



**Health Check up Booking Confirmed Request(bobE5786),Package Code-  
KG10000366, Beneficiary Code-300997**

message

Mediwheel <wellness@mediwheel.in>  
o: saai.cheerla@gmail.com  
c: customercare@mediwheel.in

Sun, 21 Jan 2024 at 1:51 pm



**011-41195959**

Dear **Cheerla Sai Kumar**,

We are pleased to confirm your health checkup booking request with the following details.

**Booking Date** : 18-01-2024  
**Hospital Package Name** : Mediwheel Full Body Annual Plus  
**Patient Package Name** : Mediwheel Full Body Health Checkup Male Below 40  
**Name of Diagnostic/Hospital** : Apollo Clinic  
**Address of Diagnostic/Hospital** : Apollo Clinic, Plot no:977, Survey no:45-50, H No:6-48/3, Near Pillar no:91, Beside Ramraj Cotton Show room, Canaranagar Bus-stop, Boduppal, Boduppal - 500039  
**City** : Hyderabad  
**State** :  
**Pincode** : 500039  
**Appointment Date** : 27-01-2024  
**Confirmation Status** : Booking Confirmed  
**Preferred Time** : 8:30am  
**Booking Status** : Booking Confirmed

**Member Information**

Booked Member Name	Age	Gender
MR. KUMAR CHEERLA SAI	33 year	Male

**Note** - Please note to not pay any amount.

**Instructions to undergo Health Check:**

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




बैंक ऑफ बड़ोदा  
Bank of Baroda

नाम चीर्ला साई कुमार  
Name Cheerla Sai Kumar

EC No. 176416

  
जारीकर्ता प्राधिकारी  
Issuing Authority



  
धारक के हस्ताक्षर  
Signature of Holder



The Apollo Clinic

Apollo Clinic  
Specialist Clinics

PHYSICAL EXAMINATION FORM

Date 27/01/24

Age 33y/m

Name Mr. Sai Kumar

UHID: 85431

Height 180 Cms

BMI

Weight 77 Kgs

BP 110/70

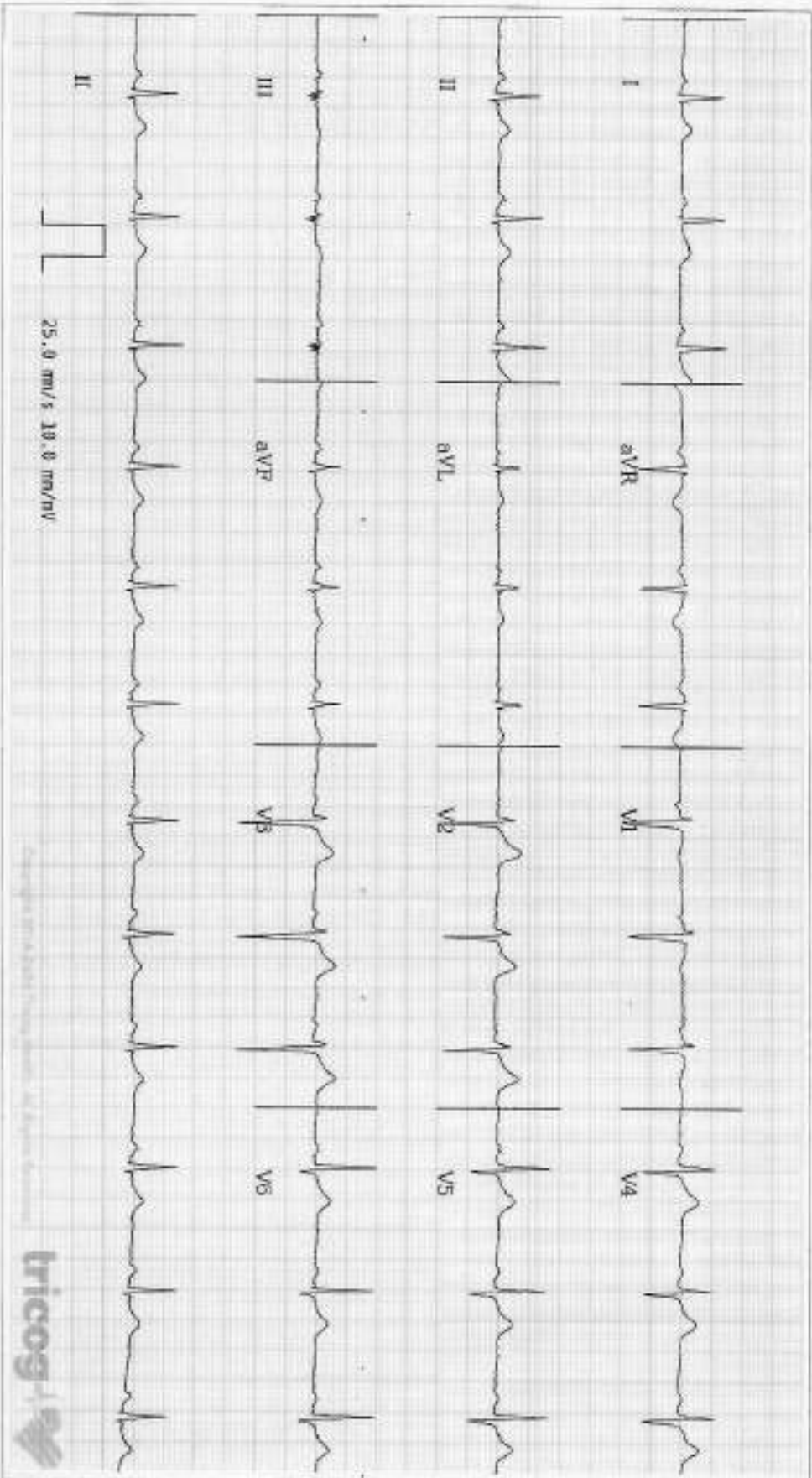
Apollo Clinic, H NO.6-48/3, PEERZADIGUDA, BESIDE RAMRAJ  
COTTONS, BODUPPAL R RD/STRCT, HYD PH. NO.04049503373/74



