransferase ,(ALT/SGPT) | 24 | <=41 U/L |
| Method: IFCC without pyridoxal phosphate activation | | |

Interpretation: This test measures levels of Alanine Aminotransferase (ALT) in the blood. ALT is an enzyme found in the cells of the liver. Increased levels of ALT are typically produced when the liver is damaged. ALT testing is often done to monitor treatment for liver disease or when a person is experiencing symptoms of liver disorders.

Reference: Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics.

Bilirubin Total , Serum

| Investigation | Observed Value | Biological Reference Interval |
|--|----------------|---|
| Total Bilirubin. | 0.76 | Neonates: <=15.0 mg/dL Adults: <=1.2 mg/dL |
| Method:Spectrophotometry, Diazo method | | |

Interpretation: This test measures total Bilirubin levels in the blood. Bilirubin is a waste product from the breakdown of old red blood cells which is processed by the liver for removal from the body. Abnormally high bilirubin levels are often indicative of liver disease. High bilirubin levels can be caused by a number of conditions including hepatitis, cirrhosis, alcoholism, cholangitis, infectious mononucleosis, anorexia and anemia. Due to the variety of conditions which can affect bilirubin levels, results often need to be interpreted along with additional tests.

Blood Urea Nitrogen (BUN), Serum

| Investigation | Observed Value | Biological Reference Interval |
|---|----------------|-------------------------------|
| Blood Urea Nitrogen. | 7 | 6-20 mg/dL |
| Method:Kinetic, Urease - GLDH, Calculated | | |

Interpretation: Urea is a waste product formed in the liver when protein is metabolized. Urea is released by the liver into the blood and is carried to the kidneys, where it is filtered out of the blood and released into the urine. Since this is a continuous process, there is usually a small but stable amount of urea nitrogen in the blood. However, when the kidneys cannot filter wastes out of the blood due to disease or damage, then the level of urea in the blood will rise. The blood urea nitrogen (BUN) evaluates kidney function in a wide range of circumstances, to diagnose kidney disease, and to monitor people with acute or chronic kidney dysfunction or failure. It also may be used to evaluate a person's general health status as well.

Reference: Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics

Creatinine, Serum

| Investigation | Observed Value | Biological Reference Interval |
|--|----------------|-------------------------------|
| Creatinine. | 0.77 | 0.7-1.3 mg/dL |
| Method:Spectrophotometry, Jaffe - IDMS Traceable | | |



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Interpretation:

Creatinine is a nitrogenous waste product produced by muscles from creatine. Creatinine is majorly filtered from the blood by the kidneys and released into the urine, so serum creatinine levels are usually a good indicator of kidney function. Serum creatinine is more specific and more sensitive indicator of renal function as compared to BUN because it is produced from muscle at a constant rate and its level in blood is not affected by protein catabolism or other exogenous products. It is also not reabsorbed and very little is secreted by tubules making it a reliable marker. Serum creatinine levels are increased in pre renal, renal and post renal azotemia, active acromegaly and gigantism. Decreased serum creatinine levels are seen in pregnancy and increasing age.

Biological reference interval changed; Reference: Tietz Textbook of Clinical Chemistry & Molecular Diagnostics, Fifth Edition.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Dr.M.G.Satish
Consultant Pathologist



MC-5592

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Age / Gender : 41 Years / Male Registered on : 19-Jun-2024 / 09:25 AM
Ref.By : ARCOFEMI HEALTH CARE LTD - MEDI WHEELS Collected on : 19-Jun-2024 / 09:28 AM
Req.No : BIL4379364 Reported on : 19-Jun-2024 / 13:06 PM
Reference : Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

| Investigation | Observed Value | Biological Reference Interval |
|--------------------------------------|----------------|--|
| Glucose Fasting Method:Hexokinase | 72 | Normal: 70 -100 mg/dL Impaired FG: 100-125 mg/dL Diabetes mellitus: \geq 126 mg/dL |

Interpretation: It measures the Glucose levels in the blood with a prior fasting of 9-12 hours. The test helps screen a symptomatic/ asymptomatic person who is at risk for Diabetes. It is also used for regular monitoring of glucose levels in people with Diabetes.

Reference: American Diabetes Association. Standards of Medical Care in Diabetes-2020.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Debleena Thakur

Dr Debleena Thakur
Consultant Pathologist



MC-5592

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Age / Gender : 41 Years / Male Registered on : 19-Jun-2024 / 09:25 AM
Ref.By : ARCOFEMI HEALTH CARE LTD - MEDI WHEELS Collected on : 19-Jun-2024 / 09:27 AM
Req.No : BIL4379364 Reported on : 19-Jun-2024 / 13:48 PM
Reference : Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

| Investigation | Observed Value | Biological Reference Interval |
|--|----------------|--|
| Glucose Post Prandial Method:Hexokinase | 97 | Normal : 90 - 140 mg/dL Impaired PG: 140-199 mg/dL Diabetes mellitus: \geq 200 mg/dL |

Interpretation: This test measures the blood sugar levels 2 hours after a normal meal. Abnormally high blood sugars 2 hours after a meal reflect that the body is not producing sufficient insulin which is indicative of Diabetes.

