

Name : Mr. P Gopal Krishna

Age: 59 Y

UHID: CINR.0000121150

Address : blore

Sex: M



OP Number: CINROPV204757

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN  
INDIA OP AGREEMENT

Bill No : CINR-OCR-88655

Date : 13.09.2023 07:39

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
<del>1</del>	<del>URINE GLUCOSE(FASTING)</del>	
<del>2</del>	<del>GAMMA GLUTAMYL TRANSFERASE (GGT)</del>	
<del>3</del>	<del>PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)</del>	
<del>4</del>	<del>HbA1c, GLYCATED HEMOGLOBIN</del>	
<del>5</del>	<del>2 D ECHO</del> (E) Today Night - 7:30 AM	
<del>6</del>	<del>LIVER FUNCTION TEST (LFT)</del>	
<del>7</del>	<del>X-RAY CHEST PA</del> (E)	
<del>8</del>	<del>GLUCOSE, FASTING</del>	
<del>9</del>	<del>HEMOGRAM + PERIPHERAL SMEAR</del>	
<del>10</del>	<del>ENT CONSULTATION</del>	
<del>11</del>	<del>FITNESS BY GENERAL PHYSICIAN</del>	
<del>12</del>	<del>DIET CONSULTATION</del>	
<del>13</del>	<del>COMPLETE URINE EXAMINATION</del>	
<del>14</del>	<del>URINE GLUCOSE(POST PRANDIAL)</del>	
<del>15</del>	<del>PERIPHERAL SMEAR</del>	
<del>16</del>	<del>ECG</del>	
<del>17</del>	<del>BLOOD GROUP ABO AND RH FACTOR</del>	
<del>18</del>	<del>LIPID PROFILE</del>	
<del>19</del>	<del>BODY MASS INDEX (BMI)</del>	
<del>20</del>	<del>OPHTHAL BY GENERAL PHYSICIAN</del>	
<del>21</del>	<del>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</del>	
<del>22</del>	<del>ULTRASOUND - WHOLE ABDOMEN</del>	
<del>23</del>	<del>THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)</del>	
<del>24</del>	<del>DENTAL CONSULTATION</del> (E)	
<del>25</del>	<del>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)</del> 11:00 - (E)	

physisio (E)

Date : 13-09-2023  
MR NO : CINR.0000121150

Department : GENERAL  
Doctor :

Name : Mr. P Gopal Krishna

Registration No :

Age/ Gender : 59 Y / Male

Qualification :

Consultation Timing: 07:38

Height : 172cm	Weight : 80.1kg	BMI : 27	Waist Circum :
Temp : 98.8	Pulse : 86bpm	Resp : 20bpm	B.P : 124/90mmHg

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

## OPHTHAL PRESCRIPTION

PATIENT NAME : Mr. p. Gopal Krishna.

DATE : 13/9/23

UHID NO : 12150

AGE : 54y

OPTOMETRIST NAME: Mr Gowtham M H

GENDER: M

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	- plano	-	-	6/6	+1.25	-1.00	160	6/6(P)
Add	+2.00	-	-	N/E	+2.00	-1.00	160	N/E

PD - RE: \_\_\_\_\_ LE: \_\_\_\_\_

Colour Vision: Normal (BE)

Remarks:

  
Apollo clinic Indiranagar

15.09.1963  
59 Years  
Male

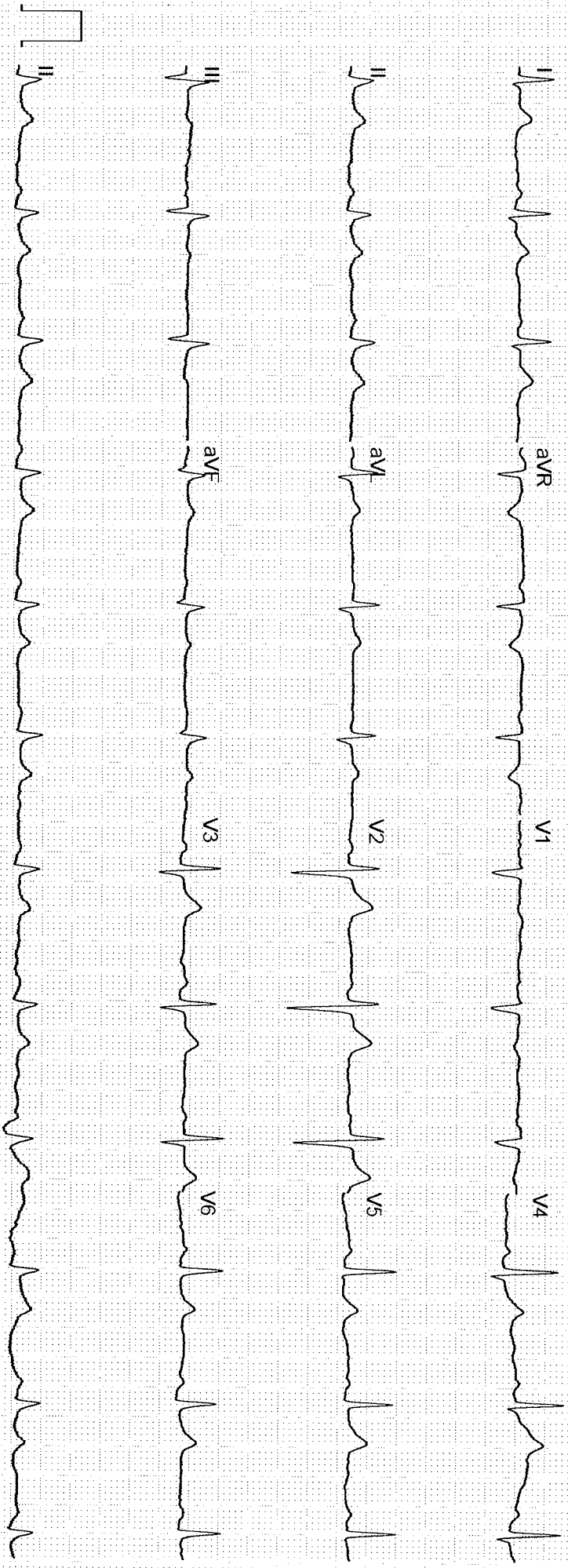
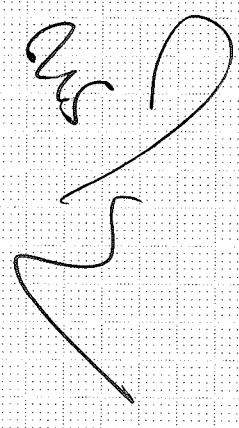
Location:  
Room:  
Order Number:  
Indication:

Medication 1:  
Medication 2:  
Medication 3:

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

68 bpm  
-- / -- mmHg

QRS : 74 ms  
QT / QTcBaz : 392 / 416 ms  
PR : 128 ms  
P : 58 ms  
RR / PP : 884 / 882 ms  
P / QRS / T : 6 / 34 / 50 degrees



**MIR P GOPAL KRISHNA,**  
 Patient ID: 121150  
 13.09.2023 Male 172 cm 80.1 kg  
 11:11:19am 59 yrs Indian  
 Meds:

Test Reason:  
 Medical History:

Ref. MD: Ordering MD:  
 Technician: Test Type:  
 Comment:



BRUCE: Exercise Time 06:56  
 Max HR: 148 bpm 91% of max predicted 161 bpm HR at rest: 71  
 Max BP: 169/99 mmHg Max RPP: 24336 mmHg\*bp  
 Maximum Workload: 9.80 METS  
 Max. ST: -1.75 mm, -0.36 mV/s in V6; EXERCISE STAGE 1 1:30  
 ST/HR index: 0.90  $\mu$ V/bpm  
 HR reserve used: 85 %  
 HR recovery: 34 bpm  
 VE recovery: 0 VE/min  
 ST/HR hysteresis: 0.000 mV  
 QRS duration: BASELINE: 88 ms, PEAK EX: 90 ms, REC: 90 ms  
**Reasons for Termination:** Target heart rate achieved

**Summary:**  
**Resting ECG:** normal. **Functional Capacity:** normal. **HR Response to Exercise:** appropriate. **BP Response to Exercise:** normal resting BP - appropriate response.  
**Chest Pain:** none. **Arrhythmias:** none. **ST Changes:** none. **Overall Impression:** Normal stress test.  
**Conclusion:** GOOD EFFORT TOLERANCE  
 NORMAL HR AND BP RESPONSE  
 NO ANGINA AND ARRHYTHMIA DURING TEST  
 STRESS TEST IS NEGATIVE FOR THE EXERCISE INDUCIBLE ISCHEMIA  
 Room:  
 Location: \* 0 \*

Phase Name	Stage Name	Time in Stage	Speed [mph]	Grade [%]	Workload [METs]	HR [bpm]	BP [mmHg]	RPP [mmHg*bp]	VE [l/min]	ST Level V6 [mm]	Comment
PRETEST	SUPINE	00:23	0.00	0.00	1.0	71			0	0.10	
	STANDING	00:04	0.00	0.00	1.0	70			0	0.10	
	HYPERV.	00:05	0.00	0.00	1.0	71			0	0.10	
	WARM-UP	00:09	0.00	0.00	1.0	72			0	0.20	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	115	120/80	13800	0	0.00	
	STAGE 2	03:00	2.50	12.00	7.0	133	145/80	19285	0	0.05	
	STAGE 3	00:57	3.40	14.00	9.8	148	21460	21460	0	-0.70	
RECOVERY		03:01	0.00	0.00	1.0	89	153/85	13617	0	-0.05	