Apollo clinic Boduppal

Date and Time: 27th Jan 24 9:49 AM

Age / Gender: 33/Male  
Patient ID: 0000085431  
Patient Name: Subbarao



RR: 76bpm    VR: 76bpm    QRSD: sinus    QT: 346ms    QTcH: 389ms    PRT: 128ms    P-R-T: 53° 26° 35°

**ECG Within Normal Limits: Sinus rhythm, Normal ECG, correlate clinically. Please correlate clinically.**

Disclaimer: Analysis in this report is based on ECG strip and should only be used as an adjunct to clinical history, symptoms and results of other studies and investigations and shall be interpreted by a qualified physician.



12045



**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination of  
Mr. Sai Kumar C on 29/12/24.

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

	<u>Tick</u>
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	
<ul style="list-style-type: none"> <li>• Fit with Restrictions/ Recommendations</li> </ul> <p>Though following restrictions have been revealed in my opinion, these are not impediments to the job.</p> <p>1. <u>Dyslipidemia</u></p> <p>2. ....</p> <p>3. ....</p> <p>However the candidate should follow the advice medication that has been communicated to him/her.</p> <p>Review after .....</p>	/
<ul style="list-style-type: none"> <li>• Currently Unfit</li> </ul> <p>Review after.....recommended.</p>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	

*K. Triveni*  
**Dr. K. Triveni**  
Reg No : 05078  
Consultant physician  
Apollo Clinic  
Uppal

**MBBS**  
05078

# POWER PRESCRIPTION

NAME: Sai Kumar. C

GENDER: M/F

DATE: 27/01/24

AGE: 33

UHID: 85431

## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE		—————		6/6
NEAR				Ng

## LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE		—————		6/6
NEAR				Ng

COLOUR VISION : BC: Normal

DIAGNOSIS :  
OTHER FINDINGS: } Nil  
INSTRUCTIONS :

  
SIGNATURE

Established Patient: No

**Vitals**

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
27-01-2024 15:45	80 Beats/min	110/70 mmHg	22 Rate/min	98.6 F	180 cms	77 Kgs	%	%	Years	23.77	cms	cms	cms		AHLL09781

Established Patient: No

**Vitals**

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Established Patient: No

**Vitals**

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
27-01-2024 15:45	80 Beats/min	110/70 mmHg	22 Rate/min	98.6 F	180 cms	77 Kgs	%	%	Years	23.77	cms	cms	cms		AHLL09781

