## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

## of sanoth singh on oglag 2023

After reviewing the medical history and on clinical examination it has been found that he/she is

	Medically Fit	Tick
	Fit with restrictions/recommendations	
	Though following restrictions have been revealed, in my opinion, these are not impediments to the job. 1fatty. Une. (f/ 2.low.pleteld.comp. 3	
•	Review after	
٠	Review afterrecommended Unfit	
	Dr Medical Officer The Appllo Clinic Victor Naga MBBS. This certificate is not meant for medico-level purpose 287 Reg. No.::MCI-13/51948	

Apo	PITALS		Apol	lo Clinic tise. Closer to vou.
Date MR NO	: 09-09-2023 : CVIM.0000230046	Department Doctor	: GENERAL :	N.
Name	: Mr. Santosh Kumar Singh	Registration No Qualification	:	
Age/ Gender	: 45 Y / Male			

#### Consultation Timing: 09:48

Height: 16P	Weight: 7-2_	BMI :	Waist Circum : 98
Temp: 9691	Pulse : 88	Resp: (P	B.P: 20180

General Examination / Allergies Clinical Diagnosis & Management Plan History . No complaints SYSTEMIL . evs : NAD . CNS: . R1: Follow up date: **Doctor Signature Apollo Clinic, Viman Nagar** Nyati Millenium Premises, Cooperative Society Limited, Shop No. S1 & Stilt Floor, Whatsapp Number: 970 100 3333 Toll Number Building "C", Viman Nagar, Pin: 411014 | Phone: (020) 2663 4331/32/34

Website

: 1860 500 7788

: www.apolloclinic.com

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Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies Clinical Diagnosis & Management Plan History

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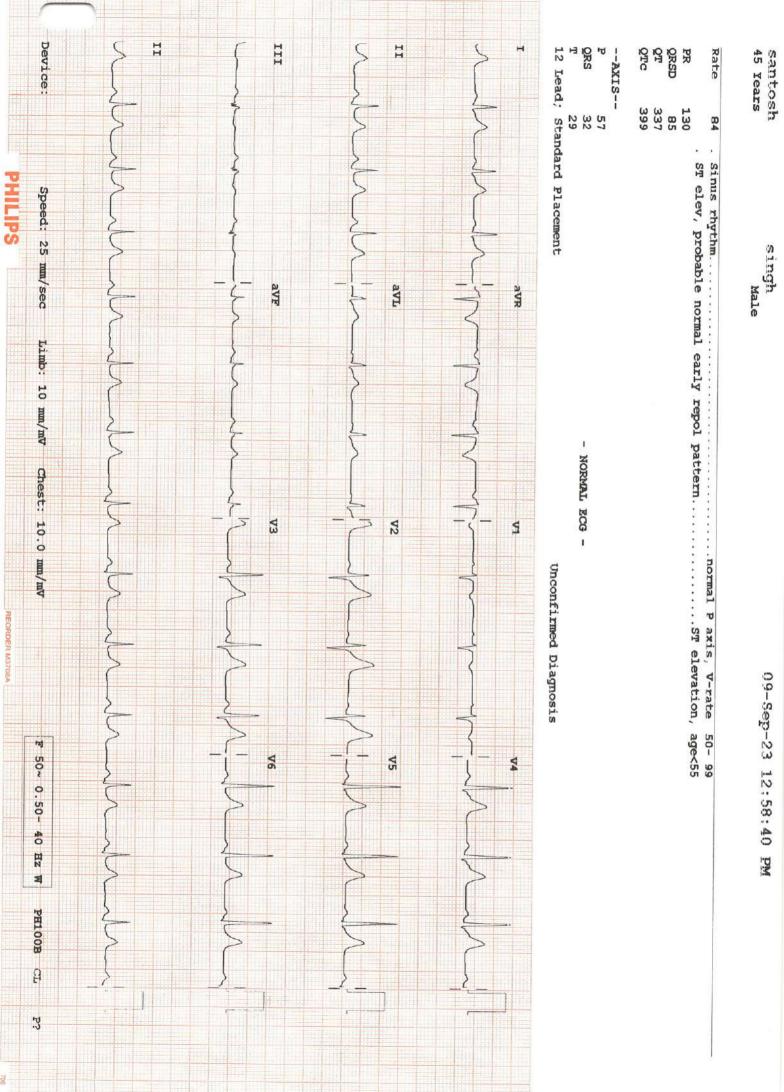
**Doctor Signature** 

Follow up date:

#### Apollo Clinic, Viman Nagar

Nyati Millenium Premises, Cooperative Society Limited, Shop No. S1 & Stilt Floor, Building "C", Viman Nagar, Pin: 411014 | Phone: (020) 2663 4331/32/34 Follow us MApolioClinicIndia CApolloClinics

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#### NAME : SANTOSH SINGH AGE : 45 Y/M

#### DATE: 11/09/2023

### ECHOCARDIOGRAPHY REPORT

MITRAL VALVE : has thin leaflets, normal subvalvular apparatus. No MR/MS

AORTIC VALVE : has thin leaflets, normal gradients across the valve. No AR/AS

PULMONARY VALVE : normal.

TRICUSPID VALVE: normal gradients. pulmonary hypertension.

Left Ventricle : LV is normal in size with normal wall thickness. No regional wall motion abnormality.

No LV diastolic dysfunction. Good LV systolic function. LVEF 65%.

