
 **बैंक ऑफ़ बड़ोदा**
Bank of Baroda



नाम **गुणपुरु सिवशंकर**
Name **Gunupuru Sivasankar**
कर्मचारी कूट क्र.
E.C. No **118792**


जारीकर्ता प्राधिकारी
Issuing Authority


धारक के हस्ताक्षर
Signature of Holder

Reminder your health checkup booking is tomorrow

Mediwheel <wellness@mediwheel.in>

Sat 27-01-2024 04:16

To:Gunupuru Sivasankar <GUNUPURU.SIVASANKAR@bankofbaroda.com>

Cc:customer@mediwheel.in <customer@mediwheel.in>

Cc:customer@mediwheel.in <customer@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

वधान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक
CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT C

Dear **MR. SIVASANKAR GUNUPURU,**

This is a gentle reminder that your health checkup is scheduled for tomorrow as per the below particular. Please visit the center at any time.

Please follow the following instructions. Please call us at 011-41195959 if you face any issues.

Booking Date : 23/01/2024

Health Check up Name: Mediwheel Full Body Annual Plus Above 50 Male

Health Check Code : PKG10000367

Name of Diagnostic/Hospital : Apollo Clinic - Manikonda Hyderabad

Address of Diagnostic/Hospital- D.No 8-1-284/OU/439 & 440, O.U Colony, Shaikpet, Manikonda
: Road. Opp: Telangana Grameena Bank, Near Bheemas Hotel.,
Manikonda - 500008

Appointment Date : 27/01/2024

Preferred Time : 9:00am

Package Name : Mediwheel Full Body Annual Plus Above 50 Male

Tests included in this :

Package

- Bmi Check
- Ent Consultation
- Dietician Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Estimation

- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile
- Prostate Specific Antigen (PSA Male)

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.

Please visit to our [Terms & Conditions](#) for more informaion. This email is recieved because you are register with us [Click here to unsubscribe](#).

@ 2024 - 25, Arcofemi Healthcare Pvt Limited.(Mediwheel)

MR.SIVA SANKAR G,
Patient ID CMAN.95173
01/27/2024
1:30:56pm

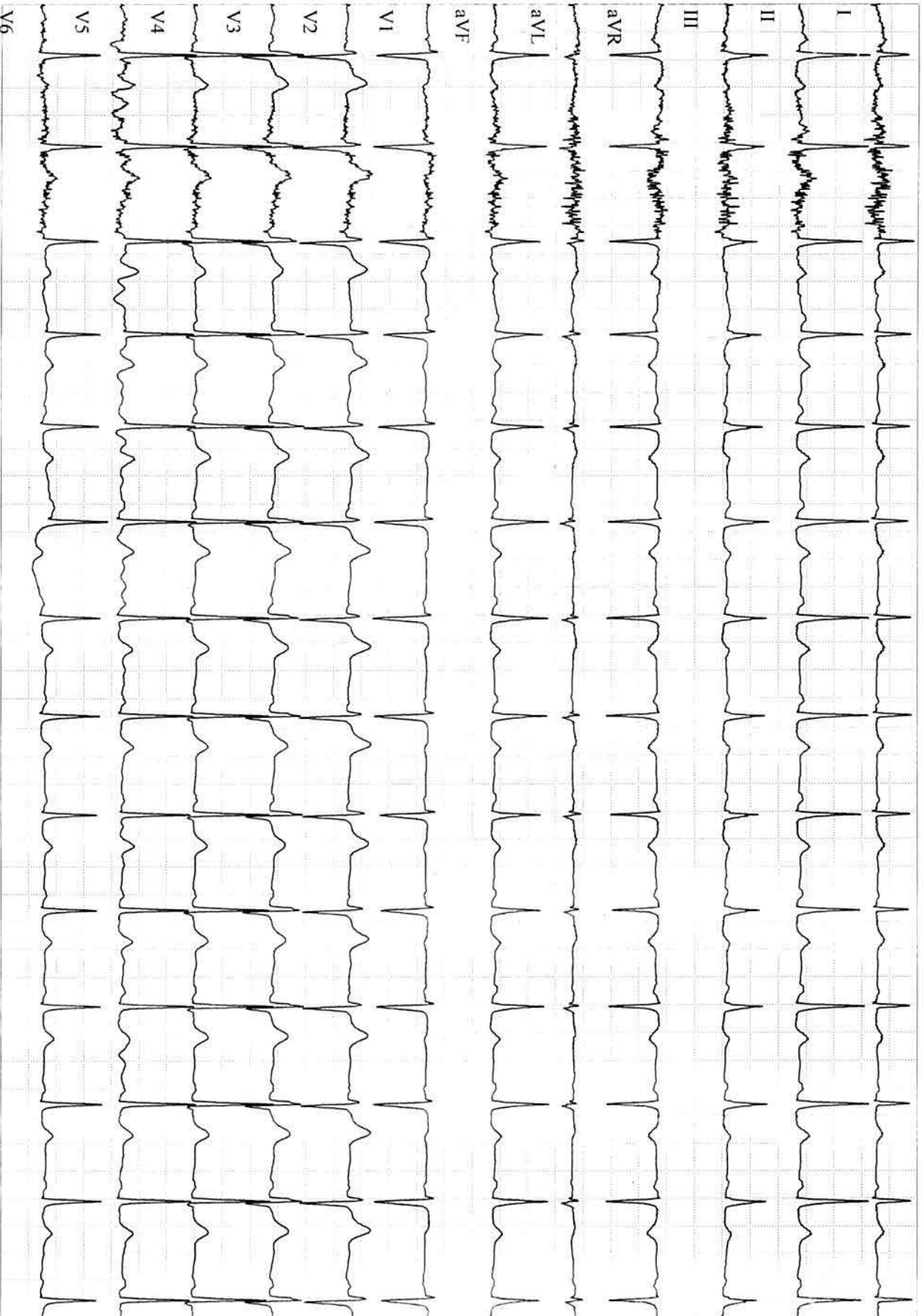
88 bpm

12-Lead Report
PRETEST
SUPINE
00:01

BRUCE
0.0 mph
0.0 %

Normal
PWF

APOLLO



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V5,V4)

