



Age/Gender : 36 Y 1 M 1 D/M
UHID/MR No : CMYS.0000057755

Visit ID : CMYSOPV116963

Emp/Auth/TPA ID : 805774286827

Collected : 26/Aug/2023 08:15AM

Received : 26/Aug/2023 10:06AM Reported : 26/Aug/2023 12:21PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

## **DEPARTMENT OF HAEMATOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

: Dr.SELF

Ref Doctor

Page 1 of 16

SIN No:BED230203491







Age/Gender : 36 Y 1 M 1 D/M UHID/MR No : CMYS.0000057755 Visit ID : CMYSOPV116963

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 805774286827 Collected : 26/Aug/2023 08:15AM Received : 26/Aug/2023 10:06AM

Reported : 26/Aug/2023 01:37PM

: Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY** ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324 **Test Name** Result Unit Bio. Ref. Range Method

Status

HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	16.3	g/dL	13-17	Spectrophotometer
PCV	48.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.34	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	91	fL	83-101	Calculated
MCH	30.5	pg	27-32	Calculated
MCHC	33.4	g/dL	31.5-34.5	Calculated
R.D.W	12.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,700	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	57.6	%	40-80	Electrical Impedance
LYMPHOCYTES	34.5	%	20-40	Electrical Impedance
EOSINOPHILS	2.2	%	1-6	Electrical Impedance
MONOCYTES	5.2	%	2-10	Electrical Impedance
BASOPHILS	0.5	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5011.2	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	3001.5	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	191.4	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	452.4	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	43.5	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.

W.B.C: normal in number with normal morphology and distribution.

Platelets: are normal in number and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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GSTIN: 29AADCA0733E1Z3





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**Test Name** 

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY** ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324 Result Unit Bio. Ref. Range Method

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SIN No:BED230203491





Age/Gender : 36 Y 1 M 1 D/M

UHID/MR No : CMYS.0000057755

Visit ID : CMYSOPV116963 Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 805774286827

Collected : 26/Aug/2023 08:15AM

Received : 26/Aug/2023 10:06AM Reported : 26/Aug/2023 12:21PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY							
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324							
Test Name Result Unit Bio. Ref. Range Method							

BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA					
BLOOD GROUP TYPE	0		Forward & Reverse Grouping with Slide/Tube Aggluti		
Rh TYPE	POSITIVE		Forward & Reverse Grouping with Slide/Tube Agglutination		

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SIN No:BED230203491

APOLLO CLINICS NETWORK





Age/Gender : 36 Y 1 M 1 D/M

UHID/MR No : CMYS.0000057755

Visit ID : CMYSOPV116963

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 805774286827

Collected : 26/Aug/2023 11:00AM

Received : 26/Aug/2023 12:46PM

Reported : 26/Aug/2023 01:21PM Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY						
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324						
Test Name Result Unit Bio. Ref. Range Method						

GLUCOSE, FASTING , NAF PLASMA	150	mg/dL	70-100	GOD - POD	
-------------------------------	-----	-------	--------	-----------	--

#### **Comment:**

As per American Diabetes Guidelines

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.

GLUCOSE, POST PRANDIAL (PP), 2	264	mg/dL	70-140	GOD - POD	
HOURS , SODIUM FLUORIDE PLASMA (2					
HR)					

## **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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SIN No:PLF02018710,PLP1362563



Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)







Age/Gender : 36 Y 1 M 1 D/M UHID/MR No : CMYS.0000057755 Visit ID : CMYSOPV116963

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 805774286827 Collected : 26/Aug/2023 08:15AM

Received : 27/Aug/2023 01:43AM Reported : 27/Aug/2023 03:07AM

: Final Report Status

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY						
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324						
Test Name Result Unit Bio. Ref. Range Method						

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	7.4	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	166	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 Diabetes Association guidelines 2023. American
- 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 Disease. Clinical Correlation is advised in interpretation of low Values. Kidney
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or 4. 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%

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ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324							
est Name Result Unit Bio. Ref. Range Method							

B: Homozygous Hemoglobinopathy.