Left Atrium : is normal and free of clots.

<u>**RA/RV**</u> : are normal

IAS/IVS : intact.

No clot/veg/ pericardial effusion.

#### MEASUREMENTS

AORTA	:25MM
LEFT ATRIUM	:30MM
IVSd	:10MM
PWd	10 MM
LVIDd	:43 MM
LVIDs	: 26 MM
LVEF	:65 %

#### **IMPRESSION:**

NORMAL CARDIAC VALVES. GOOD LV SYSTOLIC FUNCTION, LVEF 65%

> DR.PRAMOD NARKHEDE DNB(Medicine), DNB(Cardiology) Consultant Interventional Cardiologist Apollo clinic, Viman Nagar

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

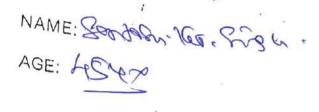
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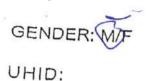




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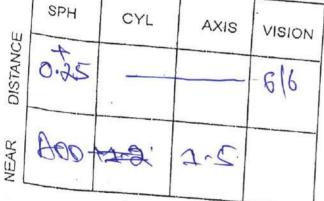
# POWER PRESCRIPTION





DATE:

RIGHT EYE



LEFT EYE SPH CYL AXIS VISION 25-0 616 20A +1.

INSTRUCTIONS:

22936

and the second second OR. M. D. ALAVANA MBBS, DO.MS. Consulting Eye Surgeon Reg. No. 2 36319

SIGNATURE

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CIN - V851 107N2000PLC046089) Regd. Office: 19 Bishop Gardens, R.A. Puram, Chennal 600 028, Tamil Nadu, India j Email ID: Info@apoliohi.com POLLO CLINICS NETWORK TELANGANA

iyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal) inline appointments: www.apolloclinic.com





Patient Name	: Mr. Santosh Kumar Singh	Age	: 45 Y M
UHID	: CVIM.0000230046		. 45 1 101
	. C VINI.0000230046	OP Visit No	: CVIMOPV560836
Reported on	: 09-09-2023 12:36		: 11-09-2023 10:18
Adm/Consult Doctor	:	19267 (2016) - 2017 - 1	
		Ref Doctor	: SELF

### DEPARTMENT OF RADIOLOGY

#### X-RAY CHEST PA

#### X-RAY CHEST PA

Trachea appears normal.

Both the lung fields are clear.

Cardiac shadows appear apparently normal.

Both domes of diaphragm appear normal.

Both costophrenic angles are clear.

Bony thoracic cage shows no deformity. Visualised bones appear normal.

Soft tissues appear normal.

Impression: Essentially Normal Study.

Printed on:09-09-2023 12:36

---End of the Report---

Preeti

Dr. PREETI P KATHE DMRE, MD, DNB Radiology

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Page 1 of 1



Patient Name	: Mr. Santosh Kumar Singh	Age	: 45 Y M
UHID	: CVIM.0000230046	OP Visit No	: CVIMOPV560836
Reported on	: 09-09-2023 12:42		: 11-09-2023 10:18
Adm/Consult Doctor	8		: SELF

#### DEPARTMENT OF RADIOLOGY

#### ULTRASOUND - WHOLE ABDOMEN

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

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

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

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

**Bowel loops and Retroperitoneum** appear normal. Aorta and IVC appear normal. No abnormal lymphadenopathy noted.

IMPRESSION:-Grade I fatty liver.

(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.

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Page 1 of 2



Patient Name	: Mr. Santosh Kumar Singh		Age	: 45 Y M
UHID	: CVIM.0000230046	2	OP Visit No	: CVIMOPV560836
Reported on	: 09-09-2023 12:42		Printed on	: 11-09-2023 10:18
Adm/Consult Doctor			Ref Doctor	: SELF

Printed on:09-09-2023 12:42

---End of the Report---

Preeti

Dr. PREETI P KATHE DMRE, MD, DNB Radiology

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÷	Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	-
	Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM	
	UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:49PM	. Oaking
	Visit ID	: CVIMOPV560836	Status	: Final Report	ST W.
	Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	1122 Mar.
	Emp/Auth/TPA ID	: 121221			er i

#### DEPARTMENT OF HAEMATOLOGY

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

#### PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC NORMOCYTIC NORMOCHROMIC WBC MILD LEUCOPENIA PLATELETS MILD THROMBOCYTOPENIA NO HEMOPARASITES SEEN



SIN No:BED230217729 ollo Health ang his fest that been performed 4854 bone 910 field field first yle ltd- Sadashiv Weti Perim Dinging fice 124 ya Society inst. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 ] Winapollohi.com | Email ID: enquiry@apollohi.com, Ph No: 040-4904 7777, Fax No: 4904 7744

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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	. 00/0	1.
		Collected	: 09/Sep/2023 10:20AM	N 198
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM	No.
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:49PM	
Visit ID	: CVIMOPV560836	Status	: Final Report	in i
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	- All
Emp/Auth/TPA ID	: 121221			

#### DEPARTMENT OF HAEMATOLOGY

A	RCOFEMI - MEDIWHEEL - FULL	BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	DIA - FY2324
	Test Name	Result	Unit	Bio. Ref. Range	Method

