

9
Female Male Pune
MRS. MANTRI AARTI AMIT 34 year Amit Shivprasad Mantri 35 year Apollo Clinic, WANOURI ra Maharashi Apollo Clinic, WANOURI ra
antri SURI
Sad Ma WANG
529 MRS. MANTRI AARTI AM 530 Amit Shivprasad Mantri 9:00 AM Apollo Clinic, WANOURI 9:00 AM Apollo Clinic, WANOURI
MRS. Amit S Apollo Apollo
AM AM
9:C
8 - bot 24
Health Annua Innual Plus - 10/2/2024
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Mediv
Arcofemi Mediwheel Full Body Health Annua bobE7529 Arcofemi Mediwheel Full Body Annual Plus - bobS7530 10/2/2024 9:00
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MALE/F
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14 Arco
oda.co
kofbar
14 , 15 , vjcamp@bankofbaroda.com
15 Vjcamp@bankofbaroda.com Vjcamp@bankofbaroda.com

.

Chandakaarti 3@gmail-com



Name : Mr. AMIT MANTRI

Age: 35 Y

Sex: M

Address: PUNE

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

UHID:CWAN.0000134543

OP Number: CWANOPV226136 Bill No: CWAN-OCR-50180 Date : 10.02.2024 09:41

		Department
Sno	Serive Type/ServiceName ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN IND	DIA - FY2324
1		
	I GAMMA GLUTAMYL TRANFERASE (GGT)	
	2 2 D ECHO	
	3 LIVER FUNCTION TEST (LFT)	
	4 GLUCOSE, FASTING	
	5 HEMOGRAM + PERIPHERAL SMEAR	
	6 DIET CONSULTATION >	
-	7 COMPLETE URINE EXAMINATION	
	8 URINE GLUCOSE(POST PRANDIAL)	
	9 PERIPHERAL SMEAR	
9	10 ECG	
	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
	DENTAL CONSULTATION	
	13 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 1.15 pm	
	14 URINE GLUCOSE(FASTING)	
	15 HbA1c, GLYCATED HEMOGLOBIN	
	16 X-RAY CHEST PA	
	17 ENT CONSULTATION X	
	18 FITNESS BY GENERAL PHYSICIAN	
	+9 BLOOD GROUP ABO AND RH FACTOR	
	20 LIPID PROFILE	The state of the s
	21 BODY MASS INDEX (BMI)	
	22 OPTHAL BY GENERAL PHYSICIAN >	AND LIE
	23 ULTRASOUND - WHOLE ABDOMEN	1/x 1 Coll
	24 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	1/3/ \211

wt - 63.7 Kg DENTAL I PHYSIO I AUDIOMERTY

FREE CONSULTATIONS

Ht - 172 cm

B.P- 110/80 mm/1+9.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

		Ti
•	Medically Fit	
•	Fit with restrictions/recommendations	
	Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
	1 Mild LRTD on neds for same. 2 Cholelothiceris	
	3	
	However the employee should follow the advice/medication that has been communicated to him/her.	
	Review after	
•	Currently Unfit.	

Medical Officer

The Apollo Clinic, (Location)
DR. MUSHFIYA BAHRAINWALA

This certificate is not meant for medico-legal purposes. 3
Reg. No.: 47527
Apollo Clinic Want varie

NIBM Road, Kondi wa.





Date

10-02-2024

Department

: GENERAL

MR NO

CWAN.0000134543

Doctor

Name

Mr. AMIT MANTRI

Registration No

Age/ Gender

35 Y / Male

Qualification

Consultation Timing: 09:39

leight: 172cm.	Weight: 63-7kg
	,

BMI:

Waist Circum:

Temp:

Pulse:

Resp:

General Examination / Allergies

K/c/o:- Asthma.

On Foracort inh.