**Test Name** 

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

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DEPARTMENT OF BIOCHEMISTRY						
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324						
Test Name Result Unit Bio. Ref. Range Method						

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	220	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	153	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	37	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	183	mg/dL	<130	Calculated
LDL CHOLESTEROL	152.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	30.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.95		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

- 1. Measurements in the same patient on different days can show physiological and analytical variations.
- 2.NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- 3.Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4.Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5.As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6.VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Page 8 of 16

1860 www.apolloclinic.com

GSTIN: 29AADCA0733E1Z3





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Triglycerides are below 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324			2324	
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	1.00	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.80 mg/dL 0.0-1.1 Dual Wavelen			
ALANINE AMINOTRANSFERASE (ALT/SGPT)	59	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	37.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	142.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.60	g/dL	6.3-8.2	Biuret
ALBUMIN	4.70	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.62		0.9-2.0	Calculated

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Ref Doctor



Patient Name : Mr.PRADEEP KUMAR A

Age/Gender : 36 Y 1 M 1 D/M

UHID/MR No : CMYS.0000057755

Visit ID : CMYSOPV116963

: Dr.SELF Emp/Auth/TPA ID : 805774286827 Collected : 26/Aug/2023 08:15AM

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DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEE	ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324			2324
Test Name	Result	Unit	Bio. Ref. Range	Method

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM				
CREATININE	0.70	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	24.50	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.40	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	2.90	mg/dL	2.5-4.5	PMA Phenol
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE

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Age/Gender : 36 Y 1 M 1 D/M

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ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324				
Test Name Result Unit Bio. Ref. Range Method				

GAMMA GLUTAMYL TRANSPEPTIDASE	53.00	U/L	15-73	Glyclyclycine
(GGT), SERUM				Nitoranalide

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Age/Gender : 36 Y 1 M 1 D/M UHID/MR No : CMYS.0000057755 Visit ID : CMYSOPV116963

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Received : 27/Aug/2023 09:39AM Reported : 27/Aug/2023 10:29AM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY				
ARCOFEMI - MEDIWHEE	ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324			2324
Test Name Result Unit Bio. Ref. Range Method				Method

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.15	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	9.58	μg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.790	μIU/mL	0.35-4.94	CMIA

#### **Comment:**

Note:

Har progrant tomolog	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	Т3	T4	FT4	Conditions
High	Low	Low	l ow	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis

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GSTIN: 29AADCA0733E1Z3





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DEPARTMENT OF IMMUNOLOGY							
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324							
Test Name	Result	Unit	Bio. Ref. Range	Method			

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			
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma			

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SIN No:IM06060021

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

APOLLO CLINICS NETWORK





 Age/Gender
 : 36 Y 1 M 1 D/M

 UHID/MR No
 : CMYS.0000057755

 Visit ID
 : CMYSOPV116963

Visit ID : CMYSOPV116963
Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 805774286827

Collected : 26/Aug/2023 08:15AM

Received : 26/Aug/2023 01:55PM Reported : 26/Aug/2023 02:28PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY									
ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - 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
рН	6.5	- :	5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		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	44	NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT	AND MICROSCOPY		9	
PUS CELLS	2 - 4	/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:**

- 1. Biochemical Examination of urine sample was performed by reflectance photometry and confirmed by alternative methods.
- 2. The samples are assessed for integrity and adequacy before processing.

\*\*\* End Of Report \*\*\*

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GSTIN: 29AADCA0733E1Z3



Ref Doctor



Patient Name : Mr.PRADEEP KUMAR A

Age/Gender : 36 Y 1 M 1 D/M

UHID/MR No : CMYS.0000057755

Visit ID : CMYSOPV116963

: Dr.SELF

**Test Name** 

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#### **DEPARTMENT OF CLINICAL PATHOLOGY** ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324 Result Unit Bio. Ref. Range Method

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

DR. SHIVARAJA SHETTY M.B.B.S.M.D(Biochemistry M.B.B.S.MD(Pathology) CONSULTANT BIOCHEMIST Consultant Pathologist

Dr. Anita Shobha Flynn

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Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

APOLLO CLINICS NETWORK

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744





# **CERTIFICATE OF MEDICAL FITNESS**

e/she	TIS	Ti
٠	Medically Fit	e
•	Fit with restrictions/recommendations	Г
	Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
	1	
	2	
	3	
	However the employee should follow the advice/medication that has been communicated to him/her.	
	Review after	
•	Currently Unfit.	$\vdash$
	Review afterrecommended	
٠	Unfit	
	Dr. braunn	
	Medical Officer The Applie Chinic The Applie Chinic	_
	Kalidasa Road, Mysore - 02 Lifestyle Limite	

Scanned with OKEN Scanner

Scanned with CamScanner

Date

: 26-08-2023

Department

: GENERAL

MR NO

: CMYS.0000057755

Doctor

Name

: Mr. PRADEEP KUMAR A

Registration No

Qualification

Age/ Gender

: 36 Y / Male

Consultation Timing: 08:11

Height:

Temp:

Weight: Pulse:

60

BMI: Resp:

Waist Circum: B.P:

General Examinat **Allergies History** 

Clinical Diagnosis & Management Plan

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klclo Dur

FBS - 150

PPSS - 269

Total Westerol -220

unine RE - wre

Chert x may - Nomal Street

Ela- www

Follow up date:

HSAIC - Suffermed

**Doctor Signature** 

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

Date

: 26-08-2023

Department

: GENERAL

MR NO

: CMYS.0000057755

Doctor

Name

: Mr. PRADEEP KUMAR A

Registration No

Qualification

Age/ Gender

: 36 Y / Male

Consultation Timing:

Height:

Temp:

08:11

Weight:

Pulse:

BMI: Resp:

Waist Circum: B.P:

110180

General Examinat Allergies History

Clinical Diagnosis & Management Plan

Huze

DiStance

6/6

Near Un

No

N6

colo un Un

Normal

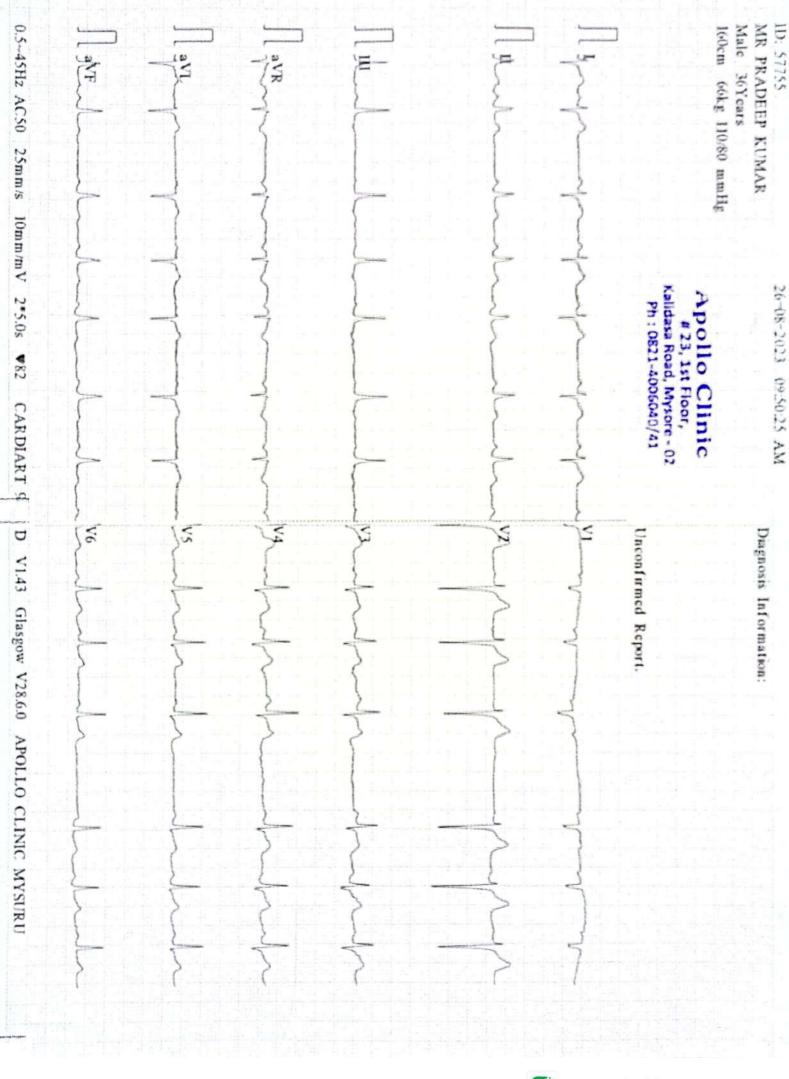
Normal

Follow up date:

**Doctor Signature Apollo Clinic** 

Fil

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







Patient Name

: Mr. PRADEEP KUMAR A

Age

: 36 Y M

UHID

: CMYS.0000057755

OP Visit No

: CMYSOPV116963

Reported on

: 26-08-2023 15:47

Printed on

: 26-08-2023 15:48

Adm/Consult Doctor

Ref Doctor

: SELF

# 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.

Printed on:26-08-2023 15:47

--- End of the Report---

Dr. PRADEEP KUMAR C N MBBS DNB( RADIOLOGY)

· Priday

Radiology

Apollo Health and Lifestyle Limited

ICIN UBS110102000000011158191

Regid Office 1, 10 to 12, Ashoka Raghupathi Chambers 5th Floor Begumpet Hyderabad Telanguru - 500,016

Ph. No. (40:40:40:40777, fax No. 4904.7744.) [mail ID enquiry/apollor/com... www.apollon/com.