MR P GOPAL KRISHNA,

Patient ID: 121150

13.09.2023

11:11:45am

Male 172 cm 80.1 kg

59 yrs Indian

Exercise Test / 12-Lead Report

PRETEST

SUPINE

00:21

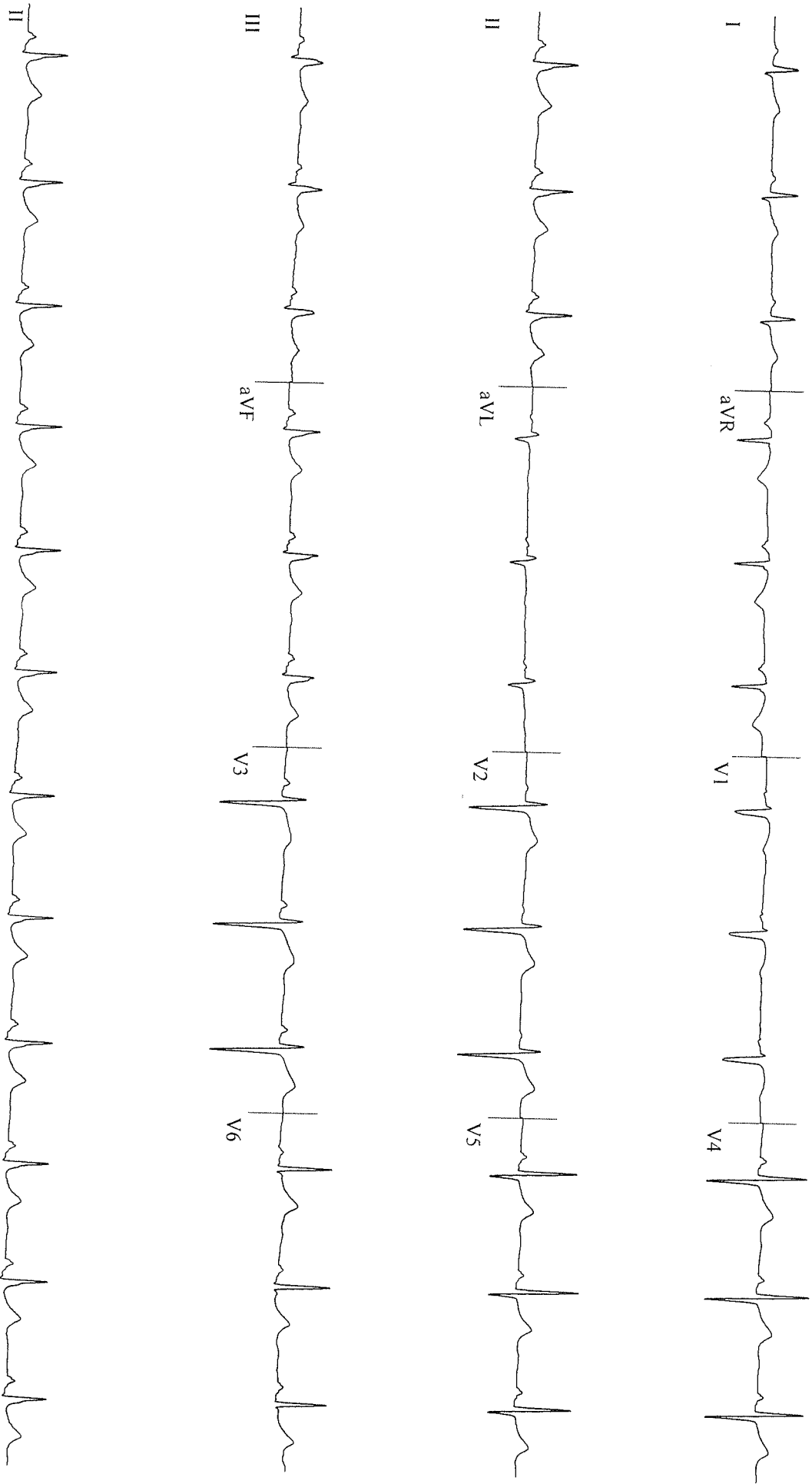
BRUCE

0.0 mph

0.0 %

APOLLO CLINIC

71 bpm



GE CardioSoft V7.0 (10)  
25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRR- HR(V3,V4)

Start of Test: 11:11:19am

MR P GOPAL KRISHNA,

Patient ID: 121150

13.09.2023 Male 172 cm 80.1 kg

11:12:01 am 59 yrs Indian

Exercise Test / 12-Lead Report

PRETEST

~~WARMUP~~

00:36

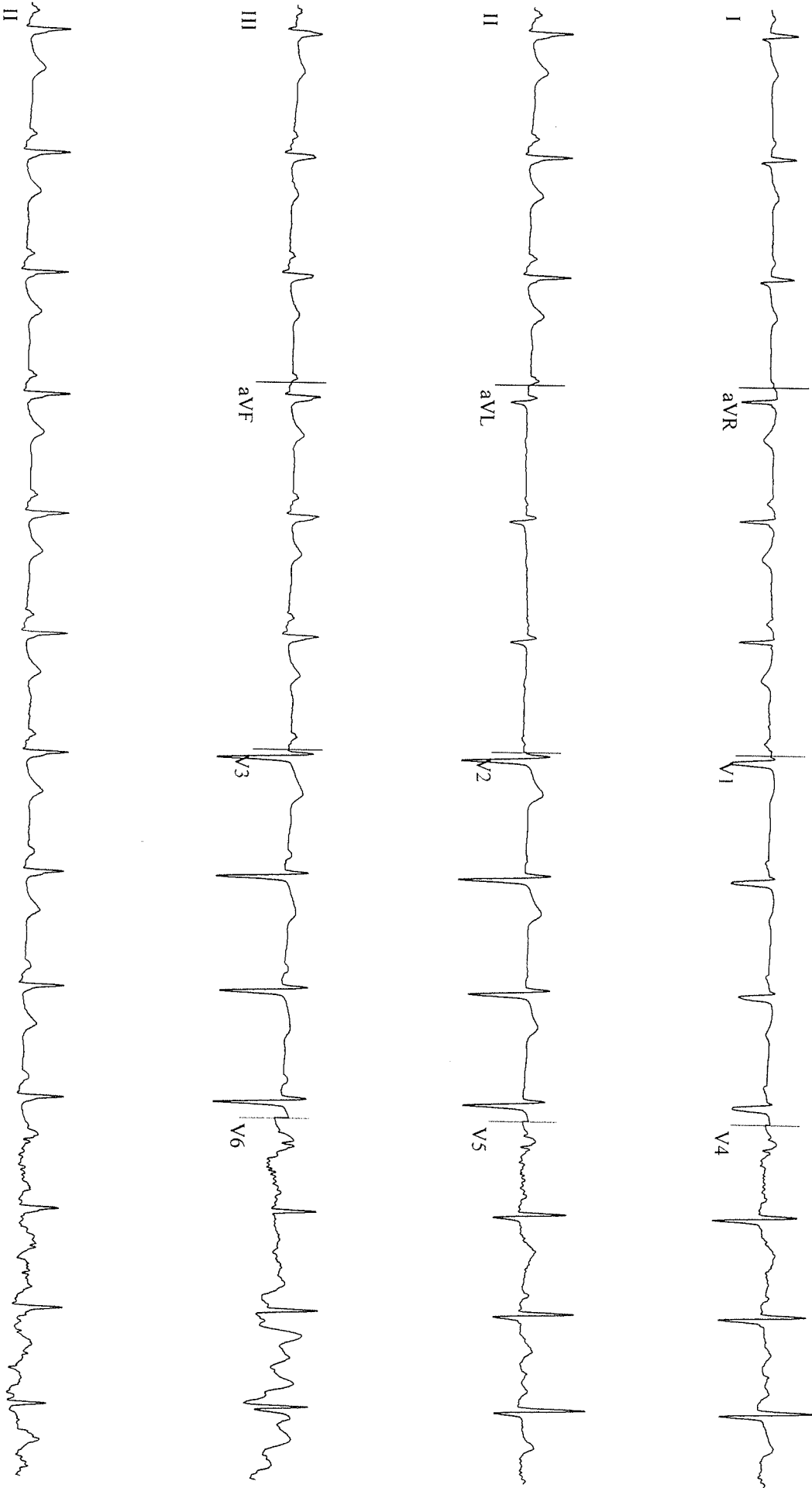
*Standing*

BRUCE

0.0 mph

0.0 %

APOLLO CLINIC



GE CardioSoft V7.0 (10)  
25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(V3,V4)

Start of Test: 11:11:19 am

MR P GOPAL KRISHNA,

Patient ID: 121150

13.09.2023

11:11:50am

Male 172 cm 80.1 kg  
59 yrs Indian

70 bpm

Exercise Test / 12-Lead Report

PRETEST

HYPERV.