HAEMOGLOBIN	13.6	g/dL	13-17	Spectrophotometer
PCV	40.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.9	Million/cu.mm	4.5-5.5	Electrical Impedenc
MCV	83.4	fL	83-101	Calculated
MCH	27.8	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	15.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	3,600	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (	DLC)			
NEUTROPHILS	56.1	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedance
EOSINOPHILS	2.7	%	1-6	Electrical Impedance
MONOCYTES	10.5	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT			12	Lieuncai impedance
NEUTROPHILS	2019.6	Cells/cu.mm	2000-7000	Electrical lucus
LYMPHOCYTES	1080	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	97.2	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	378	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	25.2	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	135000	cells/cu.mm	150000-410000	Electrical Impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-15	Electrical impedence Modified Westergrer
ERIPHERAL SMEAR				
	Ċ			

PLATELETS MILD THROMBOCYTOPENIA

NO HEMOPARASITES SEEN





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Patient Name Age/Gender	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M	Collected Received	: 09/Sep/2023 10:20AM : 09/Sep/2023 12:52PM	1.1
UHID/MR No Visit ID Ref Doctor	: CVIM.0000230046 : CVIMOPV560836 : Dr.SELF	Reported Status	: 09/Sep/2023 03:11PM : Final Report	
Emp/Auth/TPA ID	: 121221	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	7

#### 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

## BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA

BLOOD GROUP TYPE	0	h4:
Rh TYPE		Microplate Hemagglutination
	Positive	Microplate
		Hemagglutination

Page 3 of 15



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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM	
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:13PM	
Visit ID	: CVIMOPV560836	Status	: Final Report	
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID	: 121221			
Emp/Auth/TPA ID	: 121221			

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324							
Test Name	Result	Unit	Bio. Ref. Range	Method			

GLUCOSE, FASTING , NAF PLASMA

mg/dL

HEXOKINASE

70-100

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 occasions.

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

97

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2	144	mg/dL	70-140	HEXOKINASE	
HR)		-			

#### **Comment:**

Telangana: Hyderabad (AS R

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

Page 4 of 15

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ma Feta) Karnataka: Bangalore /Ras

a Pradesh: Vizag (Scethan









Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	48 22.2
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM	
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Visit ID	: CVIMOPV560836	Status	: Final Report	
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID	: 121221	11		書

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324							
Test Name	Result	Unit	Bio. Ref. Range	Method			

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	114	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		2
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 c<sup>+</sup> 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%

a: Hyderabad (AS Ra

B: Homozygous Hemoglobinopathy.

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(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Page 5 of 15

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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:33PM	
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 05:33PM	. 7
Visit ID	: CVIMOPV560836	Status	: Final Report	
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	•=
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ARCOFEMI - MEDIWHEEL - FULL E	BODY ANNUAL PLU	S ABOVE 50Y N	ALE - 2D ECHO - PAN IN	IDIA - FY2324	1
Test Name	Result	Unit	Bio. Ref. Range	Method	

#### LIPID PROFILE, SERUM

TOTAL CHOLESTEROL	126	mg/dL	<200	CHO-POD
TRIGLYCERIDES	134	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	29	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	97	mg/dL	<130	Calculated
LDL CHOLESTEROL	70.17	mg/dL	<100	Calculated
VLDL CHOLESTEROL	26.76	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.35		0-4.97	Calculated

#### **Comment:**

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	<b>Borderline High</b>	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.

Page 6 of 15

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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID	: 121221			

DEPARTMENT OF BIOCHEMISTRY						
ARCOFEMI - MEDIWHEEL - FUL	L BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	IDIA - FY2324		
Test Name	Result	Unit	Bio. Ref. Range	Method		





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Telangena: Hyderalaad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallukunta | Nizampet | Manikonda | Uppal ) Andhra Pradezh: Vizag (Seeth Manael 19 Manael Print Mahamili Danamanaka (Sanama Parat) Marana (Milankala) Taulasalar (Banasal Amanasa) (Kotturan ya Managara atalka: Bangalore (Basevenagudi | Beliandur | Electronics City | Fraser Town | HSR Layour







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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	22.1
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:33PM	
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 05:33PM	
Visit ID	: CVIMOPV560836	Status	: Final Report	
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID	: 121221		AROUT EMITTEAL THOARE LIMITED	

	DEPARTMENT OF	- BIOCHEMIST	RY	
ARCOFEMI - MEDIWHEEL - FU	LL BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN	DIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

ALANINE AMINOTRANSFERASE (ALT/SGPT)	41.41	U/L	<50	Dual Wavelength IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	128.51	U/L	30-120	IFCC
PROTEIN, TOTAL	8.09	g/dL	6.6-8.3	Biuret
ALBUMIN	4.42	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.67	g/dL	2.0-3.5	Calculated
A/G RATIO	1.2		0.9-2.0	Calculated

Page 8 of 15



SIN No: SE04476818 ollo Health angh i fest was been performed 4954 bolio freshift bild & ifestyle ltd- Sadashiv 'DetH'Pentern Druginos free 1:34 ye Society c. w.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 APOLLO CLINICS NETWORK

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Patient Name Age/Gender UHID/MR No Visit ID Ref Doctor	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M : CVIM.0000230046 : CVIMOPV560836 : Dr.SELF	Collected Received Reported Status	: 09/Sep/2023 10:20AM : 09/Sep/2023 01:33PM : 09/Sep/2023 05:33PM : Final Report
Emp/Auth/TPA ID	: 121221	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT OF	BIOCHEMIST	RV	12
ARCOFEMI - MEDIWHEEL - FU Test Name	LL BODY ANNUAL PLU	S ABOVE FOX	MALE OD FOUR -	
Test Name		O ADOVE SUT	MALE - 2D ECHO - PAN IN	DIA - FY2324
. cot Hume	Result	Unit	Bio. Ref. Range	Method

