

Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:34PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 02:38PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.ANISOCYTOSIS+.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS MILD THROMBOCYTOPENIA.LARGE PLATELET SEEN.
NO HEMOPARASITES SEEN



SIN No:BED230123153

APOLLO CLINICS NETWORK

Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
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DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	14.6	g/dL	13-17	Spectrophotometer
PCV	43.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.83	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	90.3	fL	83-101	Calculated
MCH	30.3	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	16.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,780	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	54.6	%	40-80	Electrical Impedence
LYMPHOCYTES	32.9	%	20-40	Electrical Impedence
EOSINOPHILS	3.1	%	1-6	Electrical Impedence
MONOCYTES	8.7	%	2-10	Electrical Impedence
BASOPHILS	0.7	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3155.88	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1901.62	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	179.18	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	502.86	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	40.46	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT	120000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR				
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DEPARTMENT OF HAEMATOLOGY

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

BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

SIN No:BED230123153



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:21PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:52PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	102	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 11:02AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:07PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:44PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	120	mg/dL	70-140	HEXOKINASE
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Comment:

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

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

Ref: Marks medical biochemistry and clinical approach



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UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 02:32PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	100	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 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. Fructosamine may be used as an alternate measurement of glycemic control



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Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:17PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 03:42PM
Visit ID : CVIMOPV542485	Status : Final Report
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Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF BIOCHEMISTRY

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

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

TOTAL CHOLESTEROL	199	mg/dL	<200	CHO-POD
TRIGLYCERIDES	169	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	56	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	144	mg/dL	<130	Calculated
LDL CHOLESTEROL	109.69	mg/dL	<100	Calculated
VLDL CHOLESTEROL	33.82	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.57		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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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DEPARTMENT OF BIOCHEMISTRY

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

BILIRUBIN, TOTAL	1.77	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.28	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	23.37	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.1	U/L	<50	IFCC
ALKALINE PHOSPHATASE	95.25	U/L	30-120	IFCC
PROTEIN, TOTAL	7.61	g/dL	6.6-8.3	Biuret
ALBUMIN	4.59	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.02	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.60	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	16.10	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.68	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.69	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.52	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.54	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.5	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103.79	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
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GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	19.63	U/L	<55	IFCC
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SIN No:SE04381101

Apollo Health and Lifestyle Limited (CN-UR-1-OTC-9902/G-15818)
 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

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:05PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:54PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF IMMUNOLOGY

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

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

TRI-iodothyronine (T3, TOTAL)	0.97	ng/mL	0.7-2.04	CLIA
Thyroxine (T4, TOTAL)	7.03	µg/dL	6.09-12.23	CLIA
Thyroid Stimulating Hormone (TSH)	5.095	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

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



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UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:19PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

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

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2 - 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



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Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:55PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:15PM
Visit ID : CVIMOPV542485	Status : Final Report
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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
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URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
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URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
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*** End Of Report ***


 Dr Sneha Shah
 MBBS, MD (Pathology)
 Consultant Pathologist


 Dr. Sanjay Ingle
 M.B.B.S, MD(Pathology)
 Consultant Pathologist



Bill Of Supply



Name : Mr. Krishna Kumar
Age/Gender : 44 Y M
Contact No : +918329900198
Address : pune
UHID : CVIM.0000226280
Corporate Name : ARCOFEMI HEALTHCARE LIMITED
Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : CVIM-OCR-57663
Bill/Reg Date : 27.05.2023 08:25
Referred by : SELF
Center : Viman Nagar
Emp No/Auth Code : ub0i1166

#	Department	Description Of Service	SAC Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTGST Amt	Net Value
1	Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	999312	1	2,000.00	2,000.00	0.00	0.00	0.00	0.00	0.00	2,000.00

