





Patient Name : Mr.MANCHALA SUDHAKAR

Age/Gender : 31 Y 1 M 18 D/M
UHID/MR No : CNIZ.0000115960

Visit ID : CNIZOPV171753

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 903784006118 Collected : 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:32PM

Received : 10/Jun/2023 01:32PM Reported : 10/Jun/2023 03:22PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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

	17.2	g/dL	13-17	Spectrophotometer
PCV	50.10	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.78	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.6	fL	83-101	Calculated
MCH	29.8	pg	27-32	Calculated
MCHC	34.4	g/dL	31.5-34.5	Calculated
R.D.W	13.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	3,910	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (E	DLC)			
NEUTROPHILS	47.9	%	40-80	Electrical Impedance
YMPHOCYTES	40	%	20-40	Electrical Impedance
EOSINOPHILS	2.6	% ,	1-6	Electrical Impedance
MONOCYTES	8.8	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	1872.89	Cells/cu.mm	2000-7000	Electrical Impedance
YMPHOCYTES	1564	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	101.66	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	344.08	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	27.37	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	252000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergre

RBC NORMOCYTIC NORMOCHROMIC

WBC - MILD LEUCOPENIA

PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD LEUCOPENIA

Page 1 of 12

SIN No:BED230133554

 $This \ test \ has \ been \ performed \ at \ Apollo \ Health \ \& \ Lifestyle \ Ltd, \ Global \ Reference \ Laboratory, Hyderabad$









: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID : CNIZ.0000115960 : CNIZOPV171753

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 903784006118

Collected

: 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:32PM

Reported : 10/Jun/2023 05:40PM

Status : Final Report

Sponsor Name : ARCOFEMI

: ARCOFEMI HEALTHCARE LIMITED

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

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD-EDTA					
BLOOD GROUP TYPE	В		Microplate technology		
Rh TYPE	Positive		Microplate technology		

Page 2 of 12



SIN No:BED230133554







: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID

: CNIZ.0000115960

: CNIZOPV171753

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: 903784006118

Collected

Status

: 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:11PM

Reported : 10/Jun/2023 05:58PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

GLUCOSE, FASTING, NAF PLASMA 98 **HEXOKINASE** mg/dL 70-100

Comment:

As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	80	mg/dL	70-140	HEXOKINASE

Result Rechecked

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

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.2	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	103	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7

Page 3 of 12









Patient Name : Mr.MANCHALA SUDHAKAR

Age/Gender : 31 Y 1 M 18 D/M UHID/MR No : CNIZ.0000115960

Visit ID : CNIZOPV171753

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 903784006118 Collected : 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:11PM Reported : 10/Jun/2023 05:58PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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

AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control







Patient Name : Mr.MANCHALA SUDHAKAR

Age/Gender : 31 Y 1 M 18 D/M UHID/MR No : CNIZ.0000115960 Visit ID : CNIZOPV171753

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 903784006118 Collected : 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:11PM Reported : 10/Jun/2023 05:58PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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

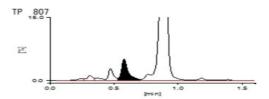
Chromatogram Report

HLC723G8 2023-06-10 15:44:11 V5. 28 1 ID EDT230053585 06100159 SL 0011 - 04 Sample No.

Patient ID Comment

> CALIB Y =1. 1210X + 0. 7280 Name Time Area 0. 24 A1A 5.66 0.4 0. 24 0. 31 0. 37 0. 47 0. 58 0. 8 0. 5 1. 7 12. 12 8. 31 A1B I A1C 25. 25 5. 2 93. 2 61. 07 A₀ 0.88 1422, 10 H-V0 H-V1 H-V2

Total Area 1534. 51 HbA1c 5. 2 % HbA1 6. 4 % HbF 0.5 %



10-06-2023 15:44:11 APOLLO

APOLLO DIAGNOSTICS GLOBAL BALANAGER

1/1

Page 5 of 12



SIN No:PLF01982927,PLP1337639,EDT230053585

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



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

Address: Plot no. 3 & 4, Survey no. 239 Qutbullapur mandal, R R Dist., Nizampet , Hyderabad, Telangana, India - 500072









Patient Name : Mr.MANCHALA SUDHAKAR

Age/Gender : 31 Y 1 M 18 D/M UHID/MR No : CNIZ.0000115960 Visit ID : CNIZOPV171753

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : 903784006118 Collected : 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:32PM Reported : 10/Jun/2023 02:45PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324				Y2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	167	mg/dL	<200	CHO-POD
TRIGLYCERIDES	85	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	42	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	125	mg/dL	<130	Calculated
LDL CHOLESTEROL	108	mg/dL	<100	Calculated
VLDL CHOLESTEROL	17	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.98		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		3	
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