Start of Test: 1:30:50pm

MR.SIVA SANKAR G,
Patient ID CMAN.95173

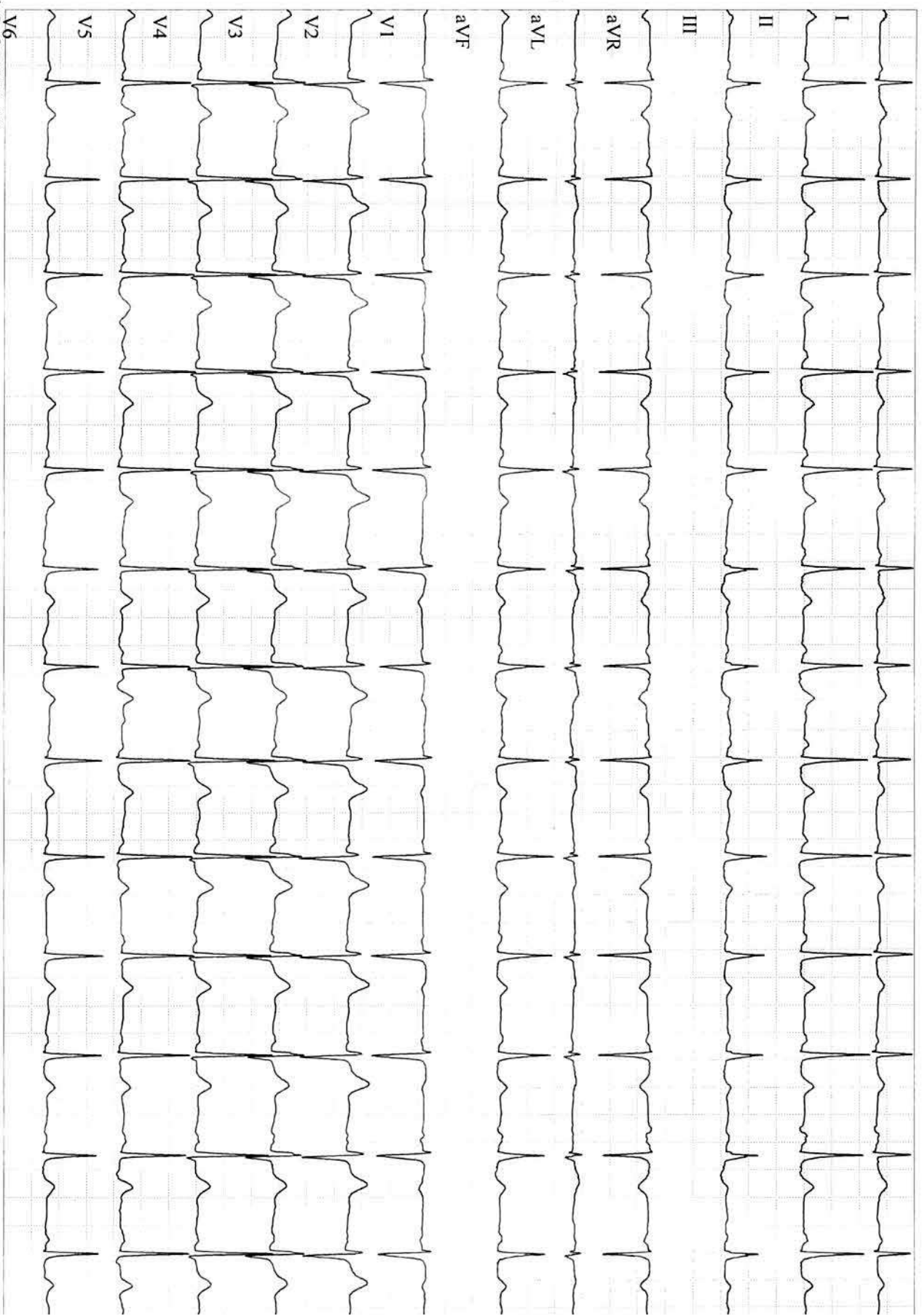
01/27/2024
1:31:01pm

88 bpm
120/80 mmHg

12-Lead Report
PRETEST
STANDING
00:06

BRUCE
0.0 mph
0.0 %

APOLLO



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V5,V4)