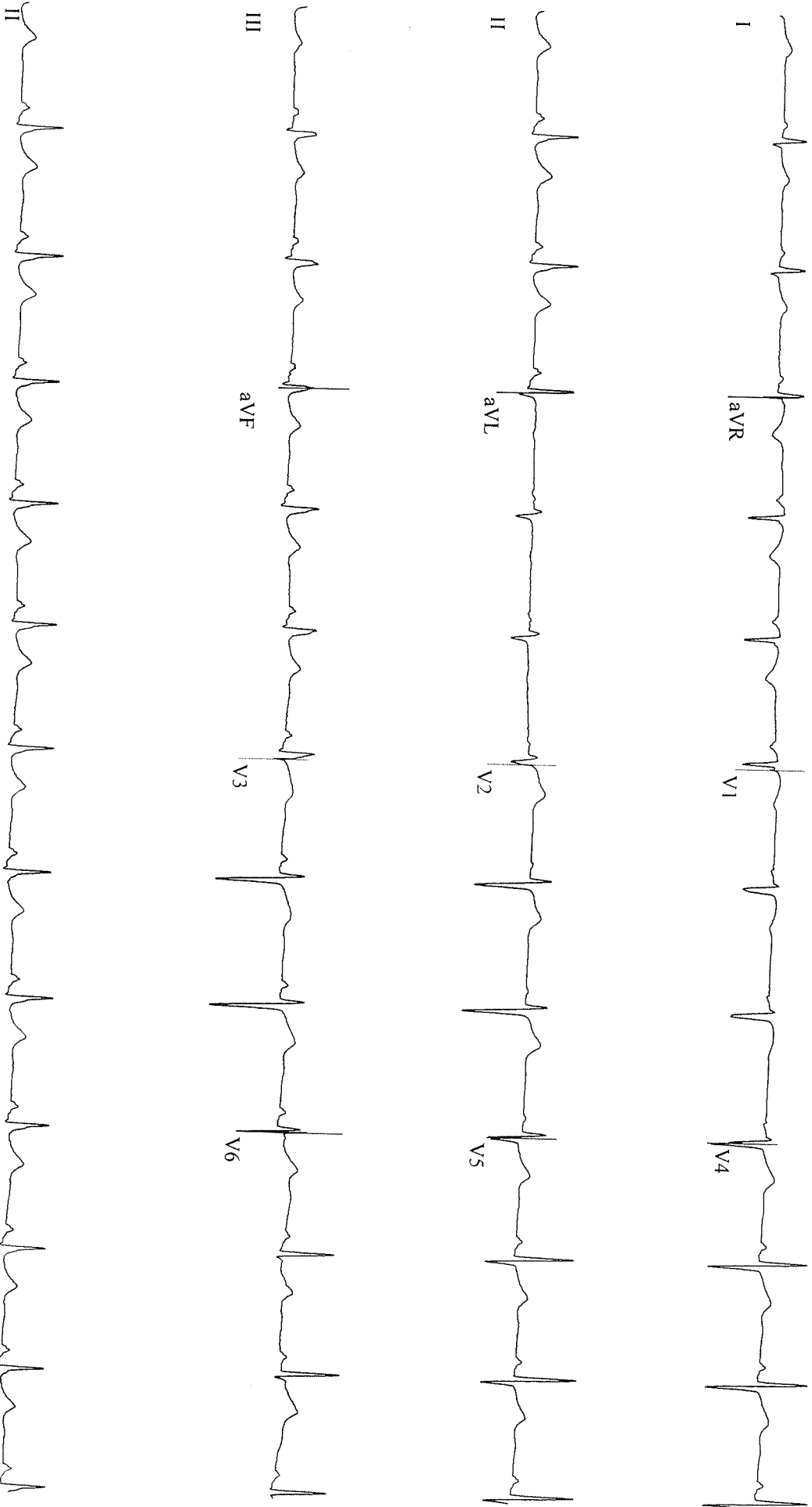
00:26

BRUCE

0.0 mph

0.0 %

APOLLO CLINIC



GE CardioSoft V7.0 (10)  
25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(V3,V4)

