Name	: Mr. UPPARA RAGHAVEND	RA
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM
Туре	: OP	Printed On : 30/01/2024 8:42 AM
Ref. Dr	: MediWheel	

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination)	'O' 'Positive'		
INTERPRETATION: Note: Slide method is scree	ening method. Kind	ly confirm with Tube metho	d for transfusion.
Complete Blood Count With - ESR	6	,	
Haemoglobin (EDTA Blood'Spectrophotometry)	14.8	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	44.6	%	42 - 52
RBC Count (EDTA Blood)	5.47	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	81.6	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	27.0	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	33.1	g/dL	32 - 36
RDW-CV	13.8	%	11.5 - 16.0
RDW-SD	39.8	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	6800	cells/cu.mm	4000 - 11000
Neutrophils (Blood)	53.6	%	40 - 75
Lymphocytes (Blood)	34.6	%	20 - 45
Eosinophils (Blood)	3.3	%	01 - 06







The results pertain to sample tested.

Page 1 of 10

Name	: Mr. UPPARA RAGHAVEND	RA
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM
Туре	: OP	Printed On : 30/01/2024 8:42 AM
Ref. Dr	: MediWheel	

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
Monocytes (Blood)	7.8	%	01 - 10
Basophils (Blood)	0.7	%	00 - 02
INTERPRETATION: Tests done on Automated	Five Part cell count	er. All abnormal results a	are reviewed and confirmed microscopically.
Absolute Neutrophil count (EDTA Blood)	3.6	10^3 / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.3	10^3 / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.2	10^3 / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.5	10^3 / µl	< 1.0
Absolute Basophil count (EDTA Blood)	0.0	10^3 / µl	< 0.2
Platelet Count (EDTA Blood)	196	10^3 / µl	150 - 450
MPV (Blood)	8.0	fL	7.9 - 13.7
PCT (Automated Blood cell Counter)	0.157	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrated Blood)	11	mm/hr	< 15
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	89.13	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD) Negative







Dr Anusha.K.S Sr.Consultant Pathologist Reg No : 100674 APPROVED BY

The results pertain to sample tested.

Page 2 of 10

Name	: Mr. UPPARA RAGHAVEND	RA	
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM	
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM	
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM	
Туре	: OP	Printed On : 30/01/2024 8:42 AM	
Ref. Dr	: MediWheel		

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
Blood Urea Nitrogen (BUN) (Serum/Urease UV/derived)	6.6	mg/dL	7.0 - 21
Creatinine (Serum/ <i>Modified Jaffe</i>)	0.71	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists, N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	5.07	mg/dL	3.5 - 7.2
Liver Function Test			
Bilirubin(Total) (Serum/DCA with ATCS)	0.45	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.21	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.24	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/ <i>Modified IFCC</i>)	21.74	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	41.77	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	34.07	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/ <i>Modified IFCC</i>)	73.9	U/L	53 - 128
Total Protein (Serum/Biuret)	7.05	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.52	gm/dl	3.5 - 5.2

(Serum/Bromocresol green)







The results pertain to sample tested.

Page 3 of 10

Name	: Mr. UPPARA RAGHAVEND	RA
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM
Туре	: OP	Printed On : 30/01/2024 8:42 AM
Ref. Dr	: MediWheel	

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
Globulin (Serum/Derived)	2.53	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived) <u>Lipid Profile</u>	1.79		1.1 - 2.2
Cholesterol Total (Serum/CHOD-PAP with ATCS)	165.42	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/ <i>GPO-PAP with ATCS</i>)	69.29	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the õusualö" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	43.18	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	108.3	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >=190
VLDL Cholesterol (Serum/Calculated)	13.9	mg/dL	< 30
			Dr Anusha K.S Sr.Consultant Pathologist

回日初日。

The results pertain to sample tested.

Page 4 of 10

Reg No : 100674

APPROVED BY

Lab Address: BANGALORE REFERENCE LABORATORY-CLUMAX DIAGNOSTIC AND RESEARCH CENTRE PVT LTD. (A UNIT OF MEDALL HEALTHCARE PVT. LTD.),Old Nc66 & New No 1, 2nd Main Road, Bashyam Circle, Sankey Cross Road Malleswaram, Gayathri Devi Park Extension, Kodandarampura, Sadashiva Nagar, Bengaluru, Karnataka-560003,.