Start of Test: 1:30:50pm

MR.SIVA SANKAR G,
Patient ID CMAN.95173

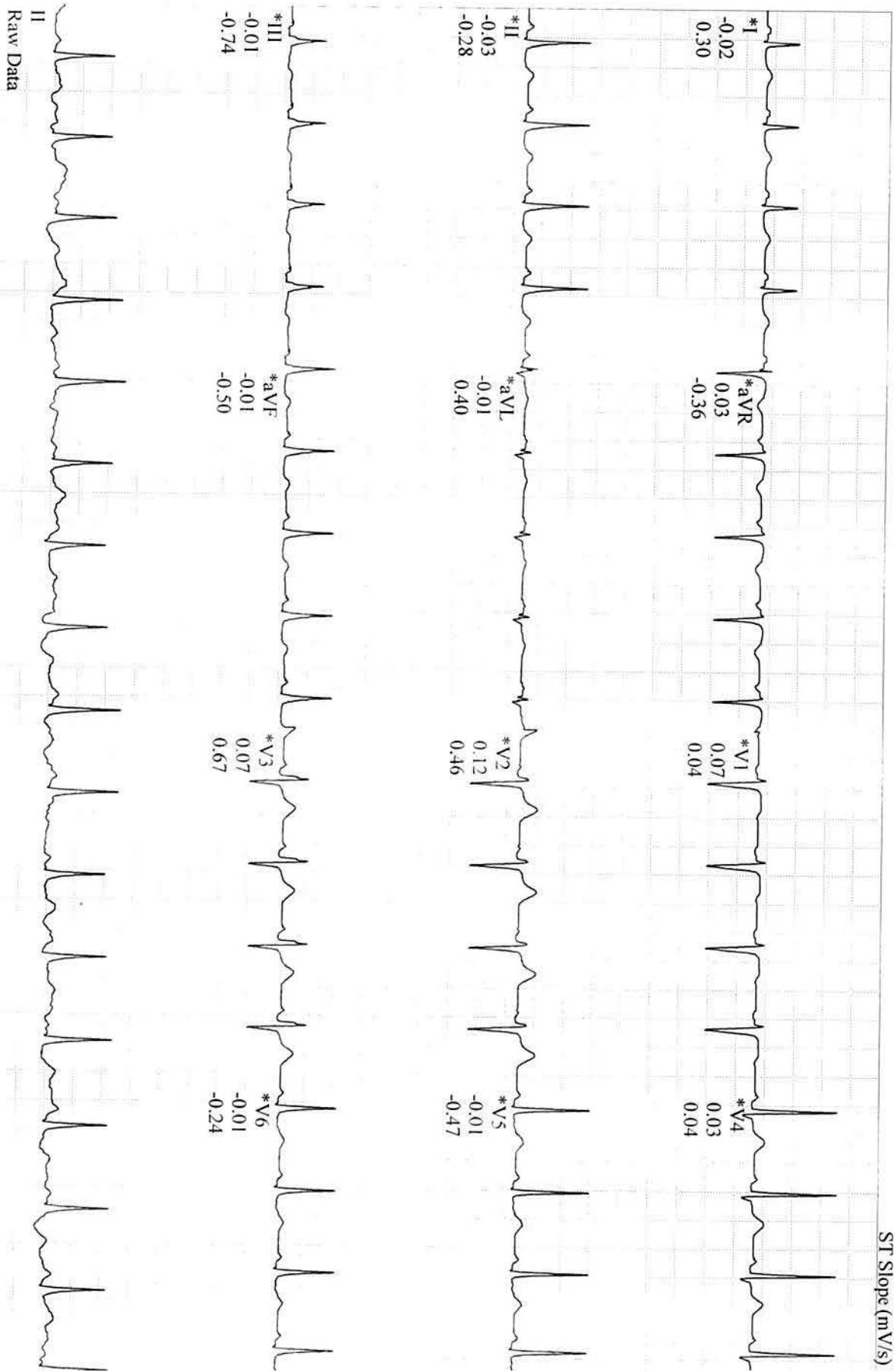
01/27/2024
1:33:51pm

105 bpm
120/80 mmHg

Linked Medians
EXERCISE
STAGE 1
02:50

BRUCE
1.7 mph
10.0 %

APOLLO



Raw Data

*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRR+ HR(V5,V4)

Start of Test: 1:30:50pm

MR.SIVA SANKAR G,
Patient ID CMAN.95173

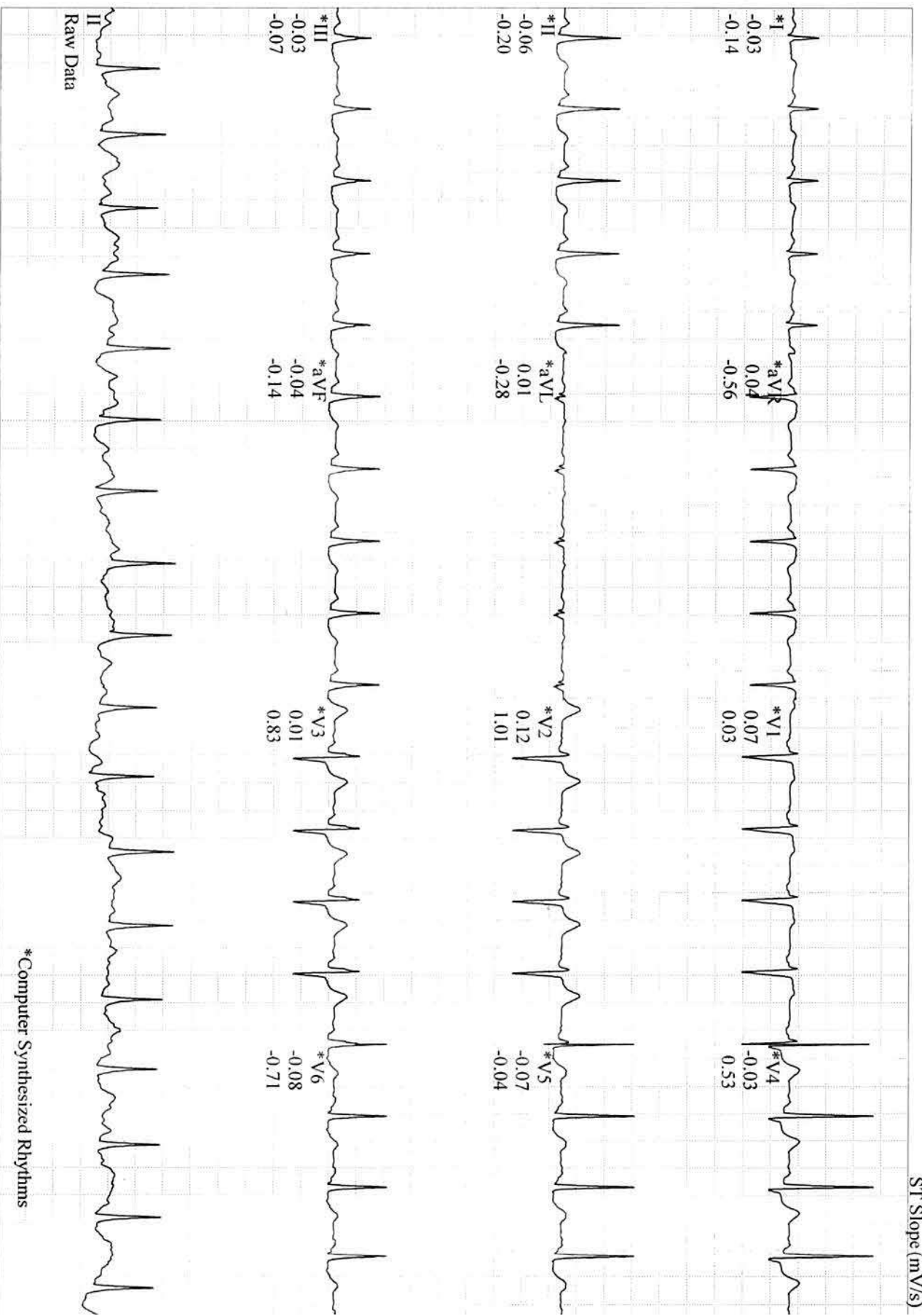
01/27/2024
1:36:51pm

115 bpm
130/90 mmHg

Linked Medians
EXERCISE
STAGE 2
05:50

BRUCE
2.5 mph
12.0 %

APOLLO



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4,V5)