Page 6 of 12

SIN No:SE04392216









: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID

: CNIZ.0000115960

Ref Doctor

: CNIZOPV171753

Emp/Auth/TPA ID

: Dr.SELF : 903784006118 Collected

: 10/Jun/2023 08:43AM

: 10/Jun/2023 02:45PM

Received : 10/Jun/2023 01:32PM

Reported

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY				
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324				Y2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.78	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.16	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.62	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	23	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	48.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.63	g/dL	6.6-8.3	Biuret
ALBUMIN	4.57	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.06	g/dL	2.0-3.5	Calculated
A/G RATIO	1.49		0.9-2.0	Calculated

Page 7 of 12



SIN No:SE04392216







: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID

: CNIZ.0000115960

Ref Doctor

: CNIZOPV171753

: 903784006118

Emp/Auth/TPA ID

: Dr.SELF

Collected

: 10/Jun/2023 08:43AM

: 10/Jun/2023 02:45PM

Received : 10/Jun/2023 01:32PM

Reported

: Final Report

Sponsor Name

Status

: ARCOFEMI HEALTHCARE LIMITED

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

RENAL PROFILE/KIDNEY FUNCTION T	EST (RFT/KFT) , SER	JM		
CREATININE	0.97	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	32.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	15.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.25	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.30	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.82	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	140	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)

Page 8 of 12



SIN No:SE04392216







: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID

: CNIZ.0000115960 : CNIZOPV171753

Ref Doctor

Test Name

Emp/Auth/TPA ID

: Dr.SELF : 903784006118 Collected

Status

: 10/Jun/2023 08:43AM

Received : 10/Jun/2023 01:32PM

Reported

: 10/Jun/2023 02:45PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY					
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - TMT - PAN INDIA - FY2324					
Test Name	Result	Unit	Rio Ref Range	Method	

GAMMA GLUTAMYL TRANSPEPTIDASE	19.00	U/L	<55	IFCC	
(GGT), SERUM			*		

Page 9 of 12



SIN No:SE04392216

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)









: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No

: CNIZ.0000115960

Visit ID

: CNIZOPV171753

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: 903784006118

Collected

: 10/Jun/2023 08:43AM

: 10/Jun/2023 01:25PM

Received Reported : 10/Jun/2023 04:53PM

Status

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	IMMUNOLOGY	1	
ARCOFEMI - MEDIWHEEL	- FULL BODY ANNU	JAL PLUS MALI	E - TMT - PAN INDIA - F	Y2324
Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE TOTAL (T3, T4, TSH),	SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	1.21	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	12.64	μg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.203	μIU/mL	0.34-5.60	CLIA

Comment:

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

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

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

Page 10 of 12

SIN No:SPL23084863

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



APOLLO CLINICS NETWORK







: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No Visit ID : CNIZ.0000115960 : CNIZOPV171753

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 903784006118

Collected

: 10/Jun/2023 08:43AM

Received : 10/Jun/2023 02:24PM

Reported

: 10/Jun/2023 03:27PM : Final Report

Sponsor Name

Status

: ARCOFEMI HEALTHCARE LIMITED

DI	EPARTMENT OF CLI	NICAL PATHOL	.OGY	
ARCOFEMI - MEDIWHEEL	- FULL BODY ANNU	JAL PLUS MALI	E - TMT - PAN INDIA - F	Y2324
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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT	AND MICROSCOPY			
PUS CELLS	3-4	/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

Page 11 of 12



SIN No:UR2125966









: Mr.MANCHALA SUDHAKAR

Age/Gender

: 31 Y 1 M 18 D/M

UHID/MR No

: CNIZ.0000115960

Visit ID

: CNIZOPV171753

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : 903784006118 Collected

: 10/Jun/2023 08:43AM

: 10/Jun/2023 02:24PM

Received Reported : 10/Jun/2023 06:50PM

Status

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT	OF CL	INICAL	PATHOL	.OGY
------------	-------	--------	---------------	------

Test Name Unit Result Bio. Ref. Range Method

URINE GLUCOSE(POST PRANDIAL) **NEGATIVE NEGATIVE** Dipstick

URINE GLUCOSE(FASTING) **NEGATIVE NEGATIVE** Dipstick

*** End Of Report ***

Result/s to Follow: PERIPHERAL SMEAR

M.B.B.S, MD Consultant Pathologist Dr.SRINIVAS N.S.NORI M.B.B.S,M.D(PATHOLOGY) CONSULTANT PATHOLOGIST M.B.B.S, M.D(Pathology) Consultant Pathologist

Dr E.Maruthi Prasad MSc, PhD (Biochemistry) Consultant Biochemist

MBBS, MD(Pathology) Consultant Pathologist

Page 12 of 12

SIN No:UPP014795,UF008602



Patient Name : Mr. MANCHALA SUDHAKAR Age/Gender : 31 Y/M

UHID/MR No.