ENAL PROFILE/KIDNEY FUNCTION	0.83			
UREA		mg/dL	0.72 – 1.18	Modified Jaffe, Kineti
BLOOD UREA NITROGEN	16.83	mg/dL	17-43	GLDH, Kinetic Assay
URIC ACID	7.9	mg/dL	8.0 - 23.0	Calculated
CALCIUM	7.76	mg/dL	3.5-7.2	Uricase PAP
	9.44	mg/dL	8.8-10.6	
PHOSPHORUS, INORGANIC	3.16	mg/dL	2.5-4.5	Arsenazo III Phosphomolybdate
SODIUM	100.15		1905(A) (0:55A)	Complex
POTASSIUM	139.45	mmol/L	136-146	ISE (Indirect)
CHLORIDE	4.2	mmol/L	3.5-5.1	ISE (Indirect)
	104.83	mmol/L	101-109	ISE (Indirect)

Page 9 of 15



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SIN No:SE04476818 Apollo Health and is the pression of the pr

ngana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallak

nta | Nizampet | Manikonda | Uppat ) Andhra Pradesh: Vizag (Seethanima Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur | Bellandur | Electronics City | Fraser Town | HSR Layout; Sakabat Tamilandur | Bellandur |







Age/Gender         : 45 Y 6 M 8 D/M           JHID/MR No         : CVIM.0000230046           /isit ID         : CVIMOPV560836           tef Doctor         : Dr.SELF           mp/Auth/TPA ID         : 121221	Received Reported Status Sponsor Name	: 09/Sep/2023 10:20AM : 09/Sep/2023 01:33PM : 09/Sep/2023 05:33PM : Final Report : ARCOFEMI HEALTHCARE LIMITED	
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10000000	DEPARTMENT OF	BIOCHEMIST	RY		÷
ARCOFEMI - MEDIWHEEL - FU Test Name	LL BODY ANNUAL PLU	S ABOVE 50Y	MALE - 2D ECHO - PAN IN		
Test Name	Result	Unit	Bio. Ref. Range	Method	

GAMMA GLUTAMYL TRANSPEPTIDASE	17 75				
(GGT), SERUM	17.75	U/L	<55	IFCC	1

Page 10 of 15



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SIN No:SE04476818 Apollo Health and Discertification Detrommed 443A joine Treation 1580 Lifestyle IId- Sadashiv Weth Perifern Province Respirative Society www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No:040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NET WURK Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal } Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraze Town | HSR Layout Dir Descri | D Abase | Kundabaseli | Kommangala | Salama Bandur | Bandur | Kananaka | Kananaka | Katuanaka | Katuunaka | Katuanaka | Katua







Patient Name	Mr SANTOSH KUMAR A		
Age/Gender UHID/MR No Visit ID Ref Doctor Emp/Auth/TPA ID	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M : CVIM.0000230046 : CVIMOPV560836 : Dr.SELF : 121221	Collected Received Reported Status Sponsor Name	: 09/Sep/2023 10:20AM : 09/Sep/2023 01:29PM : 09/Sep/2023 02:50PM : Final Report : ARCOFEMI HEALTHCARE LIMITED

## DEPARTMENT OF IMMUNOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE

L Test Name	Result	STE OFFE SOT	WALE - 2D ECHO - PAN IN	DIA - FY2324
	Result	Unit	Bio. Ref. Range	Method
TING				method

TRI-IODOTHYPONINE (T3, T4, TSH),	SERUM				
TRI-IODOTHYRONINE (T3, TOTAL) THYROXINE (T4, TOTAL) THYROID STIMULATING HORMONE (TSH)	1.15 8.57 2.980	ng/mL µg/dL µIU/mL	0.64-1.52 4.87-11.72 0.35-4.94	CMIA CMIA CMIA	

**Comment:** 

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per
First trimester	runer can Thyroid Association)
Second trimester	0.1 - 2.5
Third trimester	0.2 - 3.0
1. TSH is a glycoprotein hormone see	0.3 - 3.0
a grycoprotein hormone sec	reted by the set it is the

he 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 inactiv

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 &

more

TSH	<b>T3</b>	T4	FT4	Conditions
High	Low	Low	Low	
High	N	Ν	N	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism
Low	Ν	Ν	N	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy Subclinical Hyperthyroidism
Low	Low	Low		
Low	Ν	High	High	Central Hypothyroidism, Treatment with Hyperthyroidism Thyroiditis, Interfering Antibodies
N/Low	High	Ν	N	T3 Thyrotoxicosis New Hereing Antibodies
High	High	High	High	T3 Thyrotoxicosis, Non thyroidal causes Pituitary Adenoma; TSHoma/Thyrotropinoma

Page 11 of 15

spollo Health and Lifestyle Limited (CIN - UB5110TG2000PLC115819)

egd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | h•w.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744 langana: Hyderabad (AS Rao Nagar | Cha