Name: Mr. SAI KUMAR CHEERLA  
Age/Gender: 34 Y/M  
Address: HYD  
Location: HYDERABAD, TELANGANA  
Doctor:  
Department: GENERAL  
Rate Plan: UPPAL\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. AYYAPPA SWAMY AMARA

MR No: CUPP.0000085431  
Visit ID: CUPPOPV128772  
Visit Date: 27-01-2024 08:30  
Discharge Date:  
Referred By: SELF

**Doctor's Signature**

Name: Mr. SAI KUMAR CHEERLA  
Age/Gender: 34 Y/M  
Address: HYD  
Location: HYDERABAD, TELANGANA  
Doctor:  
Department: GENERAL  
Rate Plan: UPPAL\_06042023  
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Established Patient: No

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Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
27-01-2024 15:45	80 Beats/min	110/70 mmHg	22 Rate/min	98.6 F	180 cms	77 Kgs	%	%	Years	23.77	cms	cms	cms		AHLL09781

Patient Name : Mr. SAI KUMAR CHEERLA Age : 34 Y/M  
UHID : CUPP.0000085431 OP Visit No : CUPPOPV128772  
Conducted By: : Dr. CH VENKATESHAM Conducted Date : 29-01-2024 08:30  
Referred By : SELF

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**2D-ECHO WITH COLOUR DOPPLER**

Dimensions:

Ao (ed)	2.9 CM
LA (es)	3.2 CM
LVID (ed)	4.3 CM
LVID (es)	2.8 CM
IVS (Ed)	1.0 CM
LVPW (Ed)	1.0 CM
EF	69.00%
%FD	35.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL



Patient Name	: Mr. SAI KUMAR CHEERLA	Age	: 34 Y/M
UHID	: CUPP.0000085431	OP Visit No	: CUPPOPV128772
Conducted By:	: Dr. CH VENKATESHAM	Conducted Date	: 29-01-2024 08:30
Referred By	: SELF		

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#### COLOUR AND DOPPLER STUDIES

AJV=1.3

PJV=0.9

E=0.8

A=0.6

#### IMPRESSION

**NORMAL SIZED CARDIAC CHAMBERS & VALVES**

**NORMAL BLOOD FLOWS**

**GOOD LV/ RV FUNCTION**

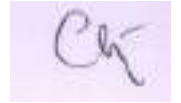
**NO RWMA / LVH**

**NO CLOT / P E**

Patient Name : Mr. SAI KUMAR CHEERLA  
UHID : CUPP.0000085431  
Conducted By: : Dr. CH VENKATESHAM  
Referred By : SELF

Age : 34 Y/M  
OP Visit No : CUPPOPV128772  
Conducted Date : 29-01-2024 08:30

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Name: Mr. SAI KUMAR CHEERLA  
Age/Gender: 34 Y/M  
Address: HYD  
Location: HYDERABAD, TELANGANA  
Doctor:  
Department: GENERAL  
Rate Plan: UPPAL\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. KOPPULA TRIVENI

MR No: CUPP.0000085431  
Visit ID: CUPPOPV128772  
Visit Date: 27-01-2024 08:30  
Discharge Date:  
Referred By: SELF

**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

**SYSTEMIC REVIEW**

**HT-HISTORY**

**PHYSICAL EXAMINATION**

**SYSTEMIC EXAMINATION**

**IMPRESSION**

**RECOMMENDATION**

**Doctor's Signature**

Patient Name	: Mr. SAI KUMAR CHEERLA	Age	: 34 Y/M
UHID	: CUPP.0000085431	OP Visit No	: CUPPOPV128772
Reported By:	: Dr. VINAY KUMAR GUPTA	Conducted Date	: 29-01-2024 12:48
Referred By	: SELF		

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### **ECG REPORT**

#### **Observation :-**

1. Normal Sinus Rhythm.
2. Heart rate is 76 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement see

#### **Impression:**

NORMAL ECG.

CORRELATE CLINICALLY.