Start of Test: 1:30:50pm

*Computer Synthesized Rhythms

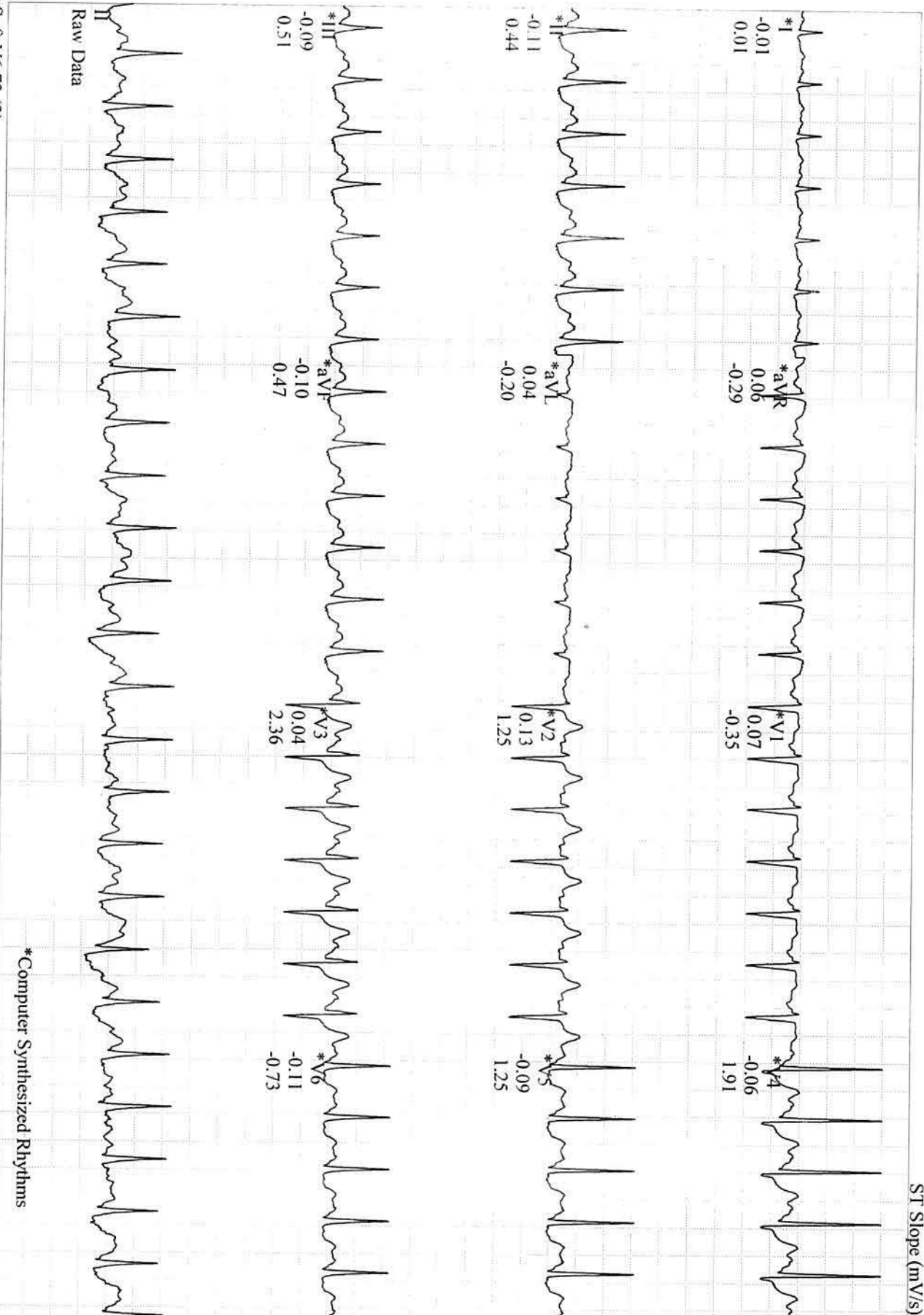
MR.SIVA SANKAR G,
Patient ID CMAN.95173
01/27/2024
1:39:51pm

160 bpm
130/90 mmHg

Linked Medians
EXERCISE
STAGE 3
08:50

BRUCE
3.4 mph
14.0 %

APOLLC



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4,V5)