2 Grid Vannes

Clinical Diagnosis & Management Plan

For AUC

HIO LRTD on neds for scene

Ollin Throat- Cha-

Chest- B/L Wheezing

Dr. Mushfiya Bahrainwala M.B.B.S.

Reg. No.: 47527

9763461253 PATHOLOGY Clinic 9121226368

COLLECTION

Follow up date:

Doctor Signature

Apollo Clinic,

"AMBA VATICA", Plot No. B. 1, Survey No. 16A/2, Wanowrie, Khondawa Khurd, Taluka Haveli, Pune, Pin: 411048 | Phone: (020) 2683 0291/95

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BOOK YOUR APPOINTMENT TODAY!

Whatsapp Number: 970 100 3333 Toll Number : 1860 500 7788

Website : www.apolloclinic.com

Approximent Results ORS ORS Sinus tachycardia OF Mushfiya Bahrainwala Dr. Mushfiya Bahrainwala Dr. Mushfiya Bahrainwala Dr. Mushfiya Bahrainwala Dr. Mushfiya Bahrainwala M.B.B.S. Rej. No.: 47527 P/ORS/T 85, 85/, 20 degrees III +90 II Skolow I 0 mV auF AUR AUR AUR U1 U2 U2 U5	AUL AUR
sourement Results: 110 ms	AUR
S	a +yo
110 ms	
Surement Results: < P Interpretation: 110 ms -90 < T TCB : 326 / 450 ms	0 0 0
surement Results: 10 ms < p Interpretation:	aUR aUL probably abnormal ECG
	-90 < T

Apollo Clinic

2D ECHOCARDIOGRAPHY & COLOR DOPPLER STUDY rtise. Closer to you.

Name: MR.AMIT MANTRI

Age/Sex:35/M

Date: 10/02/2024.

2D Echo:-

Cardiac chamber dimensions -Normal

Wall motion abnormalities - no RWMA

LV systolic function - Normal, LVEF -60%

LV diastolic function - No LV diastolic dysfunction

Cardiac valves -

Mitral valve -Normal, minimal mitral regurgitation.

Aortic valve - Three thin leaflets, no aortic regurgitation, Aortic PG -6 mm Hg

Tricuspid valve - minimal tricuspid regurgitation, No PAH

Pulmonary valve - normal

Septae (IAS/IVS) - intact

Clot/vegetation/Pericardial effusion - No

Great Arteries (Aorta/pulmonary artery) - Normal

IVC - Normal

Measurements -

Aorta	LA	IVS	PWD	LVIDd	LVIDs	LVEF
27	31	10	10	39	28	60%

Conclusion:-

Normal chamber dimensions.

No RWMA, normal LV systolic function, LVEF – 60%

No LV Diastolic dysfunction.

Normal PA pressure.

Dr. Bhushan Bari

DNB Medicine, DNB Cardiology

Consultant and Interventional Cardiologist

1

(CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com



PATIENT CASE SHEET

Investigation: RVG



Name: Amit montri	Age: 35 Gender: 1
Address: Pune	
UHID / Emp Id: 134543	
Ref. by Doctor	Treating Doctor
	Dr. Apunel
Past Dental History: HIO RCT Z 6.	
Past Medical History: NAD	
Chief Complaint(s): Regular donted. che	eup.

OPG

CBCT



: Mr. AMIT MANTRI

UHID

: CWAN.0000134543

Reported on

: 12-02-2024 10:14

Adm/Consult Doctor

Age

:35 Y M

OP Visit No

: CWANOPV226136

Printed on

: 12-02-2024 10:14

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.

CONCLUSION:

No obvious abnormality seen.

Printed on:12-02-2024 10:14

--- End of the Report---

Dr. SHAAZ AHMED KHAN

MBBS,DMRE

Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

TO BOOK AN APPOINTMENT

1860 500 7788



: Mr. AMIT MANTRI

UHID

: CWAN.0000134543

Reported on

: 10-02-2024 11:44

Adm/Consult Doctor

Age

: 35 Y M

OP Visit No

: CWANOPV226136

Printed on

: 10-02-2024 11:56

Ref Doctor

: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver 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 distended. Tiny 2 to 3 calculi noted in the gall bladder largest measuring about 3.6 mm. Wall thickness appears normal. No pericholecystic fluid noted. No evidence of focal lesion.