Bill Amount: 2,000.00
Total Discount: 0.00

You can download your report from "www.apolloclinic.com" Enter user name as CVIMOPV542485 and password as 513879
 Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited
 (CIN - UBS110TG2000PLC115819)
 Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor; Ameerpet, Hyderabad 500038, Telangana.;
 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744
APOLLO CLINICS NETWORK
 Telangana: Hyderabad (AS Rao Nagar | Charla Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag
 (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli |
 Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Anna Nagar | Kotturpuram | T Nagar | Valasaravakkam | Velachery
) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie | Kharadi) Uttar Pradesh: Ghaziabad (Indrapuram)

GSTIN: 27AADCA0733E1Z7
Address:
 Shop No 1, Ground,
 Nyati Millennium Premises, Survey no 209,
 Hissa2, Viman Nagar, Maharashtra



Arcofemi/Mediwheel/MALE/FEMALE	Arcofemi MediWheel Full Body Annual Plus Above 50 2D ECH	UBO11166
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Handwritten signature

शुभम शर्मा
Name: SHUBHAM KUMAR
Employee No.: 732771
Date of Issue : 05.01.1979
Blood Group : B +
N.R.O. - PUNE
26.12.2017
Issuing Authority
Date of Issue :
Place of Issue :
शुभम शर्मा
Employee Signature



Union Bank of India

शुभम शर्मा
Union Bank of India

Patient Name : Mr. Krishna Kumar

Age/Gender : 44 Y/M

UHID/MR No. : CVIM.0000226280

OP Visit No : CVIMOPV542485

Sample Collected on :

Reported on : 29-05-2023 13:16

LRN# : RAD2007717

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : ub0i1166

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. PREETI P KATHE
DMRE, MD, DNB
Radiology

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Krishna Kumar on 27/05/2023

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input type="checkbox"/>
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>RD SNHL</u>.....</p> <p>2. <u>low platelet count</u>.....</p> <p>3. <u>high bilirubin</u>.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended 	<input type="checkbox"/>
<ul style="list-style-type: none"> • Unfit 	<input type="checkbox"/>

Dr. Chinmay D. Naik
 Medical Officer, CDM.
 The Apollo Clinic, (Location)
 (Certificate Course in treatment of Diabetes Mellitus)
 Reg. No.: MCI-13/51948

This certificate is not meant for medico-legal purposes

Apollo Health and Lifestyle Limited

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

APOLLO CLINICS NETWORK MAHARASHTRA
 Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

EYE EXAMINATION

DATE:- 27/5/23

NAME:- K. M. G.

AGE:- 40

CORPORATE:- Aropan

	Right Eye	Left Eye
Distant vision	6/6	6/6
Near vision	N/6	N/6
Color vision	Normal	Normal
Fundus examination	Normal	Normal
Intraocular pressure	Normal	Normal
Slit lamp exam.	Normal	Normal

Dr. M. D. Alavan

Impression – Normal Eye Check Up.

(Ophthalmology)



THE APOLLO CLINIC
DR. M. D. ALAVAN
MBBS, D.O.M.S.
Consulting Eye Surgeon
Reg. No.:- 36319
ob.:- 7709006404

Name: *Mr. Krishna Kumar*

Age: *44 y*

Hosp. Regn. No.