Start of Test: 1:30:50pm

*Computer Synthesized Rhythms

MR. SIVA SANKAR G,
 Patient ID CMAN.95173
 01/27/2024
 1:40:04pm

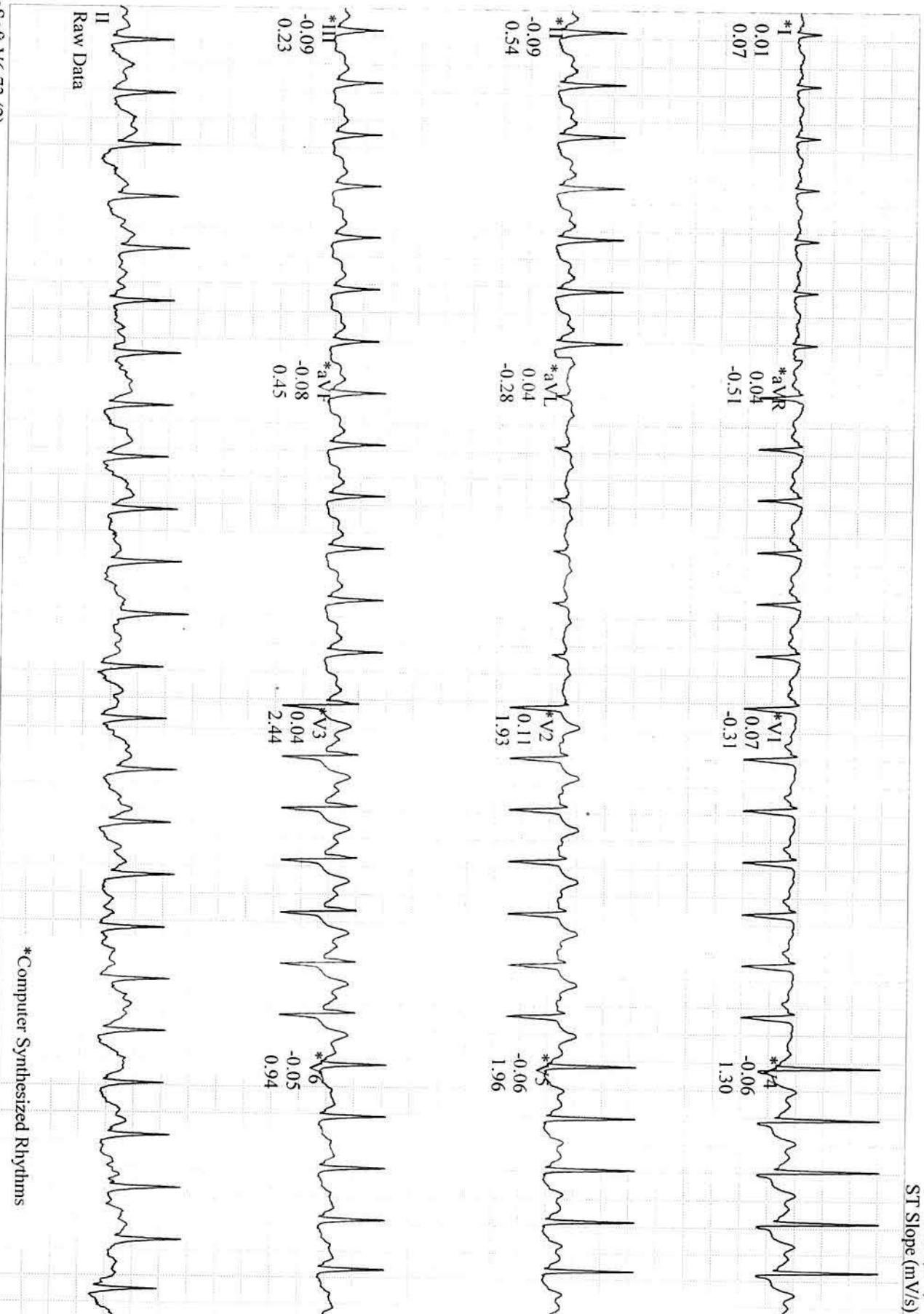
160 bpm
 130/90 mmHg

Linked Medians (PEAK EXERCISE)
 EXERCISE
 STAGE 4
 09:03

BRUCE
 3.4 mph
 14.0 %

APOLLO

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



*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
 25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4, V5)

Start of Test: 1:30:50pm

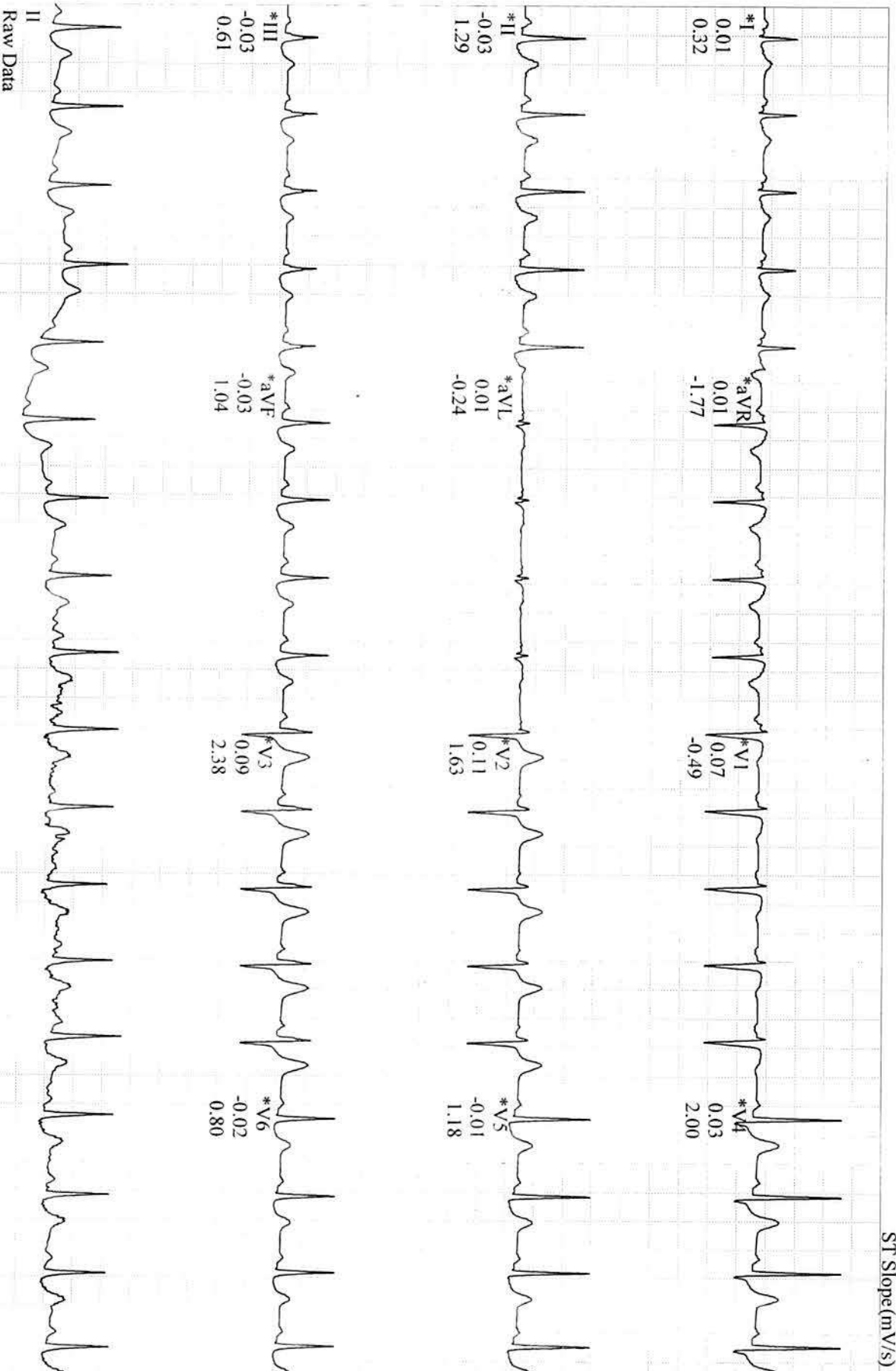
MR.SIVA SANKAR G,
Patient ID CMAN.95173
01/27/2024
1:41:03pm