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 appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality.

Prostate is normal in size and echo texture. No evidence of necrosis/calcification.

No free fluid / abdominal lymphadenopathy.

IMPRESSION:

Cholelithiasis. No features of cholecystitis. No other significant abnormality detected. Suggest – clinical correlation.

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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Online appointments: www.apolloclinic.com





: Mr. AMIT MANTRI

UHID

: CWAN.0000134543

Reported on

: 10-02-2024 11:44

Adm/Consult Doctor

Age

: 35 Y M

OP Visit No

: CWANOPV226136

Printed on

: 10-02-2024 11:56

Ref Doctor

: SELF

(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.

Printed on: 10-02-2024 11:44

---End of the Report---

DE SATEVDER LAMBA Reg. No. MBBSZDMRE

Radiology

(CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com



Pending Test Form

, Amit Mantri	visiting from Company for health check.
UHID: - 134543. Date: -	10/02/2021
This is a consent form to inform you that	I do not wish to do this test.
Diet, orthal, ENT. ONS	4.
Or will be doing their test later on	
AL SHANDE	

9 Wanowrie

Signature: -



Patient Name : Mr. AMIT MANTRI Age/Gender : 35 Y/M

UHID/MR No. :

: CWAN.0000134543

OP Visit No

: CWANOPV226136

Sample Collected on

: RAD2232178

Reported on : 10-02-2024 11:56

Specimen :

Ref Doctor

LRN#

: SELF

Emp/Auth/TPA ID : 4010

: 401641048689

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

<u>Gall bladder</u> is distended. Tiny 2 to 3 calculi noted in the gall bladder largest measuring about 3.6 mm. Wall thickness appears normal. No pericholecystic fluid noted. No evidence of focal lesion.

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

<u>Pancreas</u> appears normal in echopattern. No focal mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

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Urinary Bladder is distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality.

Prostate is normal in size and echo texture. No evidence of necrosis/calcification.

No free fluid / abdominal lymphadenopathy.

IMPRESSION:

Cholelithiasis. No features of cholecystitis. No other 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.



Patient Name : Mr. AMIT MANTRI Age/Gender : 35 Y/M



Patient Name : Mr. AMIT MANTRI Age/Gender : 35 Y/M

UHID/MR No.

: CWAN.0000134543

Sample Collected on

Emp/Auth/TPA ID

LRN#

: RAD2232178

Ref Doctor : SELF

: 401641048689

OP Visit No Reported on : CWANOPV226136 : 12-02-2024 10:14

Specimen

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. SHAAZ AHMED KHAN MBBS,DMRE Radiology







: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID : CWAN.0000134543

5.66

: CWANOPV226136

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

: 401641048689

Collected
Certificate No: MR668ived

: 10/Feb/2024 09:57AM

: 10/Feb/2024 11:43AM : 10/Feb/2024 01:01PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC's Anisocytosis+, Few Macrocytes, WBC's normal in number and morphology, Platelets Adequate
No Abnormal cells/hemoparasite seen.