Nyati Mill mited, Shop No. S1 & Still Floor, Building "C", man Nagar, Pune, Maharashtro, India - 411014 Viman N



da Nagar | Kondapur | Natlakunta | Niza oet | Manikonda | Uppal ) Andhra Pradesh: Viz

g (Seethamma Peta) Karnataka: I ectronics City | Frasor T







Patient Name Age/Gender UHID/MR No	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M
Visit ID Ref Doctor	: CVIM.0000230046 : CVIMOPV560836
Emp/Auth/TPA ID	: Dr.SELF

VIM.0000230046 VIMOPV560836 SELF 121221

Collected Received	: 09/Sep/2023 10:20AM
Reported	· 09/Sep/2023 01-29DM
Status Sponsor Name	: 09/Sep/2023 02:50PM : Final Report
	: ARCOFEMI HEALTHCARE LIMITED

## DEPARTMENT OF IMMUNO

ARCOFEMI - MEDIWH	DEPARTMENT OF IMMUN	CONTENT HEALTHCARE LIMITED
Test Name	Result	OLOGY 50Y MALE - 2D ECHO - PAN INDIA - FY2324 t Bio. Ref. Range
		Bio. Ref. Range Method
	2	

SIN No: SPL23128856 office: 1-10-60/62, Astroka Reginupathi Chambers, 5th Floor, Regemper, Hyderabad, Talangana - 500 u16 j apolluhi.com j Email 10: enquiry@apolluhi.com, Ph No: 0/10-4904 7777, Fax No: 4904 7744 Office: apervoore O'LERRES RELEVENN ann: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal ) Andhra Gradesh: Vizag (Scetha 19 Marca | Konst John II | Konstance of Contact Dovell Marcase (VA Monstle) Territordur Channel ( Annova V Monst

ra, India - 411014



Page 12 of 15







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UHID/MR No         : CVIM.0000230046           Visit ID         : CVIMOPV560836           Ref Doctor         : Dr.SELF           Emp/Auth/TPA ID         : 121221	Received       : 09/Sep/2023 01:29PM         Reported       : 09/Sep/2023 02:50PM         Status       : Final Report         Sponsor Name       : ARCOFEMI HEALTHCARE LIMITED
---	--

Test Name	Result		BOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
	Result	Unit	Bio. Ref. Range	Method	
TOTAL PROSTATIC SPECIFIC ANTIGEN	0.423				
(tPSA), SERUM	0.425	ng/mL	<4 C	MIA	

Page 13 of 15



SIN No: SPL23128856 Apollo Health and Lifestyle Itd- Sadashiv PeriliPeriem Province Groen and the Sadashiv PeriliPeriliPeriem Province Groen and the Sadashiv PeriliPeriliPeriliPeriem Province Groen and the Sadashiv PeriliPer in on Lo Clinics interviewen In maana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal ) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basa In 19 Nagar | Kondaba all | Karamanaala | Catanar Boodt Murger (MM Mobalis) Tamilandur Channal ( Anonana / Katuraurana | Maramania | T. Nagar | Katuraurana | K

anagudi | Bellandur | Electronics City | Fraser Town | HSR Layour (m)







Patient Name		n theate No: MC-5697	
Age/Gender UHID/MR No Visit ID Ref Doctor Emp/Auth/TPA ID	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M : CVIM.0000230046 : CVIMOPV560836 : Dr.SELF : 121221	Collected Received Reported Status Sponsor Name	: 09/Sep/2023 10:20AM : 09/Sep/2023 01:14PM : 09/Sep/2023 01:39PM : Final Report : ARCOFEMI HEALTHCARE LIMITED

	DEPARTMENT	
	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUE	
_	BLEDIWHEEL - FULL BODY ANNUAL DURING	
504 - E	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECULO	

	Result Unit		Pinale - 2D ECHO - PAN INDIA - FY232		
COMPLET			Bio. Ref. Ran	ge Method	
COMPLETE URINE EXAMINATION (CU	E) URINE				
EXAMINATION					
COLOUR					
TRANSPARENCY	PALE YELLOW		DALEN		
pH	CLEAR		PALE YELLOV	V Visual	
SP. GRAVITY	6.0		CLEAR	Visual	
BIOCHEMICAL EXAMINATION	1.005		5-7.5	DOUBLE INDICATO	
URINE PROTEIN	12.		1.002-1.030	Bromothymol Blue	
	NEGATIVE				
GLUCOSE			NEGATIVE	PROTEIN ERROR	
URINE BILIRUBIN	NEGATIVE	10 10 10 10 10 10 10 10 10 10 10 10 10 1	the second se	INDICATOR	
and the second	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE	
URINE KETONES (RANDOM)			NEGATIVE	AZO COUPLING	
	NEGATIVE		NEOAT	REACTION	
URCBILINOGEN	NODAL	4	NEGATIVE	SODIUM NITRO	
BLOOD	NORMAL		NORMAL	PRUSSIDE	
NITRITE	NEGATIVE		NORWAL	MODIFED EHRLICH	
	NEGATIVE		NEGATIVE	REACTION	
EUCOCYTE ESTERASE			NEGATIVE	Peroxidase	
ENTRIFLICED	NEGATIVE .		NEGATIVE	Diazotization	
ENTRIFUGED SEDIMENT WET MOUNT	AND MICROSCORY			LEUCOCYTE	
				ESTERASE	
PITHELIAL CELLS	2-3	/hpf	0-5	- In at	
36	1-2	/hpf	<10	Microscopy	
ASTS	NIL.	/hpf	0-2	MICROSCOPY	
RYSTALS	NIL		0-2 Hyaline Cast	MICROSCOPY	
F. C	ABSENT		APOELUT	MICROSCOPY	
			ABSENT	MICROSCOPY	