112 bpm

Linked Medians
RECOVERY
#1
01:00

BRUCE
0.0 mph
0.0 %

APOLLO



*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRR+ HR(V4,V5)

Start of Test: 1:30:50pm

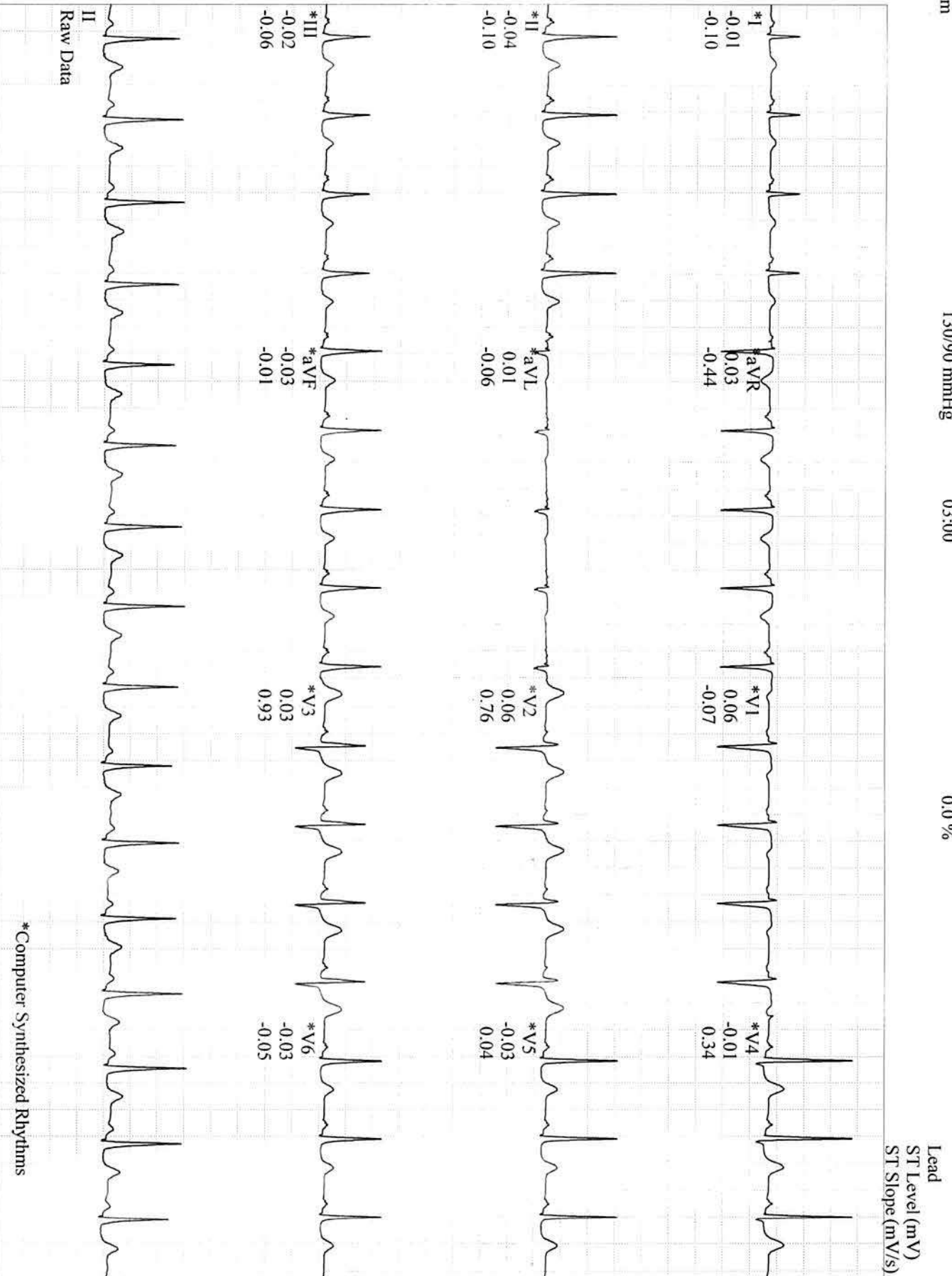
MRS. SIVA SANKAR G,
Patient ID CMAN.95173
01/27/2024
1:43:03pm

102 bpm
130/90 mmHg

Linked Medians
RECOVERY
#1
03:00

BRUCE
0.0 mph
0.0 %

APOLLO



Raw Data

*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4,V5)

Start of Test: 1:30:50pm

Tabular Summary

APOLLO

MRSIVA SANKAR G,
 Patient ID CMAN.95173
 01/27/2024 Male 160 cm 58 kg
 1:30:50pm 42yrs Asian
 Meds:

Test Reason:
 Medical History:

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

BRUCE: Total Exercise Time 09:02
 Max HR: 160 bpm 89% of max predicted 178 bpm HR at rest: 88
 Max BP: 130/90 mmHg BP at rest: 120/80 Max RPP: 19890 mmHg*bpm
 Maximum Workload: 10.10 METS
 Max. ST: -0.20 mV, 0.00 mV/s in II; EXERCISE STAGE 3 06:29
 ST/HR index: 0.93 μ V/bpm

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.