 ∇

MC-5606

Name	: Mr. UPPARA RAGHAVENDI	RA	
PID No.	: MED122431907	Register On	: 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On	: 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On	: 29/01/2024 4:11 PM
Туре	: OP	Printed On	: 30/01/2024 8:42 AM
Ref. Dr	: MediWheel		

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
Non HDL Cholesterol (Serum/ <i>Calculated</i>)	122.2	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/ <i>Calculated</i>)	3.8		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/ <i>Calculated</i>)	1.6		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.5		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/ <i>HPLC</i>)	5.1	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5
INTERPRETATION: If Diabetes - Good co	ntrol : 6.1 - 7.0 % , Fai	r control : 7.1 - 8.0 %,	Poor control $>= 8.1$ %
Estimated Average Glucose (Whole Blood)	99.67	mg/dL	
	ALC-5006		Dr Anusha.K.S Sr.Consultant Pathologist Reg No : 100674

The results pertain to sample tested.

Page 5 of 10

APPROVED BY

Lab Address: BANGALORE REFERENCE LABORATORY-CLUMAX DIAGNOSTIC AND RESEARCH CENTRE PVT LTD. (A UNIT OF MEDALL HEALTHCARE PVT. LTD.),Old Nc66 & New No 1, 2nd Main Road, Bashyam Circle, Sankey Cross Road Malleswaram, Gayathri Devi Park Extension, Kodandarampura, Sadashiva Nagar, Bengaluru, Karnataka-560003,.

MC-5606

Name	: Mr. UPPARA RAGHAVEND	RA		
PID No.	: MED122431907	Register On :	29/01/2024 9:35 AM	
SID No.	: 522401522	Collection On :	29/01/2024 9:50 AM	
Age / Sex	: 29 Year(s) / Male	Report On :	29/01/2024 4:11 PM	
Туре	: OP	Printed On :	30/01/2024 8:42 AM	
Ref. Dr	: MediWheel			
<u>Investiga</u>	tion	<u>Observed</u> <u>Value</u>	Unit	Biological Reference Interval
HbA1c pro control as c Conditions hypertrigly Conditions ingestion, F	compared to blood and urinary gluco that prolong RBC life span like Iron ceridemia,hyperbilirubinemia,Drugs	se determinations. deficiency anemia, V , Alcohol, Lead Poisce or chronic blood los	- Vitamin B12 & Folate defi oning, Asplenia can give f s, hemolytic anemia, Hem	much better indicator of long term glycemic iciency, falsely elevated HbA1C values. noglobinopathies, Splenomegaly,Vitamin E
T3 (Triiod (Serum/ECI	dothyronine) - Total LIA)	1.53	ng/ml	0.7 - 2.04
Comment	riation can be seen in other condition	n like pregnancy, dru	gs, nephrosis etc. In such	cases, Free T3 is recommended as it is
T4 (Tyroz (Serum/ECI	xine) - Total	9.94	µg/dl	4.2 - 12.0
INTERPR Comment	ETATION: : uriation can be seen in other condition	n like pregnancy, dru	gs, nephrosis etc. In such	cases, Free T4 is recommended as it is
TSH (Thy (Serum/ECI	yroid Stimulating Hormone)	0.255	µIU/mL	0.35 - 5.50
Reference n 1 st trimest 2 nd trimest 3 rd trimest (Indian Thy Comment 1.TSH refer	ter 0.2-3.0 ter : 0.3-3.0 yroid Society Guidelines) : rence range during pregnancy dependence			oncentration, race, Ethnicity and BMI. minimum between 6-10PM.The variation can

2. TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM. The variation can be of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.

3. Values&lt,0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.



The results pertain to sample tested.