APOLLO CLINICS NETWORK KARNATAKA

Bangelore (Basa-anagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalir |

Karamangala (Sepapur Road) Mysore (VV Mohalla)

Online appointments, www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Scanned with CamScanner



Name: Mr. PRADEEP KUMAR A MR No: CMYS.0000057755 Visit ID: CMYSOPV116963 Age/Gender: 36 Y/M 26-08-2023 08:11

mysore Visit Date: Address: Location: MYSORE, KARNATAKA Discharge Date:

Referred By: Doctor:

**SELF GENERAL** Department:

MYSORE\_06042023 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SABAH JAVED

# HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

#### **Chief Complaints**

COMPLAINTS:::: For Annual Health Checkup,

#### SYSTEMIC REVIEW

\*\*Weight

Rate Plan:

--->: Stable,

Number of kgs: 60,

#### **HT-HISTORY**

#### **Past Medical History**

PAST MEDICAL HISTORY: Nil Significant,

\*\*Cancer: NILL,

#### PHYSICAL EXAMINATION

### SYSTEMIC EXAMINATION

#### **IMPRESSION**

#### **IMPRESSION**

Finding Category: within normal limits,

## RECOMMENDATION

#### **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** 



Bill Of Supply

Age/Gender

ME PRADEEP KUMAR A

36 Y M

+918073436114

Contact No Address

UHID

HIS SOIL

CMYS 000003\*\*755

Bill No

: CMYS-OCR-21150 : 26.08 2023 08:11

Bill Reg Date Referred by

SELF

Center

Mysore

Emp No/Auth Code : 805774286827

Co	rporate Name in	: ARCOFEMI N	1EDIWHEEL	MALE A	HC CREDIT	PAN IND	IA OP AGRI	CGST	CCST	GST/UTGST	T Net Value	
#	Department	Description Of Service	SAC Code	Qty	Rate	Gross Value	Discount	Rate	Amt	13	Amt	,ver value
1	Package Charges	ARCOFEMI MICDIWIIFT - FULL BODY STANDARD PLUS MALL -	999312	1	1,000.00	1,000.00	0.00	0.00	0.00	0.00	() (x)	1,000.00
		PAN INDIA - FY2324								Bill V	monot-	1 forms (N)

Paris na Payanent

Corporate Due:

1,000,00

Patient Due:

0.00

Received with thanks: Zero Rupees only

Authorized Signature (Veda Shree S)

You can download your report from "www apollochine com". Enter user name as CMYSOPV110903 and password as \$43034

Please log on to AskApollo.com for booking Appointments





ಹುಟ್ಟಿದ ವರ್ಷ / Year of Birth : 1987 ಪುರುಷ / Male



ಆಧಾರ್ – ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

Fwd: Health Check up Booking Confirmed Request(UBOI1842),Package Code-PKG10000361, Beneficiary Code-270868

Pradeep Kumar Adisesha Rao <pradeepkumaradisesha@gmail.com>

Sat 26-08-2023 08:12

To:Mysore Apolloclinic <mysore@apolloclinic.com>

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

From: Pradeep Kumar Adisesha Rao pradeepkumaradisesha@gmail.com

Date: Sat, 26 Aug. 2023, 8:01 AM

Subject: Fwd: Health Check up Booking Confirmed Request(UBOI1842), Package Code-

PKG10000361, Beneficiary Code-270868

To: <mysore@appoloclinic.com>

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

From: Mediwheel <wellness@mediwheel.in>

Date: Thu, 24 Aug. 2023, 11:25 AM

Subject. Health Check up Booking Confirmed Request(UBOI1842), Package Code-PKG10000361,

Beneficiary Code-270868

To: radeepkumaradisesha@gmail.com>

Cc: < customercare@mediwheel.in>

011-41195959

Dear PRADEE® KUMAR A

We are pleased to confirm your health check up booking request with the topic course. It is

**Booking Date** 

: 21-08-2023

Hospital Package

Name

: Mediwheel Full Body Standard Plus

Patient Package

Name

: MediWheel Full Body Health Checkup Male 35 to 40

Diagnostic/Hospital : Apollo Clinic

Aduless of Apollo Clinic, 23, Kalidasa Road, VV Mohalla, Mysore - 570002 Diagnostic/Hospital-

City

: Mysore

State

Pincode

5/0002

Appointment Date : 26-08-2023

Confirmation Status: Booking Confirmed

Preferred Time 8:00am-9:00am

Note - Pleash note to not pay any amount .

# Instructions to undergo Health Check:

Please ensure you are on complete fasting for 10-To-12-Hours prior to check.