: CNIZ.0000115960

OP Visit No

: CNIZOPV171753

Sample Collected on

LRN#

: RAD2018477

Reported on Specimen

: 12-06-2023 09:27

Ref Doctor : SELF

Emp/Auth/TPA ID

: 903784006118

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

Dr. P SATISH KUMAR MBBS,DMRD

Radiology



: 11-06-2023 16:01

Patient Name : Mr. MANCHALA SUDHAKAR Age/Gender : 31 Y/M

UHID/MR No. : CNIZ.0000115960 **OP Visit No** : CNIZOPV171753

EKN# . RAD2010477 Specimen .

Emp/Auth/TPA ID : 903784006118

: SELF

Sample Collected on

Ref Doctor

DEPARTMENT OF RADIOLOGY

Reported on

ULTRASOUND - WHOLE ABDOMEN

<u>Liver</u> appears normal in size and echotexture. 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.

No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

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

No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys:

Right kidney: 99 x 49 mm

Left kidney: 105 x 45 mm

appear normal in size, shape and echopattern. Cortical thickness and

CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

<u>Urinary Bladder</u> is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

<u>Prostate</u>: Volume- 16 cc , is normal in size and echo texture. No evidence of necrosis/calcification seen.

IMPRESSION:-

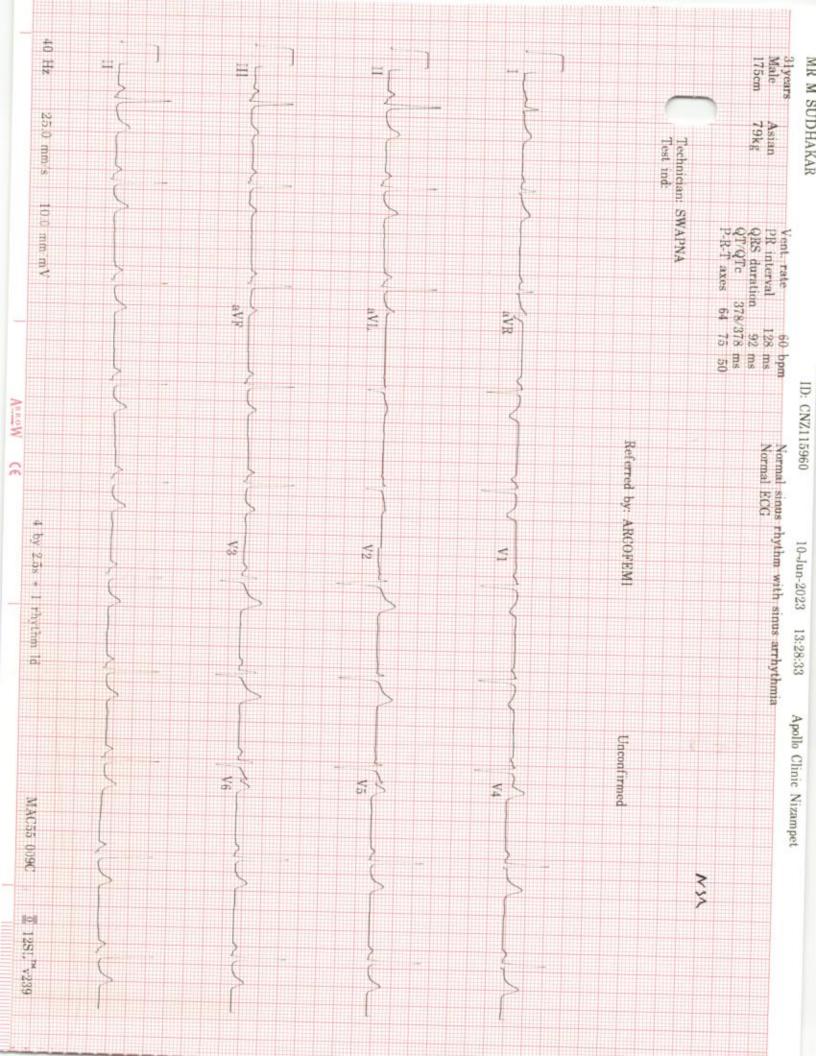
No significant abnormality detected.

Suggest - clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. P SATISH KUMAR MBBS,DMRD

Radiology







: Mr. MANCHALA SUDHAKAR

UHID Reported By:

: CNIZ.0000115960 : Dr. A RAVINDRA

Referred By

OP Visit No

Conducted Date

: CNIZOPV171753 : 11-06-2023 08:06

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.