Start of Test: 11:11:19am



MR P GOPAL KRISHNA,

Patient ID: 121150

13.09.2023

11:11:56am

Male 172 cm 80.1 kg

59 yrs Indian

71 bpm

Exercise Test / 12-Lead Report

PRETEST

~~WARNING~~

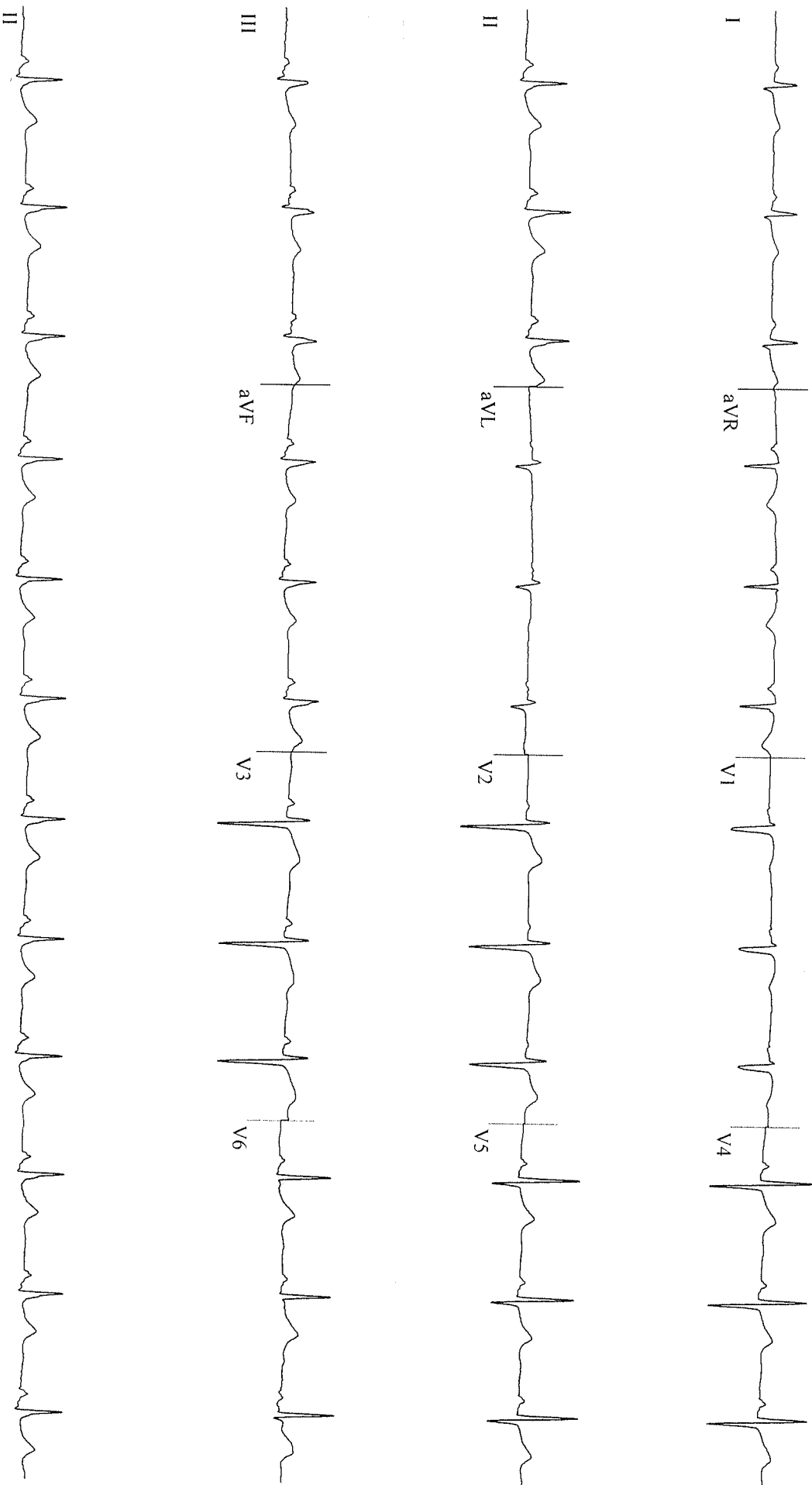
00:31

BRUCE

0.0 mph

0.0 %

APOLLO CLINIC



GE CardioSoft V7.0 (10)  
25 mm/s - 10 mm/mV 50 Hz - 0.05 - 40 Hz FRF - HR(V3, V4)

Start of Test: 11:11:19am

**M R P GOPAL KRISHNA,**

Patient ID: 121150

13.09.2023 Male 172 cm 80.1 kg

11:14:46am 59 yrs Indian

Exercise Test / Linked Medians

EXERCISE

STAGE 1

02:50

BRUCE

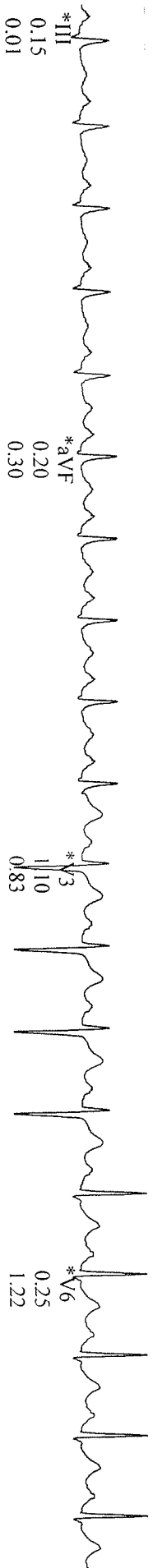
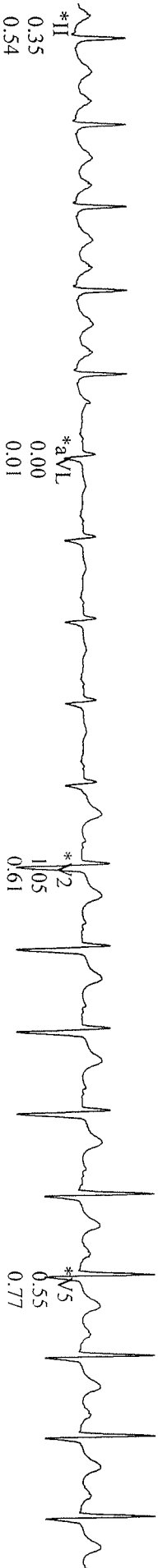
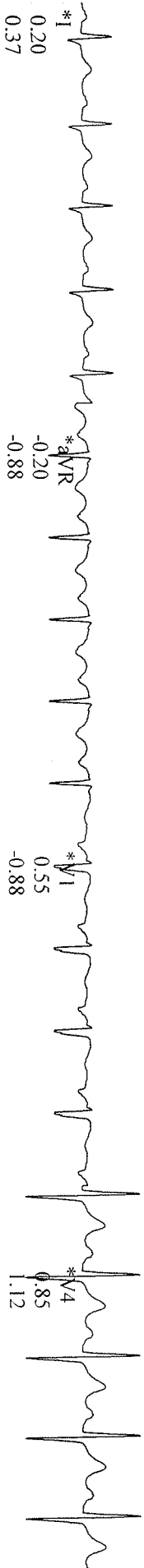
1.7 mph

10.0%

APOLLO CLINIC

114 bpm  
120/80 mmHg

Lead  
ST Level (mm)  
ST Slope (mV/s)



\*Computer Synthesized Rhythms

GE CardioSoft V7.0 (10)  
25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(V3,V4)