Page 6 of 10

Name	: Mr. UPPARA RAGHAVEN	: Mr. UPPARA RAGHAVENDRA	
PID No.	: MED122431907	Register On	: 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On	: 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On	: 29/01/2024 4:11 PM
Туре	: OP	Printed On	: 30/01/2024 8:42 AM
Ref. Dr	: MediWheel		

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	Biological Reference Interval
<u>PHYSICAL EXAMINATION (URINE</u> <u>COMPLETE)</u>			
Colour (Urine)	Pale yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Volume(CLU) (Urine)	20		
<u>CHEMICAL EXAMINATION (URINE</u> <u>COMPLETE)</u>			
pH (Urine)	6.5		4.5 - 8.0
Specific Gravity (Urine)	1.009		1.002 - 1.035
Ketone (Urine)	Negative		Negative
Urobilinogen (Urine)	Normal		Normal
Blood (Urine)	Negative		Negative
Nitrite (Urine)	Negative		Negative
Bilirubin (Urine)	Negative		Negative
Protein (Urine)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative

(Urine/GOD - POD)







The results pertain to sample tested.

Page 7 of 10

Name	: Mr. UPPARA RAGHAVEND	RA
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM
Туре	: OP	Printed On : 30/01/2024 8:42 AM
Ref. Dr	: MediWheel	

Investigation	<u>Observed</u> <u>Value</u>	Unit	Biological Reference Interval
Leukocytes(CP) (Urine)	Negative		
<u>MICROSCOPIC EXAMINATION</u> (URINE COMPLETE)			
Pus Cells (Urine)	0-1	/hpf	NIL
Epithelial Cells (Urine)	0-1	/hpf	NIL
RBCs (Urine)	NIL	/HPF	NIL
Others (Urine)	NIL		

INTERPRETATION: Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL







The results pertain to sample tested.

Page 8 of 10

Name	: Mr. UPPARA RAGHAVENDRA		
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM	
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM	
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM	
Туре	: OP	Printed On : 30/01/2024 8:42 AM	
Ref. Dr	: MediWheel		

Investigation	<u>Observed</u> <u>Unit</u> <u>Value</u>	
BUN / Creatinine Ratio	9.3	

Biological Reference Interval 6.0 - 22.0





APPROVED BY

The results pertain to sample tested.

Page 9 of 10

Name	: Mr. UPPARA RAGHAVEND	RA
PID No.	: MED122431907	Register On : 29/01/2024 9:35 AM
SID No.	: 522401522	Collection On : 29/01/2024 9:50 AM
Age / Sex	: 29 Year(s) / Male	Report On : 29/01/2024 4:11 PM
Туре	: OP	Printed On : 30/01/2024 8:42 AM
Ref. Dr	: MediWheel	

Investigation

Observed Unit Value Biological Reference Interval

URINE ROUTINE





-- End of Report --

The results pertain to sample tested.

Name	MR.UPPARA RAGHAVENDRA	ID	MED122431907
Age & Gender	29Y/MALE	Visit Date	29 Jan 2024
Ref Doctor Name	MediWheel		-

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size (12.6 cm) and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER shows normal shape and has clear contents. Wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size and echopattern.

KIDNEYS

Right kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

Left kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

-	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	11.4	1.3
Left Kidney	11.2	1.5

URINARY BLADDER is minimally distended. No evidence of diverticula.

PROSTATE: Visualized prostate appears normal.

No evidence of ascites.

IMPRESSION:

• No significant abnormality detected.

DR. HEMANANDINI V.N CONSULTANT RADIOLOGIST Hn/Mi

Name	MR.UPPARA RAGHAVENDRA	ID	MED122431907
Age & Gender	29Y/MALE	Visit Date	29 Jan 2024
Ref Doctor Name	MediWheel		

Name	MR.UPPARA RAGHAVENDRA	ID	MED122431907
Age & Gender	29Y/MALE	Visit Date	29 Jan 2024
Ref Doctor Name	MediWheel	-	

2D ECHOCARDIOGRAPHIC STUDY

M-mode measurement:

AORTA	:	2.12	cms.
LEFT ATRIUM	:	2.94	cms.
AVS LEFT VENTRICLE	:	1.47	cms.
(DIASTOLE)	:	4.23	cms.
(SYSTOLE)	:	2.57	cms.
VENTRICULAR SEPTUM	:		
(DIASTOLE)	:	0.99	cms.
(SYSTOLE)	:	1.22	cms.
POSTERIOR WALL	:		
(DIASTOLE)	:	1.13	cms.
(SYSTOLE)	:	1.17	cms.
EDV	:	79	ml.
ESV	:	23	ml.
FRACTIONAL SHORTENING	:	39	%
EJECTION FRACTION	:	60	%
EPSS	:	***	cms.
RVID	:	1.80	cms.