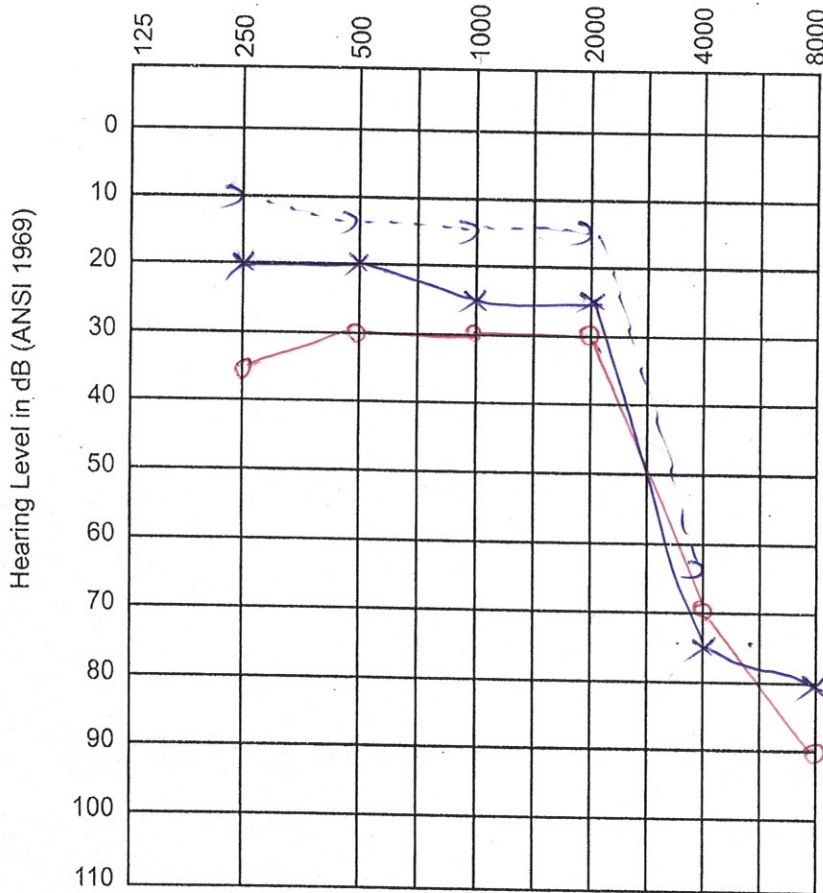
Gender: *Male*

Mobile No:

Date: *27-05-23*

AUDIOGRAM

AUDIOGRAM KEY



Modality	Right	Left
AC Earphone		
Unmasked	○	×
Masked	△	□
No Response-Ac		
Unmasked	⊙	⊗
Masked	⊠	⊡
Bc-Mastoid		
Unmasked	<	>
Masked	[]
No Response		
BC-Mastoid		
UnMasked	⚡	⚡
Masked	⚡	⚡
Colour Code	Red	Blue

Findings **(RT)** - Mild Sensorineural with 4kHz and 8kHz notch high frequency loss.

(LT) - Normal Hearing with 8kHz and 4kHz Notch

Signature

[Handwritten Signature]

226280 KRISHNA KUMAR (V N CLINIC)

Male

44 Years

.....normal P axis, V-rate 50- 99

P Krishna

Rate 52 Sinus rhythm.....