Start of Test: 11:11:19am

**MIR P GOPAL KRISHNA,**

Patient ID: 121150

13.09.2023

11:17:46am

Male 172 cm 80.1 kg

59 yrs Indian

Exercise Test / Linked Medians

EXERCISE

STAGE 2

05:50

134 bpm

145/80 mmHg

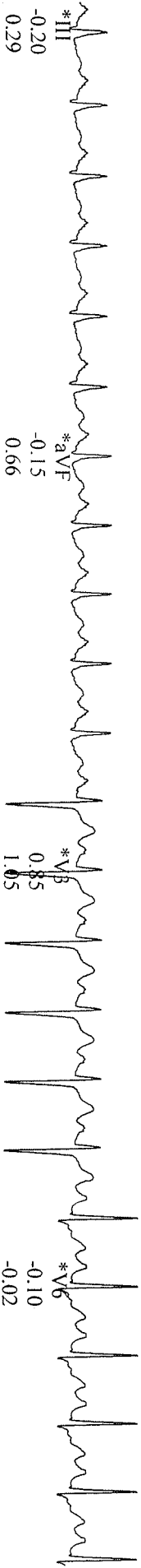
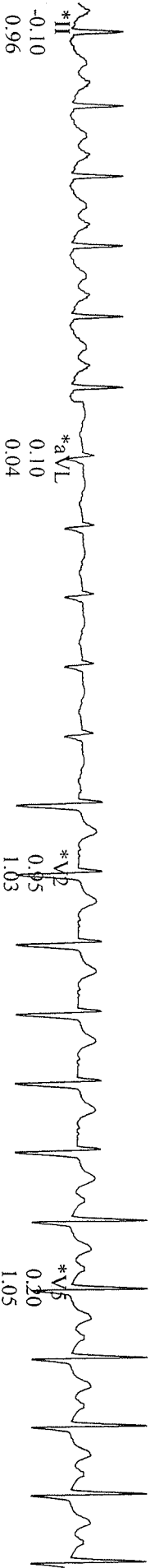
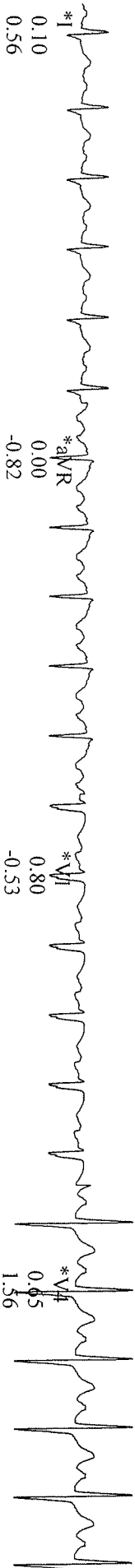
BRUCE

2.5 mph

12.0 %

APOLLO CLINIC

Lead  
ST Level (mm)  
ST Slope (mV/s)



\*Computer Synthesized Rhythms

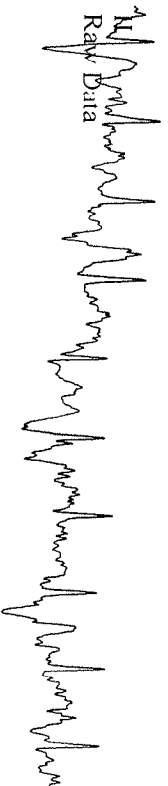
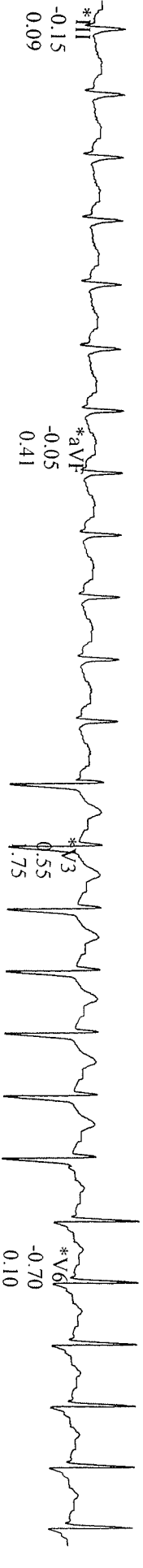
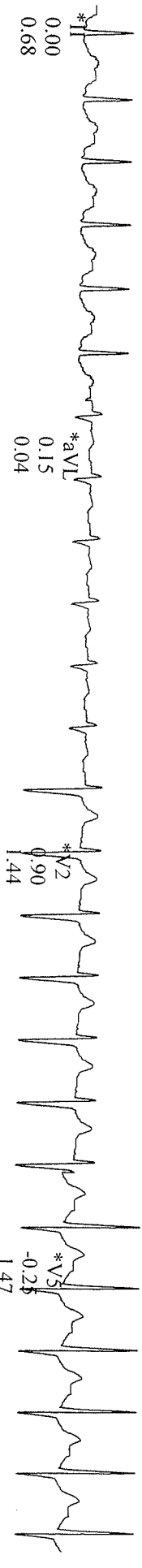
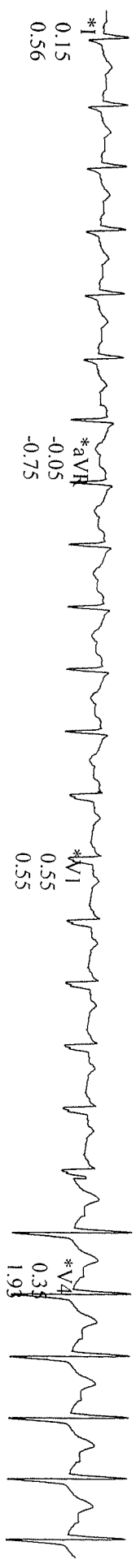
**MIR P GOPAL KRISHNA,**  
 Patient ID: 121150  
 13.09.2023 Male 172 cm 80.1 kg  
 11:18:53am 59 yrs Indian

148 bpm

Exercise Test / Linked Medians ( PEAK EXERCISE )  
 EXERCISE  
 STAGE 3  
 06:57  
 BRUCE  
 3.4 mph  
 14.0 %

APOLLO CLINIC

Lead  
 ST Level (mm)  
 ST Slope (mV/s)



GE CardioSoft V7.0 (10)  
 25 mm s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(V3, V4)