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

Dr. VINAY KUMAR GUPTA

Name: Mr. SAI KUMAR CHEERLA  
Age/Gender: 34 Y/M  
Address: HYD  
Location: HYDERABAD, TELANGANA  
Doctor:  
Department: GENERAL  
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**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

**SYSTEMIC REVIEW**

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**PHYSICAL EXAMINATION**

**SYSTEMIC EXAMINATION**

**IMPRESSION**

**RECOMMENDATION**

**Doctor's Signature**



**Patient Name** : Mr. SAI KUMAR CHEERLA

**Age/Gender** : 33 Y/M

**UHID/MR No.** : CUPP.0000085431

**OP Visit No** : CUPPOPV128772

**Sample Collected on** :

**Reported on** : 27-01-2024 13:35

**LRN#** : RAD2217655

**Specimen** :

**Ref Doctor** : DR. SRAVYA SREE

**Emp/Auth/TPA ID** : 176416

---

**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. MATTA JYOTHIRMAI**  
**MBBS, MDRD**  
Radiology

<b>Patient Name</b>	: Mr. SAI KUMAR CHEERLA	<b>Age/Gender</b>	: 33 Y/M
<b>UHID/MR No.</b>	: CUPP.0000085431	<b>OP Visit No</b>	: CUPPOPV128772
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 27-01-2024 15:36
<b>LRN#</b>	: RAD2217655	<b>Specimen</b>	:
<b>Ref Doctor</b>	: DR. SRAVYA SREE		
<b>Emp/Auth/TPA ID</b>	: 176416		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

**Liver** appears normal in size 120 mm 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 in size 95 mm. 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.

**Right kidney** : 106 x 40 mm appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No hydronephrosis seen. **Evidence of mid pole calculus measuring 4 mm.**

**Left kidney** : 117 x 47 mm appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen.

**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 37 x 31 x 29 mm and echo texture. Volume measure 18 cc. No evidence of necrosis/calcification seen.

**IMPRESSION:-**

**\* NON OBSTRUCTIVE RIGHT RENAL CALCULUS.**

**Suggest – clinical correlation.**

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



**Dr. MATTA JYOTHIRMAI**  
**MBBS, MDRD**



**Patient Name** : Mr. SAI KUMAR CHEERLA

**Age/Gender** : 33 Y/M

Radiology

Patient Name : Mr.SAI KUMAR CHEERLA	Collected : 27/Jan/2024 08:38AM
Age/Gender : 33 Y 11 M 7 D/M	Received : 27/Jan/2024 01:35PM
UHID/MR No : CUPP.000085431	Reported : 27/Jan/2024 04:43PM
Visit ID : CUPPOPV128772	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 176416	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	15.1	g/dL	13-17	Spectrophotometer
PCV	44.30	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.71	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	77.5	fL	83-101	Calculated
MCH	26.5	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	14.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	11,810	cells/cu.mm	4000-10000	Electrical Impedence
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	74.2	%	40-80	Electrical Impedence
LYMPHOCYTES	17.8	%	20-40	Electrical Impedence
EOSINOPHILS	1	%	1-6	Electrical Impedence
MONOCYTES	6.8	%	2-10	Electrical Impedence
BASOPHILS	0.2	%	<1-2	Electrical Impedence
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	8763.02	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2102.18	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	118.1	Cells/cu.mm	20-500	Calculated
MONOCYTES	803.08	Cells/cu.mm	200-1000	Calculated
BASOPHILS	23.62	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	223000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	1	mm at the end of 1 hour	0-15	MODIFIED WESTERGRENS
<b>PERIPHERAL SMEAR</b>				
RBC NORMOCYTIC NORMOCHROMIC WBC - MILD NEUTROPHILIC LEUCOCYTOSIS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN				



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

SIN No:BED240019314

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

Page 1 of 16



Patient Name : Mr.SAI KUMAR CHEERLA	Collected : 27/Jan/2024 08:38AM
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**DEPARTMENT OF HAEMATOLOGY**

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

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH MILD NEUTROPHILIC LEUCOCYTOSIS**

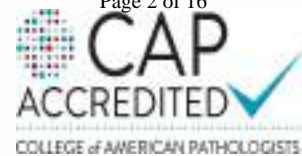


**Dr.KASULA SIDDARTHA**  
**M.B.B.S,DNB(Pathology)**  
**Consultant Pathologist**

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Patient Name : Mr.SAI KUMAR CHEERLA	Collected : 27/Jan/2024 08:38AM
Age/Gender : 33 Y 11 M 7 D/M	Received : 27/Jan/2024 01:38PM
UHID/MR No : CUPP.0000085431	Reported : 27/Jan/2024 03:11PM
Visit ID : CUPPOPV128772	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 176416	