Page 1 of 15



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:BED240033683







: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID

: CWAN.0000134543

Ref Doctor Emp/Auth/TPA ID

: CWANOPV226136

: Dr.SELF : 401641048689 Certificate No:

: 10/Feb/2024 09:57AM Collected

MRééêïved : 10/Feb/2024 11:43AM : 10/Feb/2024 01:01PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
IEMOGRAM, WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.6	g/dL	13-17	Spectrophotometer
PCV	39.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	3.61	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	109.9	fL	83-101	Calculated
MCH	37.8	pg	27-32	Calculated
MCHC	34.4	g/dL	31.5-34.5	Calculated
R.D.W	14.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,710	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)		W)	
NEUTROPHILS	58.9	%	40-80	Electrical Impedance
LYMPHOCYTES	31.3	%	20-40	Electrical Impedance
EOSINOPHILS	1	%	1-6	Electrical Impedance
MONOCYTES	8.5	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5719.19	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3039.23	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	97.1	Cells/cu.mm	20-500	Calculated
MONOCYTES	825.35	Cells/cu.mm	200-1000	Calculated
BASOPHILS	29.13	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	396000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	4	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC's Anisocytosis+, Few Macrocytes,

WBC's normal in number and morphology,

Platelets Adequate

No Abnormal cells/hemoparasite seen.

Page 2 of 15



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:BED240033683







Certificate No: MR 668 ved



Patient Name

: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID

: CWAN.0000134543

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF : 401641048689

: CWANOPV226136

: 10/Feb/2024 01:01PM Reported

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

: 10/Feb/2024 09:57AM

: 10/Feb/2024 11:43AM

DEPARTMENT OF HAEMATOLOGY

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

Page 3 of 15



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:BED240033683









: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID : CWAN.0000134543 : CWANOPV226136

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 401641048689

Collected
Certificate No: MR668ived

: 10/Feb/2024 09:57AM

: 10/Feb/2024 11:43AM

Reported Status : 10/Feb/2024 05:23PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDTA			
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 4 of 15



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:BED240033683









: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

: 401641048689

UHID/MR No Visit ID

: CWAN.0000134543

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

: CWANOPV226136

Certificate No: MReceived Reported : 10/Feb/2024 09:57AM

: 10/Feb/2024 12:07PM : 10/Feb/2024 12:50PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING, NAF PLASMA	94	mg/dL	70-100	HEXOKINASE

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:

- 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
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Page 5 of 15



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:PLF02103742





: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID

: CWAN.0000134543 : CWANOPV226136

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF : 401641048689 Collected

: 10/Feb/2024 01:14PM

Received

: 10/Feb/2024 07:33PM : 10/Feb/2024 07:55PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA	83	mg/dL	70-140	HEXOKINASE
(2 HR)				

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each

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.

Page 6 of 15

DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:PLP1417862







Patient Name

: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID

: CWAN.0000134543

Ref Doctor

: CWANOPV226136

Emp/Auth/TPA ID

: Dr.SELF : 401641048689 Collected

: 10/Feb/2024 09:57AM

: 10/Feb/2024 11:42AM

MRééeived Reported

Sponsor Name

: 10/Feb/2024 01:51PM

Status

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) ,	WHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	108	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.

- 1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- 2. 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 Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- 4. 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.
- 5. 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)

Page 7 of 15



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:EDT240014874







Patient Name

: Mr.AMIT MANTRI

Age/Gender UHID/MR No : 35 Y 8 M 0 D/M

Visit ID

: CWAN.0000134543 : CWANOPV226136

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 401641048689

Collected

: 10/Feb/2024 09:58AM

: 10/Feb/2024 11:54AM

Reported

MRéceived

: 10/Feb/2024 12:36PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method			
LIPID PROFILE, SERUM							
TOTAL CHOLESTEROL	101	mg/dL	<200	CHO-POD			
TRIGLYCERIDES	85	mg/dL	<150	GPO-POD			
HDL CHOLESTEROL	36	mg/dL	40-60	Enzymatic Immunoinhibition			
NON-HDL CHOLESTEROL	65	mg/dL	<130	Calculated			
LDL CHOLESTEROL	47.73	mg/dL	<100	Calculated			
VLDL CHOLESTEROL	17.04	mg/dL	<30	Calculated			
CHOL / HDL RATIO	2.78		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 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