2. Heart rate is 60beats per minutes.

3. No pathological Q wave or S-T,T changes seen.

4. Normal P,Q,R,S,T waves and axis.

5. No evidence of chamber, hypertrophy or enlargement see

Impression:

NORMAL SINUS RHYTHM

---- END OF THE REPORT ----

Dr. A RAVINDRA

Name:

Mr. MANCHALA SUDHAKAR

Age/Gender:

31 Y/M

Address:

HYD

Location:

HYDERABAD, TELANGANA

Doctor:

Department:

GENERAL

Rate Plan:

NIZAMPET_06042023

Sponsor:

ARCOFEMI HEALTHCARE LIMITED

Vitals:

Temp Height Weight Percentage Body Visceral Waist Waist Hip Resp Pulse B.P Waist (cms) (cms) & Hip Ratio Date Fat Level Age BMI Circum User (cms) (Kgs) (Beats/min) (mmHg) (Rate/min) (F) (%) (%) (Years) (cms) 140/90 10-06-2023 175 % 26.06 86 cms Years 0.89 AHLL09792 Rate/min cms 15:58 Beats/min mmHg cms cms

MR No: Visit ID: CNIZ.0000115960 CNIZOPV171753 10-06-2023 08:40

Visit Date:

Discharge Date: Referred By:

SELF

TABULAR SUMMARY REPORT

	ALANTE DOUGH	N. J.V.					Toolly Clarical Vision and		77.1	
				Unconfirmed	Un				WADNA	Tochnician: SWAPNA
				/	,					
				<i>'</i>)			/		
				3116	Nece 1125					
								0		
	125		104	15.	X,X	, 5 2	3:22	180		RECOVERY
	211	120/90	176	35 C)	146	ça #	0:42	STAGE 3		
	170	720/90	142	8	12.0	2.5	3:00	STAGE 2		
	192	06/07.	110	45.	0.0	-4	3:00	STAGE 1		EXERCISE
	X.	. 20/90	70	6	0.0	0.8	0-16	HYPERVENT		
	OK CH	20/90	- 1 	1.5	. 4		0:46	STANDING		
	38	120/90	ŭ.	<u>.</u>	M M	ż	1.05	SUPINE		PRETEST
5	RPP (x100)	BP (mmHg)	HIR (bpm)	WorkLoad (METS)	Grade (%)	Speed (mph)	Time in Stage	Stage		Phase Name
								Test and	Test ind:	
								y- ARCOFEMI	Referred b	
					Comments:	ç				13:29:38
100hz	8.0METS		R attained	Max BP: 120/90 Maximum workload: Reason for Termination: Max HR attained	Max BP 120/90 Reason for Termin	××	Maie	s Asian 79kg	31 years 175cm	10-Jun-2023
10.0 mm/mV		ш	redicted 189		ax HK Libbpi	2 2			2	The Charleston

: Mr. MANCHALA SUDHAKAR

UHID

: CNIZ.0000115960

Conducted By: Referred By : Dr. A RAVINDRA : SELF Age

OP Visit No Conducted Date : 31 Y/M

: CNIZOPV171753 : 11-06-2023 09:14

CARDIOLOGY

CARDIAC STRESS TEST - (TMT)

Angina Pectoria:

NO

Previous MI:

NO

PTCA:

NO

CABG:

NO

HTN: NO

DM:

NO

Smoking:

NO

Obesity:

NO

Lipidemia:

NO

Resting ECG Supine:

60 BPM

Standing:

77 BPM

Protocol Used:

BRUCE

Monitoring Leads:

12 LEADS

Grade Achieved:

93%

% HR / METS:

8.0 METS

Reason for Terminating Test:

MAXIMUM HEART RATE ATTAINED

Total Exercise Time:

6.42

Symptoms and ECG Changes during Exercise: NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

0 mts:

NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

3 mts:

NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

6 mts:

NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

INTERPRETATION:

Rhythm: NORMAL

S.T. Segment : NORMAL

III Blood Pressure Response : NORMAL

IV Fitness Response : GOOD

Impression:

TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

---- END OF THE REPORT ----

Dr. A RAVINDRA



GLASS PRESCRIPTION

DATE:

10/6/23

UHID:

PATIENT NAME:

Calheter

AGE/ GENDER:

31

	UAVA	SPH	CYL	AXIS	ADD	BCVA
OD	010		pla	~0		NA
OS	66		plen	-9	-	40

COLOR VISION:

aband

INSTRUCTIONS:



CNIZZ. 115960

Your Apollo order has been confirmed

1 message

<noreply@apolloclinics.info>

To: priyankagone1@gmail.com

Thu, Jun 8, 2023 at 5:04 PM

Cc: nizampet@apolloclinic.com, yamini.k@apolloclinic.com, syamsunder.m@apollohl.com



Dear Manchala sudhakar .,

Namaste Team.

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at NIZAMPET clinic on 2023-06-10 at 07:45-07:50.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	IADOOFFILE

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
- 4. Please bring all your medical prescriptions and previous health medical records with
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