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	85	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  $> \text{ or } = 126 \text{ mg/dL}$  and/or a random / 2 hr post glucose value of  $> \text{ or } = 200 \text{ mg/dL}$  on at least 2 occasions.
- Very high glucose levels ( $>450 \text{ mg/dL}$  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)	100	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	5.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE	114	mg/dL		Calculated

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*Maruthi...*

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

SIN No:EDT240008152

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

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Age/Gender : 33 Y 11 M 7 D/M	Received : 27/Jan/2024 01:38PM
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DEPARTMENT OF BIOCHEMISTRY

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

(eAG)

**Comment:**

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HbA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

**Note:** Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
  - A: HbF >25%
  - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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

SIN No:EDT240008152

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DEPARTMENT OF BIOCHEMISTRY

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

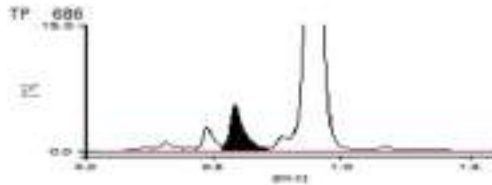
Chromatogram Report

HL072308 75 28 1 2024-01-27 15:02:30  
 ID EDT240008152  
 Sample No. 01270143 SL 0010 - 06  
 Patient ID  
 Name  
 Comment

CALIB	Y = 1.1689X + 0.0048		
Name	%	Time	Area
A1A	0.4	0.24	6.68
A1B	0.9	0.31	14.11
F	0.3	0.41	4.68
LA10 <sup>+</sup>	1.7	0.48	25.87
SA10	5.6	0.59	65.63
AO	32.5	0.88	1389.49
H-V0			
H-V1			
H-V2			

Total Area 1506.36

HbA1c 5.6 % IFGG 38 mmol/mol  
 HbA1 7.0 % HbF 0.3 %



27-01-2024 15:02:30 APOLLO

APOLLO DIAGNOSTICS GLOBAL  
BALAJIPUR



*Maruthi...*

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

SIN No:EDT240008152

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



Patient Name : Mr.SAI KUMAR CHEERLA  
Age/Gender : 33 Y 11 M 7 D/M  
UHID/MR No : CUPP.0000085431  
Visit ID : CUPPOPV128772  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 176416

Collected : 27/Jan/2024 08:38AM  
Received : 27/Jan/2024 01:38PM  
Reported : 27/Jan/2024 03:11PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF BIOCHEMISTRY**

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

*Maruthi...*

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Patient Name : Mr.SAI KUMAR CHEERLA	Collected : 27/Jan/2024 08:38AM
Age/Gender : 33 Y 11 M 7 D/M	Received : 27/Jan/2024 01:50PM
UHID/MR No : CUPP.0000085431	Reported : 27/Jan/2024 05:41PM
Visit ID : CUPPOPV128772	Status : Final Report
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Emp/Auth/TPA ID : 176416	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	<b>208</b>	mg/dL	<200	CHO-POD
TRIGLYCERIDES	<b>194</b>	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	50	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	<b>158</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>119.2</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	<b>38.8</b>	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.16		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.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.56	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.47	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	24	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	67.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.75	g/dL	6.6-8.3	Biuret
ALBUMIN	4.22	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.53	g/dL	2.0-3.5	Calculated
A/G RATIO	1.67		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'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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**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324**



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.95	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	21.50	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.42	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.12	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.07	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137	mmol/L	136-146	ISE (Indirect)
POTASSIUM	3.7	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	101	mmol/L	101-109	ISE (Indirect)



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	18.00	U/L	<55	IFCC

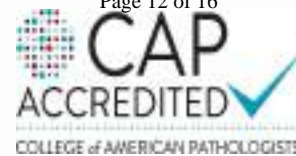
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.14	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.93	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.994	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

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

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




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**DEPARTMENT OF IMMUNOLOGY**

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

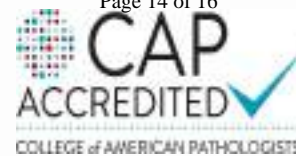


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DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
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
<b>BIOCHEMICAL EXAMINATION</b>				
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
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

*Siddhartha K.*

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

SIN No:UR2268922

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

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**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

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:UF010329

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

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