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METs)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (II mV)	Comment
PRETEST	SUPINE	00:02	0.00	0.00	1.0	88			0	-0.01	
	STANDING	00:09	0.00	0.00	1.0	85	120/80	10200	0	-0.01	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	107	120/80	12840	0	-0.02	
	STAGE 2	03:00	2.50	12.00	7.0	118	130/90	15340	1	-0.08	
	STAGE 3	03:00	3.40	14.00	10.1	160	130/90	20800	0	-0.07	
	STAGE 4	00:03			9.8	160			0	-0.09	
RECOVERY		03:01	0.00	0.00	1.0	103	130/90	13390	0	-0.04	

Normal - TMT.



The Apollo Clinic- Manikonda
PHYSICAL EXAMINATION FORM

DATE 27/1/24

UHID CMAAM 95173

Name Mr. Siva Sankar Age 42y/m

Height Cms

Weight Kgs

Chest Measurement (In) Cm

(Out) Cm

Waist Cm

Hip

Pulse / Min

BMI

BP mm/Hg

SPO2

Mr. Sivasankar
ID: CMAN95173

27.01.2024 12:35:49

ARROW CE

42 Years

Male

APOLLO CLINIC
MANIKONDA
HYDERABAD

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

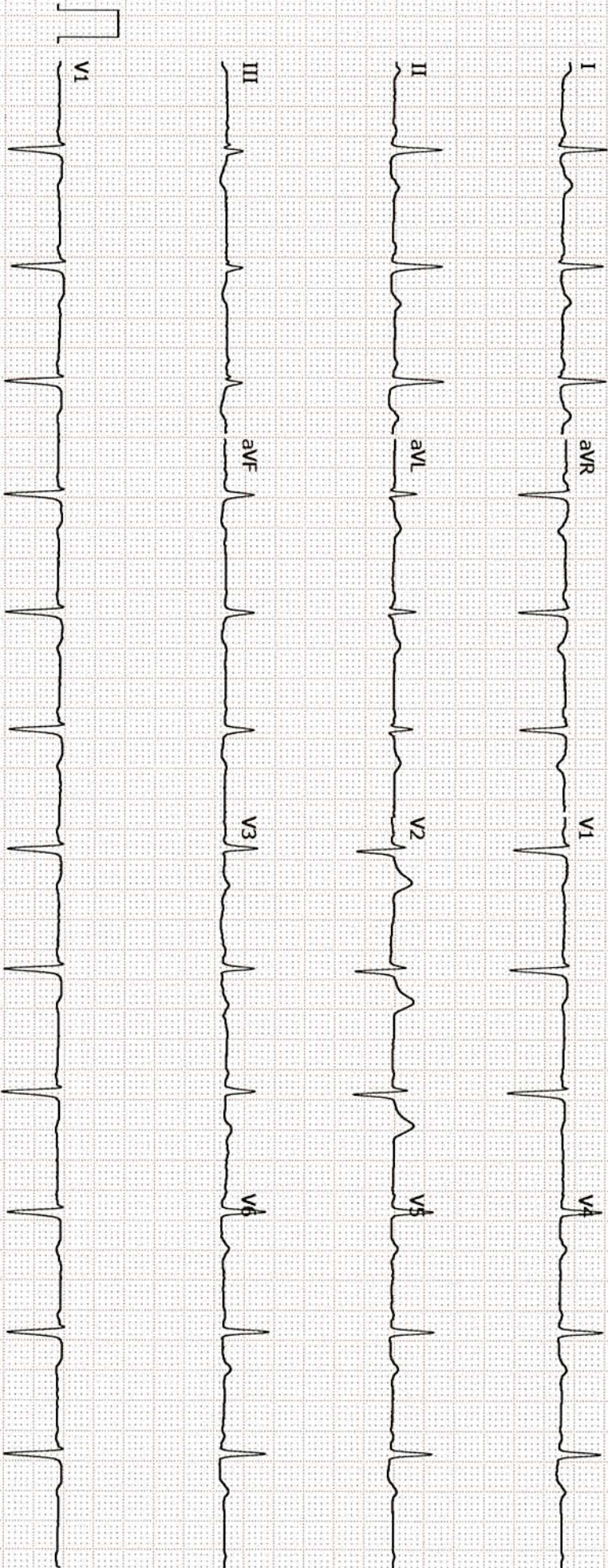
76 bpm
-- / -- mmHg

Technician:
Ordering Ph.:
Referring Ph.:
Attending Ph.:

QRS : 82 ms
QT / QTcBaz : 362 / 407 ms
PR : 118 ms
p : 82 ms
RR / PP : 784 / 789 ms
P / QRS / T : 33 / 40 / -2 degrees

Normal sinus rhythm
Normal ECG

QWML
[Signature]



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

Unconfirmed
4x2.5x3 25 R1 1/1

Patient Name	: Mr. SIVASANKAR GUNUPURU	Age/Gender	: 42 Y/M
UHID/MR No.	: CMAN.0000095173	OP Visit No	: CMANOPV192741
Sample Collected on	:	Reported on	: 27-01-2024 17:54
LRN#	: RAD2218330	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobE6284/118792		

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 well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

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

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

Both the kidneys 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 14.5 CC and echo texture.No evidence of necrosis/calcification seen.

IMPRESSION:-

- **GRADE-I FATTY LIVER .**

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. SIVASANKAR GUNUPURU

Age/Gender : 42 Y/M

Dr. MOHD ABDUL RAWOOF
MBBS,DNB(RADIO DIAGNOSIS)
Radiology

Patient Name : Mr. SIVASANKAR GUNUPURU

Age/Gender : 42 Y/M

UHID/MR No. : CMAN.0000095173

OP Visit No : CMANOPV192741

Sample Collected on :

Reported on : 27-01-2024 20:15

LRN# : RAD2218330

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobE6284/118792

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Cardia is normal .