DOPPLER MEASUREMENTS:

MITRAL VALVE:	E - 0.8 m/s	A - 0.6 m/s	NO MR.
AORTIC VALVE:	1.1 r	n/s	NO AR.
TRICUSPID VALVE: E -	0.4 m/s A - 0).3 m/s	NO TR.
PULMONARY VALVE:	0.8 r	n/s	NO PR.

Name	MR.UPPARA RAGHAVENDRA	ID	MED122431907
Age & Gender	29Y/MALE	Visit Date	29 Jan 2024
Ref Doctor Name	MediWheel		

2D ECHOCARDIOGRAPHY FINDINGS:

 Left Ventricle
 :
 Normal size, Normal systolic function.

: No regional wall motion abnormalities.

Left Atrium		:	Normal.
Right Ventricle	:	Norma	al.
Right Atrium		:	Normal.
Mitral Valve		:	Normal. No mitral valve prolapsed.
Aortic Valve		:	Normal.Trileaflet.
Tricuspid Valve		:	Normal.
Pulmonary Valve		:	Normal.
IAS		:	Intact.
IVS		:	Intact.
Pericardium		:	No pericardial effusion.

IMPRESSION:

• NORMAL SIZED CARDIAC CHAMBERS.

• NORMAL LV SYSTOLIC FUNCTION. EF: 60 %.

• NO REGIONAL WALL MOTION ABNORMALITIES.

• NORMAL VALVES.

• NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.

DR. YASHODA RAVI CONSULTANT CARDIOLOGIST

Name	MR.UPPARA RAGHAVENDRA	ID	MED122431907
Age & Gender	29Y/MALE	Visit Date	29 Jan 2024
Ref Doctor Name	MediWheel		

Name	Mr. UPPARA RAGHAVENDRA	Customer ID	MED122431907
Age & Gender	29Y/M	Visit Date	Jan 29 2024 9:35AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.

DR.S.SHWETHA., MDRD, CONSULTANT RADIOLOGIST

OPTICAL STORE Unique Collection Ph: 9611444957 Vyalikaval Main road No: 12 Lakshmi Nilava, Ground Floor. 2nd Main Road, Vyalikaval, Bengaluru Karnataka 560003
Name Uppara Raghovendra Ph No. 95422100 4
CHIEF COMPLAINTS RE / LE / BE DOV / Blurring / Eyeache / Eurning
Visual Activity: Visual
Color Vision: BE= Normal
Continue Some glosses RAVILLIMARH.L. Continue Some glosses RAVILLIMARH.L. COnsultanOMETRIST Reg. No. 051619



Patie		10 5	24.
Age	294 Male, Visit Number 5:	224	01 522
Sex	Corporate U	ed)	wheel

cms

kgs

/minute

mm of Hg

cms

cms

cms

GENERAL PHYSICAL EXAMINATION

Identification Mark :

Height: 177

Weight: C3-6

Pulse: 80

Blood Pressure : (20/20

: 26-68 BM

BMI INTERPRETATION Underweight = <18.5 Normal weight = 18.5–24.9 Overweight = 25–29.9

Chest :

Expiration :

Inspiration :

Abdomen Measurement :

Eves : 2 mp Throat :

RS: BIC NUBSD

PA: Sop. BI (8)

NON Ears : Neck nodes : Rolo palpable CVS: Sisre CNS: Contrion fall

No abnormality is detected. His / Her general physical examination is within normal limits.

NOTE : MEDICAL FIT FOR EMPLOYMENT YES / NO

Signature

Dr. RITESH RAJ, MBBS General Physician & Diabetologies KMC Reg. No: 85375 CI UMAX DIAGNOSTICS

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