Reference: American Diabetes Association. Standards of Medical Care in Diabetes-2020.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Debleena Thakur

Dr Debleena Thakur
Consultant Pathologist

AD: 15'88
G'68'10V
CHUKOBA CB-1

TENET DIAGNOSTICS

| | | | |
|---------------|---------------|-------------|------------|
| Customer Name | M. Madhu. B.H | Customer ID | B164379364 |
| Age & Gender | 21 yrs / Male | Visit Date | 19/6/24 |

Eye screening

with spectacles / with out spectacles (strike out whichever is not applicable)

| | Right eye | Left eye | |
|-----------------|-----------|-----------|------|
| Near Vision | — | — | N6 |
| Distance Vision | 0 (Plano) | 0 (Plano) | c/s. |
| Colour Vision | — | — | |

observation / comments

Eye sight is normal

Mr. Madhu B H
ID: 4379364

19.06.2024 10:10:48
tenet
Indiranagar
Bangalore

Male

41 Years

QRS : 70 ms
QT / QTcBaz : 324 / 415 ms
PR : 122 ms
P : 76 ms
RR/PP : 606 / 606 ms
P / QRS / T : 66 / 46 / 53 degrees

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

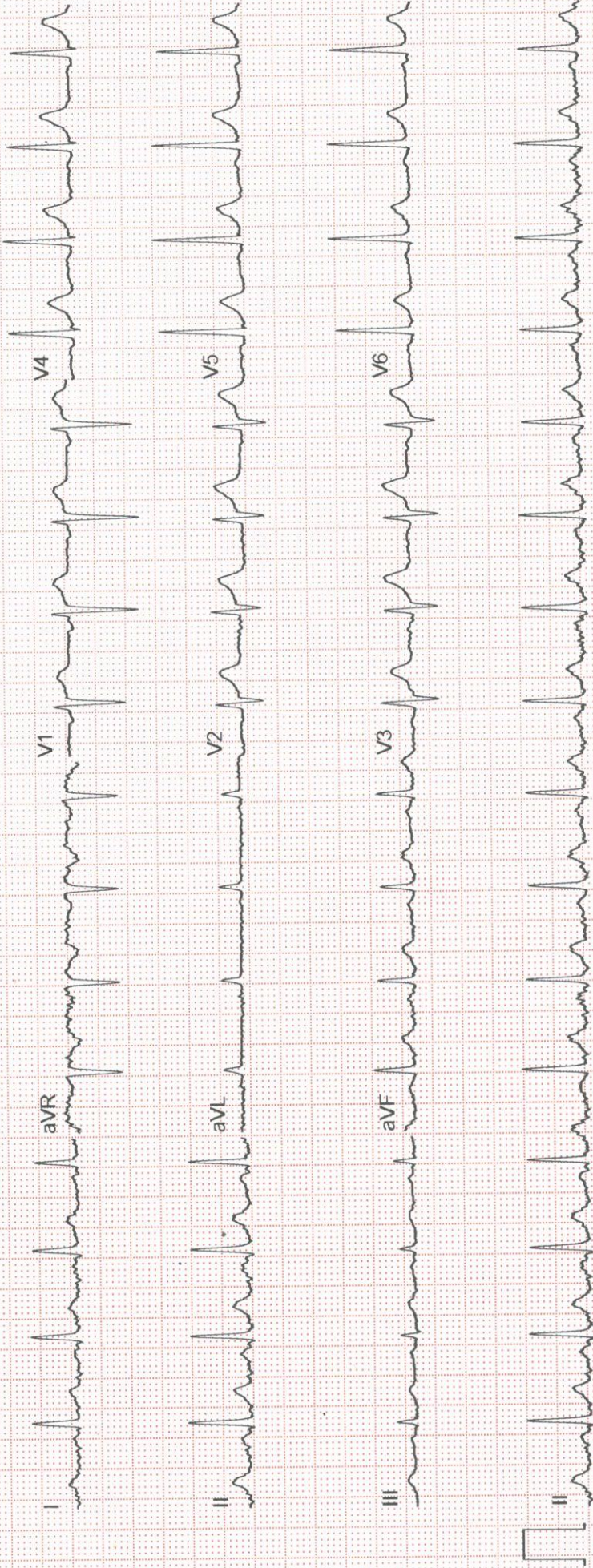
SINCE PATHY

WMC

[Signature]

Dr. MAHADEV SWAMY F
MBBS, MD (Internal Medicine)
DM Cardiology (JIPMER) - SC&TC
Consultant - Interventional Cardiology

99 bpm
- / - mmHg





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| Reg.No | : BIL4379364 | Reference | : Arcofemi Health Care Ltd - Medi Whe |

X-Ray Chest PA View

Lung fields appear normal.

Cardiac size is within normal limits.

Aorta and pulmonary vasculature is normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

IMPRESSION:

* Normal study.

*** End Of Report ***

Dr Niharika Gupta
Consultant Radiologist



Mediwheel
...Your wellness partner

Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Madhu B H** aged, **41yr**. Based on the examination, I certify that he is in good mental and physical health and it is free from any physical defects such as deafness, colour blindness, and any chronic or contagious diseases.

Place: **Bangalore**

Date: **19/06/2024**

Dr. Nitesh Kumar
Nitesh Kumar
MBBS
BCMR 47093
Name & Signature of

Medical officer