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SIN No: UR2181341 auto Health anni is fest was been performed 48A for a feature Hyderabad, Felangana - 500 016 [ Loci Ducs Network Un ci Ducs Network Un ci Ducs Network Sin No: UR2181341 Limited, Shop No.51 & Suit Floor, Building "C", Vinan Hager, Pune, Metarabhtra, India - 411014 ngonas Hyderabad (AS Roo Nagar | Chinda Nagar | Kondapur | Nellakunta | Nizampet | Manikonda | Uppal ) Andhra Predesh: Vizag (Seath et 18 danne Konsiderati (Konzarannak | Chinana Book Aurona (GAAn) dish Teodoreth and (Annanae (Kontrastoreth)).

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Patient Name Age/Gender UHID/MR No Visit ID Ref Doctor Emp/Auth/TPA ID	: Mr.SANTOSH KUMAR SINGH : 45 Y 6 M 8 D/M : CVIM.0000230046 : CVIMOPV560836 : Dr.SELF : 121221	Collected Received Reported Status Sponsor Name	: 09/Sep/2023 10:20AM : 09/Sep/2023 01:14PM : 09/Sep/2023 01:41PM : Final Report : ARCOFEMI HEALTHCARE LIMITED	
	DEBABTMEN			

## 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 \*\*\*

(neffer Dr Sneha Shah MBBS, MD (Pathology) **Consultant** Pathologist

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

Page 15 of 15



SIN No:UPP015465,UF009443

SIIN NO. OFF 013-00, 01 002-7-3 olio Health anni liestria tren performed 45A jo/hv?9928441 bi819 Lifestyle Itd- Sadashiv Betik Penker Dinyrostrooftolye So 3. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 j Viman Nagar, Pune, Maharashira, India -4 d. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begu apollohl.com | Email ID: enquir Viman Nagar, Pune, Maharashtra, India - 411014 S OLLO CLINICS NETWORK ina**: Hyderabad** (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Niz

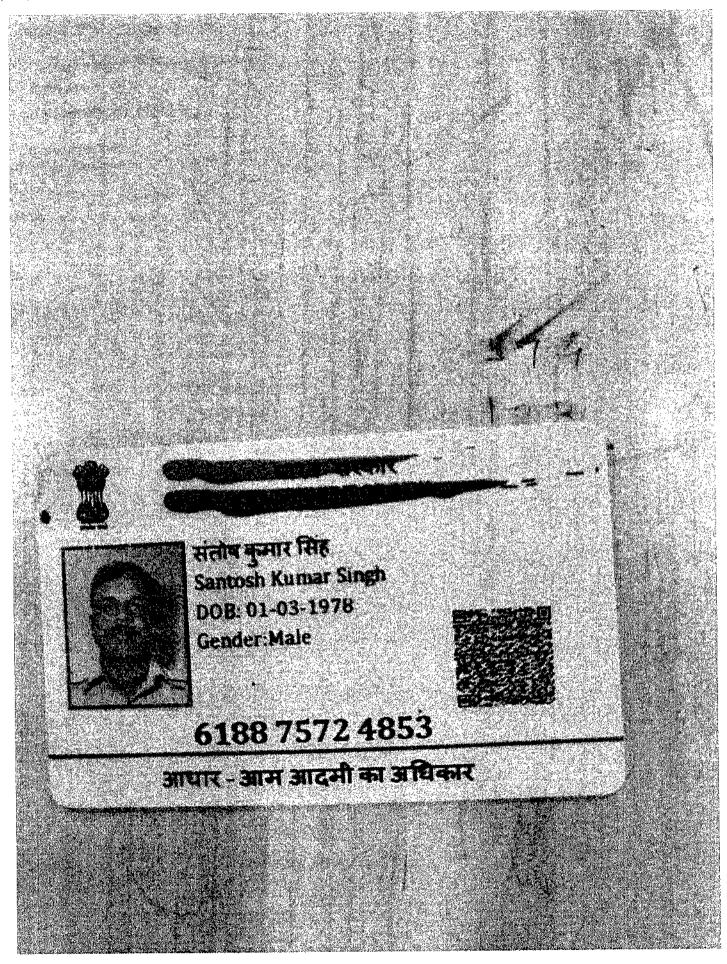
et | Manikonda | Uppal ) Andhra Pradesh: Vizag (Seeth

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na Peta) Karnataka

		Apollo Clinic Expertise. Closer to you.
Name       : Mr. Santosh Kumar Singh         Address : pune       : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN         Plan       : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN         INDIA OP AGREEMENT       : NOIA OP AGREEMENT	Age: 45 Y Sex: M	UHID:CVIM.0000230046 * c V I M. 0 0 0 0 2 3 0 0 4 6 * OP Number:CVIMOPV560836 Bill No :CVIM-OCR-59575 Date : 09.09.2023 09:49
Sno Serive Type/ServiceName		Department
1 ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS A	BOVE 50Y MA	LE - 2D ECHO - PAN INDIA EV2224
Endite GEOCOSE(FASTING)		
2 GAMMA GLUTAMYL TRANFERASE (GGT)		
-3 PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)		
4HbA1c, GLYCATED HEMOGLOBIN		
_S2⊕ ECHO		
6 LIVER FUNCTION TEST (LFT)		
X-RAY CHEST PA		
8 GLUCOSE, FASTING		
9 HEMOGRAM + PERIPHERAL SMEAR		
10 ENT CONSULTATION		
FITNESS BY GENERAL PHYSICIAN		
12 DIET CONSULTATION		
13 COMPLETE ÚRINE EXAMINATION		
14 URINE GLUCOSE(POST PRANDIAL)		
15 PERIPHERAL SMEAR		
L6 ECG		
17 BLOOD GROUP ABO AND RH FACTOR		
18 LIPID PROFILE		
19 BODY MASS INDEX (BMI)		
20 OPTHAL BY GENERAL PHYSICIAN		
21 RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)		
22 ULTRASOUND - WHOLE ABDOMEN		
23 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)		
24 DENTAL CONSULTATION		