Page 8 of 15



DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:SE04625271







Patient Name

: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID : CWAN.0000134543

Ref Doctor

: CWANOPV226136

Ref Doctor
Emp/Auth/TPA ID

: Dr.SELF

: 401641048689

Collected

: 10/Feb/2024 09:58AM

MReeeived : 10/Feb/2024 11:54AM

Reported Status : 10/Feb/2024 12:36PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
IVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.67	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.18	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	20.2	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.2	U/L	<50	IFCC
ALKALINE PHOSPHATASE	59.85	U/L	30-120	IFCC
PROTEIN, TOTAL	7.43	g/dL	6.6-8.3	Biuret
ALBUMIN	4.24	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.19	g/dL	2.0-3.5	Calculated
A/G RATIO	1.33		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

Common patterns seen:

1. Hepatocellular Injury:

- AST Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI .• Disproportionate increase in AST, ALT compared with ALP. Bilirubin may be elevated.
- AST: ALT (ratio) In case of hepatocellular injury AST: ALT > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.• ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.
- 3. Synthetic function impairment: Albumin- Liver disease reduces albumin levels. Correlation with PT (Prothrombin Time) helps.

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DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:SE04625271







: Mr.AMIT MANTRI

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT), SEF	RUM		-
CREATININE	0.91	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	28.43	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.29	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	8.67	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.14	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	140.26	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.8	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104.39	mmol/L	101–109	ISE (Indirect)

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DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:SE04625271







Patient Name

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL	20.79	U/L	<55	IFCC
TRANSPEPTIDASE (GGT), SERUM				

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DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:SE04625271







: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

UHID/MR No Visit ID

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: CWAN.0000134543

MRééeived Certificate No:

: 10/Feb/2024 09:57AM

: 10/Feb/2024 11:54AM : 10/Feb/2024 01:10PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH	, SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	0.78	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.65	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.214	μIU/mL	0.34-5.60	CLIA

Comment:

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	Т3	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	rimary 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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DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:SPL24022185

APOLLO CLINICS NETWORK







: Mr.AMIT MANTRI

Age/Gender UHID/MR No : 35 Y 8 M 0 D/M

Visit ID

: CWAN.0000134543 : CWANOPV226136

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 401641048689

Collected
Certificate No: MR668ived

: 10/Feb/2024 09:57AM

: 10/Feb/2024 02:18PM

Reported

: 10/Feb/2024 02:38PM

Status
Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - 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	<5.5		5-7.5	DOUBLE INDICATOR	
SP. GRAVITY	1.005		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	MODIFED EHRLICH REACTION	
BLOOD	NEGATIVE		NEGATIVE	Peroxidase	
NITRITE	NEGATIVE		NEGATIVE	Diazotization	
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE	
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Y			
PUS CELLS	2 - 3	/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	

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Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:UR2279643









: Mr.AMIT MANTRI

Age/Gender

: 35 Y 8 M 0 D/M

: 401641048689

UHID/MR No Visit ID

: CWAN.0000134543

Ref Doctor

: CWANOPV226136

Emp/Auth/TPA ID

: Dr.SELF

Collected Certificate No: MR 668 ved

: 10/Feb/2024 01:14PM

: 10/Feb/2024 07:49PM

Reported

: 10/Feb/2024 08:01PM

Status

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

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DR.Sanjay Ingle M.B.B.S,M.D(Pathology) Consultant Pathologist

SIN No:UPP016539







: Mr.AMIT MANTRI

Age/Gender UHID/MR No : 35 Y 8 M 0 D/M

Visit ID

: CWAN.0000134543

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

: CWANOPV226136

: Dr.SELF : 401641048689 Collected
Certificate No: MR668ived

: 10/Feb/2024 09:57AM

: 10/Feb/2024 02:18PM

Reported

: 10/Feb/2024 02:38PM

Status

Sponsor Name

: Final Report

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

Page 15 of 15



Dr Sneha Shah MBBS, MD (Pathology) Consultant Pathologist

SIN No:UF010531