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. MD RAHEEMUDDIN QURESHI
Radiology


Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 12:51PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 03:03PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15	g/dL	13-17	Spectrophotometer
PCV	42.90	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.22	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	82.3	fL	83-101	Calculated
MCH	28.8	pg	27-32	Calculated
MCHC	35	g/dL	31.5-34.5	Calculated
R.D.W	14.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,190	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	45.6	%	40-80	Electrical Impedance
LYMPHOCYTES	39	%	20-40	Electrical Impedance
EOSINOPHILS	7.4	%	1-6	Electrical Impedance
MONOCYTES	7.3	%	2-10	Electrical Impedance
BASOPHILS	0.7	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3278.64	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2804.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	532.06	Cells/cu.mm	20-500	Calculated
MONOCYTES	524.87	Cells/cu.mm	200-1000	Calculated
BASOPHILS	50.33	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	288000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	MODIFIED WESTERGRENS
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC
WBC - MILD EOSINOPHILIA
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN
IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD EOSINOPHILIA


Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

Page 1 of 18

CAP
ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



SIN No:BED240019974

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

Patient Name : Mr.SIVASANKAR GUNUPURU
Age/Gender : 42 Y 5 M 6 D/M
UHID/MR No : CMAN.0000095173
Visit ID : CMANOPV192741
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobE6284/118792

Collected : 27/Jan/2024 10:15AM
Received : 27/Jan/2024 12:51PM
Reported : 27/Jan/2024 03:03PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:BED240019974

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

Page 2 of 18
CAP
ACCREDITED
COLLEGE of AMERICAN PATHOLOGISTS



Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 12:51PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 05:04PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist

SIN No:BED240019974

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



Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 01:39PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 03:13PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	119	mg/dL	70-100	GOD - POD

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	144	mg/dL	70-140	HEXOKINASE

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	134	mg/dL		Calculated



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:EDT240008552

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



Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 01:39PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 03:13PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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
 - HbF >25%
 - Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:EDT240008552

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:
Door No : 8-1-284/OU/439 & 8-1-284/OU/440, O. U. Colony, Manikonda
Road, Shaikpet., Manikonda, Hyderabad, Telangana, India - 500008



Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 01:39PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 03:13PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Chromatogram Report

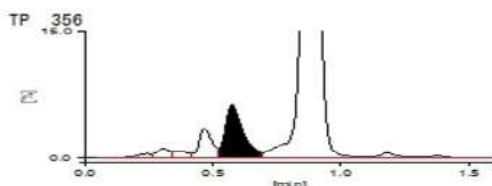
1 V5.28.1 2024-01-27 14:39:43
 ID EDT240008552
 Sample No. 01270124 SL 0010 - 06
 Patient ID
 Name
 Comment

GALIB Name	%	Time	Area
ATA	0.4	0.24	8.47
A1B	0.6	0.30	13.70
F	0.5	0.39	11.12
LA1C+	2.0	0.47	42.20
SA1C	6.3	0.58	108.42
AO	91.9	0.87	1972.27
H-V0			
H-V1			
H-V2			

Total Area 2156.18

HbA1c 6.3 % **IFCC 45 mmol/mol**

HbA1 7.3 % HbF 0.5 %



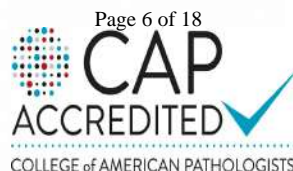

Dr.E.Maruthi Prasad
 PhD (Biochemistry)
 Consultant biochemist

SIN No:EDT240008552

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

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Patient Name : Mr.SIVASANKAR GUNUPURU
Age/Gender : 42 Y 5 M 6 D/M
UHID/MR No : CMAN.0000095173
Visit ID : CMANOPV192741
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : bobE6284/118792

Collected : 27/Jan/2024 10:15AM
Received : 27/Jan/2024 01:39PM
Reported : 27/Jan/2024 03:13PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Maruthi...

Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

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Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	224	mg/dL	<200	CHO-POD
TRIGLYCERIDES	153	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	52	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	172	mg/dL	<130	Calculated
LDL CHOLESTEROL	141.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	30.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.31		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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- 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.



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:SE04611054

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.98	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.85	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	83.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.81	g/dL	6.6-8.3	Biuret
ALBUMIN	4.67	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.14	g/dL	2.0-3.5	Calculated
A/G RATIO	1.49		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 > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson'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.



Dr.E.Maruthi Prasad
PhD (Biochemistry)
Consultant biochemist

SIN No:SE04611054

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DEPARTMENT OF BIOCHEMISTRY

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Maruthi...

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.83	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	14.60	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.28	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.31	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.82	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)

Maruthi...

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PhD (Biochemistry)
Consultant biochemist

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	40.00	U/L	<55	IFCC

Maruthi...

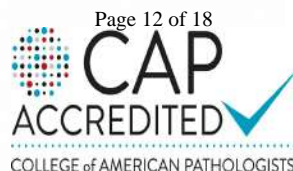
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.06	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.18	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.925	µIU/mL	0.38-5.33	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

- 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.
- 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.
- 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.
- 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
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



Dr. RAJESH BATTINA
PhD.(Biochemistry)
Consultant Biochemist

SIN No:SPL24013183

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DEPARTMENT OF IMMUNOLOGY

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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.890	ng/mL	0-4	CLIA



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Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - 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
pH	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.005		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD - POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY


 Dr.KASULA SIDDARTHA
 M.B.B.S,DNB(Pathology)
 Consultant Pathologist

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 ACCREDITED
 COLLEGE of AMERICAN PATHOLOGISTS



SIN No:UR2269556

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

Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 01:42PM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 04:53PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 07:06PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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



Dr.SRINIVAS N.S.NORI
M.B.B.S,M.D(Pathology)
CONSULTANT PATHOLOGY

SIN No:UPP016368

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



Patient Name : Mr.SIVASANKAR GUNUPURU	Collected : 27/Jan/2024 10:15AM
Age/Gender : 42 Y 5 M 6 D/M	Received : 27/Jan/2024 12:45PM
UHID/MR No : CMAN.0000095173	Reported : 27/Jan/2024 03:08PM
Visit ID : CMANOPV192741	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE6284/118792	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR



Dr.KASULA SIDDARTHA
M.B.B.S,DNB(Pathology)
Consultant Pathologist



SIN No:UF010376

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