## Fwd: Health Check up Booking Confirmed Request(UBOI1989),Package Code-PKG10000367, Beneficiary Code-271116

Santosh Singh <sksingh741728@gmail.com> Sat 2023-09-09 09:01 To:Vimannagar Apolloclinic <vimannagar@apolloclinic.com>

------ Forwarded message ------From: **Mediwheel** <<u>wellness@mediwheel.in</u>> Date: Tue, Sep 5, 2023, 19:16 Subject: Health Check up Booking Confirmed Request(UBOI1989),Package Code-PKG10000367, Beneficiary Code-271116 To: <<u>sksingh741728@gmail.com</u>> Cc: <<u>customercare@mediwheel.in</u>>

	011-41195959		
Dear SANTOSH KU We are pleased to co	IMARSINGH, onfirm your health checkup booking request with the following details.		
Booking Date	: 01-09-2023		
Hospital Package Name	: Mediwheel Full Body Annual Plus Above 50 Male		
Patient Package Name	: MediWheel Full Body Health Checkup Male 40 To 50		
Name of Diagnostic/Hospita	L: Apollo Clinic		
Address of Diagnostic/Hospita	Shop no S1, Ground Floor, Datta Mandir Chowk, Nyati Millenium I-` Premises, Viman Nagar, Pune - 411014		
City	: Pune		
State	:		
Pincode	: 411014		
Appointment Date	: 09-09-2023		
<b>Confirmation Statu</b>	s: Booking Confirmed		
Preferred Time	: 8:00am-9:00am		
Note - Please note t	o not pay any amount .		
Instructions to und	lergo Health Check:		
<ul> <li>Please ensure you are on complete fasting for 10-To-12-Hours prior to check.</li> <li>During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.</li> <li>Bring urine sample in a container if possible (containers are available at the Health Check centre).</li> <li>Please bring all your medical prescriptions and previous health medical records with you.</li> <li>Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.</li> </ul>			



Patient Name	: Mr. Santosh Kumar Singh	Age/Gender	: 45 Y/M
UHID/MR No.	: CVIM.0000230046	<b>OP</b> Visit No	: CVIMOPV560836
Sample Collected on	:	<b>Reported on</b>	: 09-09-2023 12:44
LRN#	: RAD2094567	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 121221		

#### DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

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

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

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

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

**Bowel loops and Retroperitoneum** appear normal. Aorta and IVC appear normal. No abnormal lymphadenopathy noted.

IMPRESSION:-Grade I fatty liver.

(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.

reeti

Dr. PREETI P KATHE DMRE, MD, DNB Radiology



Patient Name	: Mr. Santosh Kumar Singh	Age/Gender	: 45 Y/M
UHID/MR No.	: CVIM.0000230046	OP Visit No	: CVIMOPV560836
Sample Collected on	:	<b>Reported on</b>	: 09-09-2023 12:36
LRN#	: RAD2094567	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 121221		

#### DEPARTMENT OF RADIOLOGY

#### X-RAY CHEST PA

#### X-RAY CHEST PA

Trachea appears normal.

Both the lung fields are clear.

Cardiac shadows appear apparently normal.

Both domes of diaphragm appear normal.

Both costophrenic angles are clear.

Bony thoracic cage shows no deformity. Visualised bones appear normal.

Soft tissues appear normal.

Impression: Essentially Normal Study.

Preeti

Dr. PREETI P KATHE DMRE, MD, DNB Radiology







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:49PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

#### DEPARTMENT OF HAEMATOLOGY

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

#### PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC NORMOCYTIC NORMOCHROMIC WBC MILD LEUCOPENIA PLATELETS MILD THROMBOCYTOPENIA NO HEMOPARASITES SEEN

Page 1 of 15



SIN No:BED230217729 Apollo Health and his fest via been performed with pollo Health and Lifestyle Itd- Sadashiv Bethilpenien Dragingstrooptative Society Limited, Shop No.513, Still Floor, Building "C", Viman Nagar, Pune, Maharashira, India - 411014

APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:49PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

#### 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	

HAEMOGLOBIN	13.6	g/dL	13-17	Spectrophotometer
PCV	40.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.9	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	83.4	fL	83-101	Calculated
MCH	27.8	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	15.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	3,600	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	56.1	%	40-80	Electrical Impedance
LYMPHOCYTES	30	%	20-40	Electrical Impedanc
EOSINOPHILS	2.7	%	1-6	Electrical Impedanc
MONOCYTES	10.5	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2019.6	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1080	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	97.2	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	378	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	25.2	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	135000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	14	mm at the end of 1 hour	0-15	Modified Westergre
ERIPHERAL SMEAR				