\*Computer Synthesized Rhythms

Start of Test: 11:11:19am

**MIR P GOPAL KRISHNA,**

Exercise Test / Linked Medians

APOLLO CLINIC

Patient ID: 121150

RECOVERY

BRUCE

13.09.2023

Male 172 cm 80.1 kg

114 bpm

#1

0.0 mph

11:19:52am

59 yrs Indian

169/99 mmHg

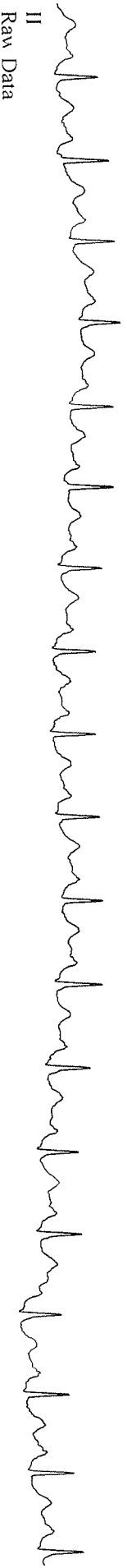
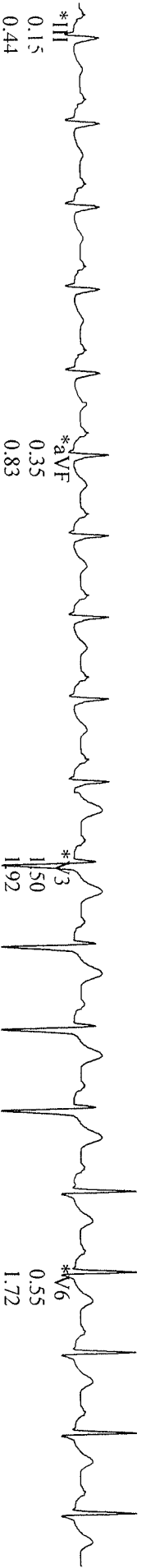
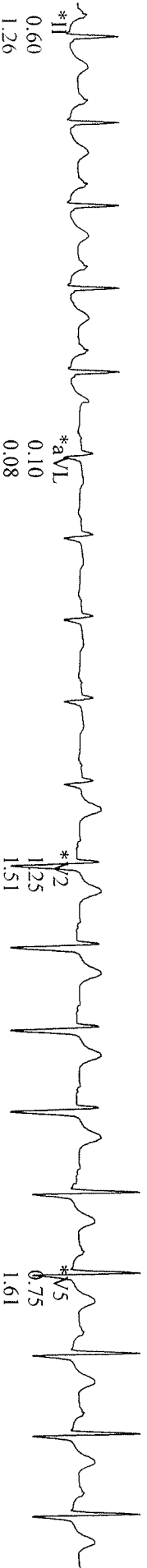
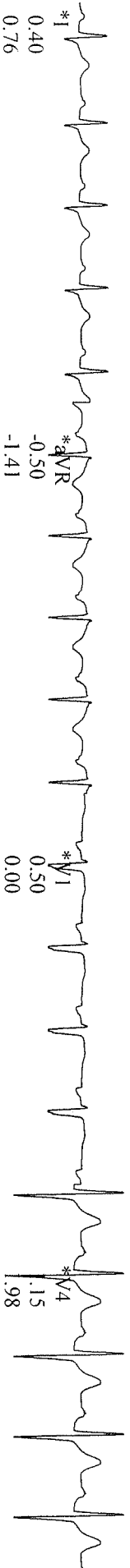
01:00

0.0 %

Lead

ST Level (mm)

ST Slope (mV/s)



\*Computer Synthesized Rhythms

MR P GOPAL KRISHNA,

Exercise Test / Linked Medians

APOLLO CLINIC

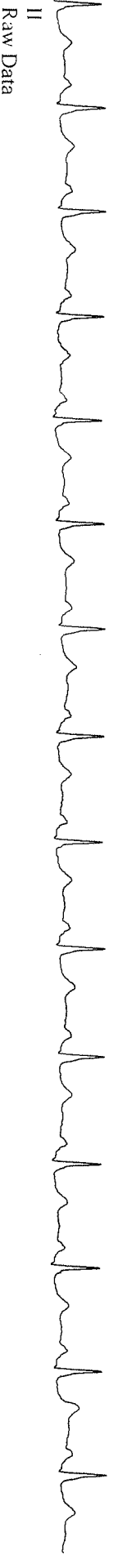
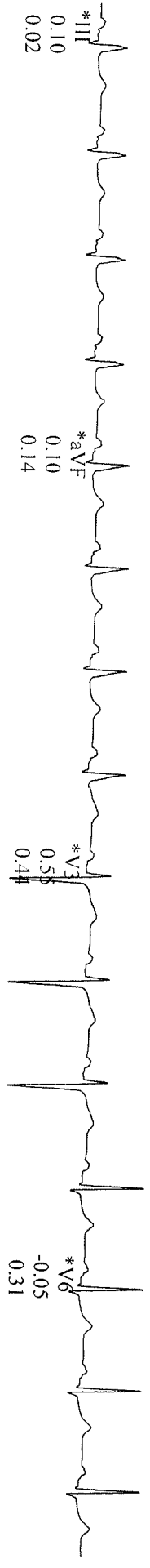
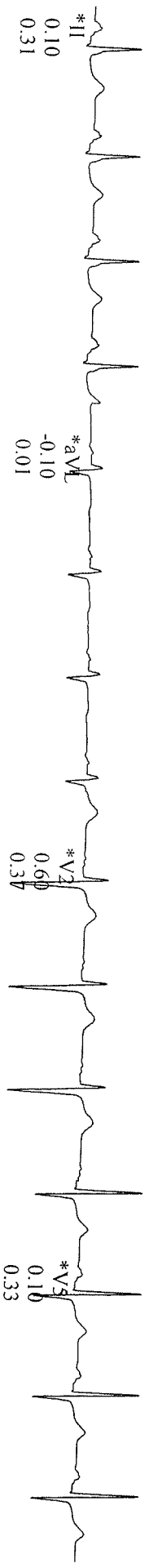
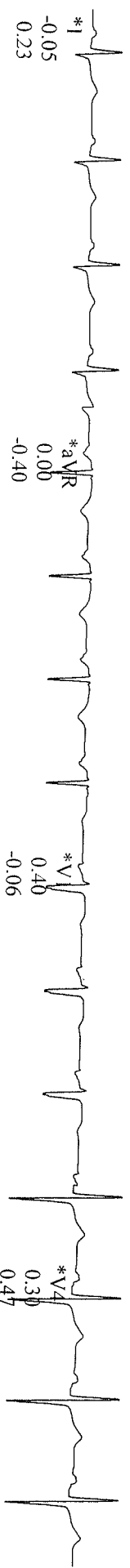
Patient ID: 121150  
13.09.2023 Male 172 cm 80.1 kg  
11:21:52am 59 yrs Indian

90 bpm  
153/85 mmHg

RECOVERY  
#1  
03:00

BRUCE  
0.0 mph  
0.0 %

Lead  
ST Level (mm)  
ST Slope (mV/s)



GE CardioSoft V7.0(10)  
25 mm/s 10 mm/mV 50 Hz 0.05 - 40 Hz FRF- HR(V3,V4)

\*Computer Synthesized Rhythms

Start of Test: 11:11:19am



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. P GOPAL KRISHNA
EC NO.	153947
DESIGNATION	HEAD CASHIER "E"_II
PLACE OF WORK	BANGALORE,PBB-BANGALORE
BIRTHDATE	15-09-1963
PROPOSED DATE OF HEALTH CHECKUP	13-09-2023
BOOKING REFERENCE NO.	23S153947100068812E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **07-09-2023** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

### SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
<b>General Tests</b>	<b>General Tests</b>
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation





ಭಾರತೀಯ ನಿಕಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ

ಭಾರತ ಸರ್ಕಾರ  
Unique Identification Authority of India  
Government of India

ನೋಂದಾವಣೆ ಕ್ರಮ ಸಂಖ್ಯೆ / Enrollment No.: 2017/60256/06278

To  
ಪಿ ಗೋಪಾಲ್ ಕೃಷ್ಣ  
P Gopal Krishna  
S/O: Purushotham Naidu  
#5 21st Cross, CMH Road  
Lakshmiipuram, Halasuru  
Bangalore North  
H.A.L II Stage  
Bangalore North Bangalore  
Karnataka 560008  
9945847565

03/07/2013

17237580



MN172375805FT



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

**2670 0175 9403**

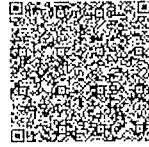
ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ



ಭಾರತ ಸರ್ಕಾರ  
Government of India



ಪಿ ಗೋಪಾಲ್ ಕೃಷ್ಣ  
P Gopal Krishna  
ಹುಟ್ಟಿದ ವರ್ಷ / Year of Birth : 1963  
ಪುರುಷ / Male



**2670 0175 9403**

ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

**Patient Name** : Mr. P Gopal Krishna

**Age/Gender** : 59 Y/M

**UHID/MR No.** : CINR.0000121150

**OP Visit No** : CINROPV204757

**Sample Collected on** :

**Reported on** : 13-09-2023 20:02

**LRN#** : RAD2097415

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 919945847565

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**DEPARTMENT OF RADIOLOGY**

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**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. RAMESH G**  
**MBBS DMRD**  
**RADIOLOGY**

<b>Patient Name</b>	: Mr. P Gopal Krishna	<b>Age/Gender</b>	: 59 Y/M
<b>UHID/MR No.</b>	: CINR.0000121150	<b>OP Visit No</b>	: CINROPV204757
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 13-09-2023 11:50
<b>LRN#</b>	: RAD2097415	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 919945847565		

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**DEPARTMENT OF RADIOLOGY**

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**ULTRASOUND - WHOLE ABDOMEN**

**LIVER:** Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

**GALLBLADDER:** Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

**SPLEEN:** Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

**PANCREAS:** Obscured by bowel gas. However, the visualized portion appear normal.

**KIDNEYS:** Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 9.2x4.4 cm.

Left kidney measures 9.9x5.1 cm.

**URINARY BLADDER:** Distended and appears normal. No evidence of abnormal wall thickening noted.

**PROSTATE:** Prostate is normal in size and echo-pattern.

No free fluid is seen.

**IMPRESSION:**

**NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.**

**Dr. RAMESH G**  
**MBBS DMRD**  
**RADIOLOGY**

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 11:41AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 03:38PM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919945847565	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	14.6	g/dL	13-17	Spectrophotometer
PCV	43.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.26	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	<b>82.4</b>	fL	83-101	Calculated
MCH	27.7	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>12,270</b>	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	<b>39.7</b>	%	40-80	Electrical Impedence
LYMPHOCYTES	<b>52</b>	%	20-40	Electrical Impedence
EOSINOPHILS	1.9	%	1-6	Electrical Impedence
MONOCYTES	6	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4871.19	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	<b>6380.4</b>	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	233.13	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	736.2	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	49.08	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	251000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westgren method
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PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are increased in total number with increase in lymphocytes.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH LYMPHOCYTIC LEUCOCYTOSIS

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UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 03:38PM
Visit ID : CINROPV204757	Status : Final Report
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**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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Kindly correlate clinically.



SIN No:BED230220925

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 11:41AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 03:27PM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919945847565	

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA**

BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 11:38AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 12:09PM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919945847565	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	111	mg/dL	70-100	HEXOKINASE
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**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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	201	mg/dL	70-140	HEXOKINASE
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**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	6.6	%		HPLC
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA</b>	143	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 American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- 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)



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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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SIN No:PLF02026644,PLP1368227,EDT230084139

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	134	mg/dL	<200	CHO-POD
TRIGLYCERIDES	57	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	42	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	92	mg/dL	<130	Calculated
LDL CHOLESTEROL	80.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	11.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.19		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 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 ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:SE04479989

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**LIVER FUNCTION TEST (LFT) , SERUM**

BILIRUBIN, TOTAL	0.72	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.57	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	77.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.60	g/dL	6.6-8.3	Biuret
ALBUMIN	4.05	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.55	g/dL	2.0-3.5	Calculated
A/G RATIO	1.59		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.79	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	19.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.2	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.65	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.00	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.27	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	<b>134</b>	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102	mmol/L	101–109	ISE (Indirect)



SIN No:SE04479989



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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	26.00	U/L	<55	IFCC



SIN No:SE04479989

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UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 12:34PM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.98	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	13.80	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.861	µIU/mL	0.34-5.60	CLIA

Comment:

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

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

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
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Visit ID : CINROPV204757	Status : Final Report
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**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name				Result	Unit	Bio. Ref. Range	Method
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes			
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma			



SIN No:SPL23130388



Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 11:44AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 12:24PM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b>	0.210	ng/mL	0-4	CLIA



SIN No:SPL23130388

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 10:53AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 11:54AM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919945847565	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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**COMPLETE URINE EXAMINATION (CUE) , URINE**

**PHYSICAL EXAMINATION**

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue

**BIOCHEMICAL EXAMINATION**

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

**CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY**

PUS CELLS	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2183048

Patient Name : Mr.P GOPAL KRISHNA	Collected : 13/Sep/2023 07:43AM
Age/Gender : 59 Y 11 M 28 D/M	Received : 13/Sep/2023 10:53AM
UHID/MR No : CINR.0000121150	Reported : 13/Sep/2023 11:53AM
Visit ID : CINROPV204757	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 919945847565	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	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

*Prasanna B.K.P*  
Dr PRASANNA B.K.P  
Md.Path.Pathologist

*Shetty*  
DR.SHIVARAJA SHETTY  
M.B.B.S,M.D(Biochemistry)  
CONSULTANT BIOCHEMIST