PLATELETS MILD THROMBOCYTOPENIA NO HEMOPARASITES SEEN

Page 2 of 15



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APOLLO CLINICS NETWORK







Emp/Auth/TPA ID	: 121221				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CVIMOPV560836	Status	: Final Report		
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 03:11PM		
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM		
Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM		

DEPARIMENT	OF HAEMA	TOLOGY	

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

#### BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA

BLOOD GROUP TYPE	0	Microplate
		Hemagglutination
Rh TYPE	Positive	Microplate
		Hemagglutination

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APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:13PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

ARCOFEMI - MEDIWHEEL - FULL B	SODY ANNUAL PLUS	6 ABOVE 50Y M	ALE - 2D ECHO - PAN	INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING , NAF PLASMA	97	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 occasions.

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

GLUCOSE, POST PRANDIAL (PP), 2	144	mg/dL	70-140	HEXOKINASE	
HOURS , SODIUM FLUORIDE PLASMA (2					
HR)					

#### **Comment:**

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

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 12:52PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:13PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

ARCOFEMI - MEDIWHEEL - FULL E	BODY ANNUAL PLUS	6 ABOVE 50Y M	ALE - 2D ECHO - PAN	INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.6	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	114	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)

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SIN No:PLF02025417,PLP1367388,EDT230083193

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APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:33PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 05:33PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324				
Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	126	mg/dL	<200	CHO-POD
TRIGLYCERIDES	134	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	29	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	97	mg/dL	<130	Calculated
LDL CHOLESTEROL	70.17	mg/dL	<100	Calculated
VLDL CHOLESTEROL	26.76	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.35		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
	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	$\geq 60$			
	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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**Test Name** 





Method

Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:33PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 05:33PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		
DEPARTMENT OF BIOCHEMISTRY			
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324			

Unit

Bio. Ref. Range

Result

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APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:33PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 05:33PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

ARCOFEMI - MEDIWHEEL - FULL B	BODY ANNUAL PLUS	S ABOVE 50Y M	ALE - 2D ECHO - PAN	INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.90	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.21	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.69	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	41.41	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	128.51	U/L	30-120	IFCC
PROTEIN, TOTAL	8.09	g/dL	6.6-8.3	Biuret
ALBUMIN	4.42	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.67	g/dL	2.0-3.5	Calculated
A/G RATIO	1.2		0.9-2.0	Calculated

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APOLLO CLINICS NETWORK







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Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

ARCOFEMI - MEDIWHEEL - FULL B	ODY ANNUAL PLUS	S ABOVE 50Y M	ALE - 2D ECHO - PAN	INDIA - FY2324	
Test Name	Result	Unit	Bio. Ref. Range	Method	

<b>RENAL PROFILE/KIDNEY FUNCTION T</b>	EST (RFT/KFT), SERU	JM		
CREATININE	0.83	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	16.83	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.76	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.44	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.16	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139.45	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104.83	mmol/L	101–109	ISE (Indirect)

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APOLLO CLINICS NETWORK







Emp/Auth/TPA ID : 121221				
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Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM	

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						

GAMMA GLUTAMYL TRANSPEPTIDASE	17.75	U/L	<55	IFCC
(GGT), SERUM				

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APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:29PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:50PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

#### 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			

## THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.15	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	8.57	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE	2.980	µIU/mL	0.35-4.94	CMIA
(TSH)				

#### **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	Т3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	Ν	Ν	Ν	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	Ν	Ν	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	Ν	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	Ν	Ν	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

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DEPARTMENT OF IMMUNOLOGY					
Emp/Auth/TPA ID : 121221					
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CVIMOPV560836	Status	: Final Report		
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:50PM		
Age/Gender	er : 45 Y 6 M 8 D/M		: 09/Sep/2023 01:29PM		
Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM		

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Rosult	Unit	Bio Ref Range	Method
Result	Onit	Dio. Kei. Kange	Wethou
	BODY ANNUAL PLUS Result		BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN Result Unit Bio. Ref. Range

Page	12	of	15	

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APOLLO CLINICS NETWORK







Emp/Auth/TPA ID	: 121221					
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED			
Visit ID	: CVIMOPV560836	Status	: Final Report			
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 02:50PM			
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:29PM			
Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM			

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						

TOTAL PROSTATIC SPECIFIC ANTIGEN	0.423	ng/mL	<4	CMIA
(tPSA), SERUM				

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SIN No:SPL23128856 Apollo Health and Lifestyle Jem Herd // WA join? (1981) in and Lifestyle Itd- Sadashiv Beth Perior Dravingsfree Farly Society 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

APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:14PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 01:39PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

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	

COMPLETE URINE EXAMINATION (C	UE), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>	· · · · ·			
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF
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 MO	OUNT AND MICROSCOPY			
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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APOLLO CLINICS NETWORK







Patient Name	: Mr.SANTOSH KUMAR SINGH	Collected	: 09/Sep/2023 10:20AM
Age/Gender	: 45 Y 6 M 8 D/M	Received	: 09/Sep/2023 01:14PM
UHID/MR No	: CVIM.0000230046	Reported	: 09/Sep/2023 01:41PM
Visit ID	: CVIMOPV560836	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 121221		

#### 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 \*\*\*

Svela Dr Sneha Shah

MBBS, MD (Pathology) **Consultant Pathologist** 

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

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