PR 152
QRSD 95
QT 433
QTc 403

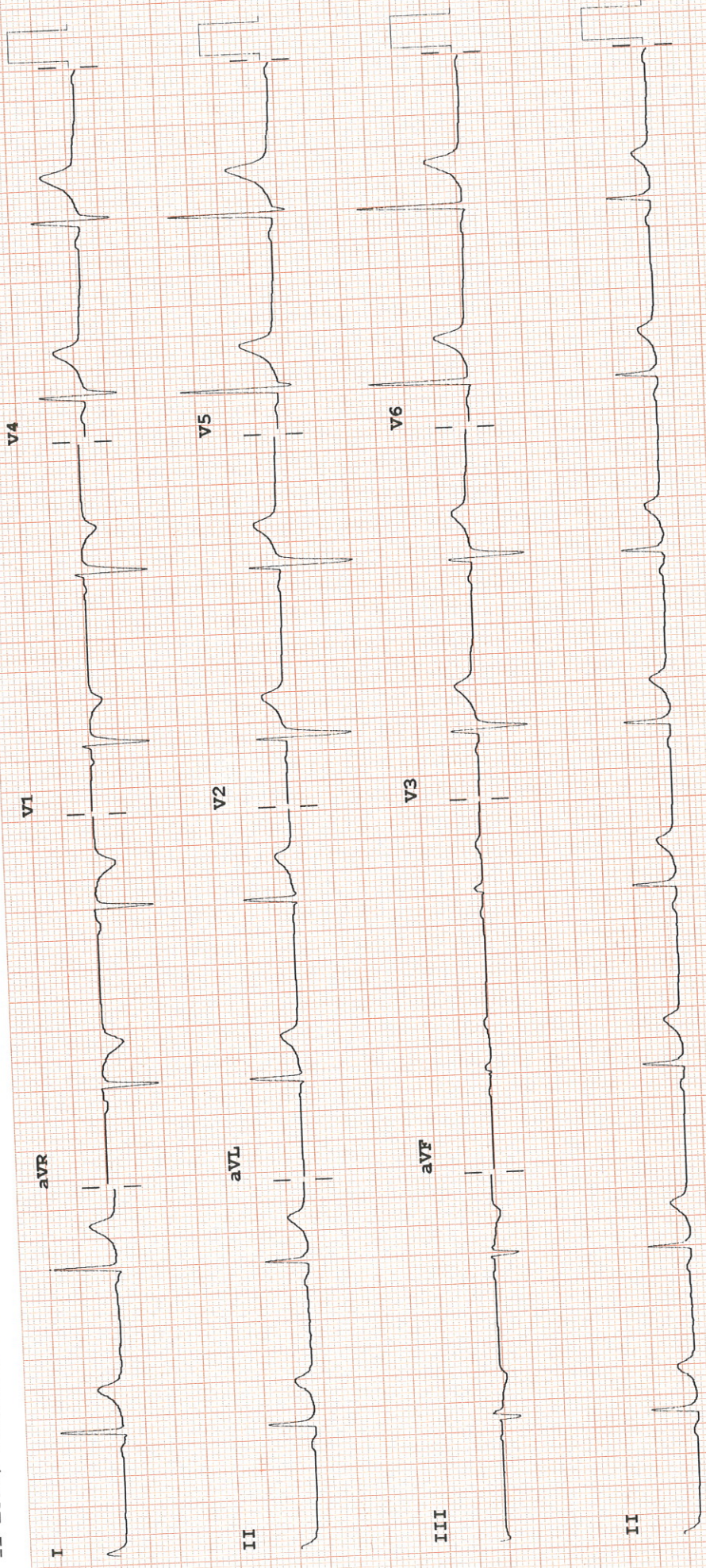
--AXIS--

P 37
QRS 13
T 11

12 Lead; Standard Placement

-- NORMAL ECG --

Unconfirmed Diagnosis



F 50 ~ 0.50 ~ 40 Hz W

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

Device:

PH100B CL P?

REORDER M3708A

PHILIPS

Date : 27-05-2023
 MR NO : CVIM.0000226280
 Name : Mr. Krishna Kumar
 Age/ Gender : 44 Y / Male

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 08:25

Height : 175	Weight : 70.7	BMI : 23	Waist Circum : 92
Temp : 96.50f	Pulse : 84	Resp : 12	B.P : 114/70

General Examination / Allergies
 History

Clinical Diagnosis & Management Plan

. no complaints

SYSTEMIC :

. CVS :
 . CNS :
 . MS :

NAD

Follow up date:

Dr. Chinmay D. Naik

MBBS, DNB
 (Certificate awarded by the Government of Maharashtra)
 Apollo Clinic
 Doctor Signature

Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:34PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 02:38PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.ANISOCYTOSIS+.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS MILD THROMBOCYTOPENIA.LARGE PLATELET SEEN.
NO HEMOPARASITES SEEN



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:34PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 02:35PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF HAEMATOLOGY

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

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

BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



SIN No:BED230123153

Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:35PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 02:32PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	100	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 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. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:17PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 03:42PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.77	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.28	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	23.37	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21.1	U/L	<50	IFCC
ALKALINE PHOSPHATASE	95.25	U/L	30-120	IFCC
PROTEIN, TOTAL	7.61	g/dL	6.6-8.3	Biuret
ALBUMIN	4.59	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.02	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:17PM
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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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	19.63	U/L	<55	IFCC

SIN No:SE04381101



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 01:05PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:54PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.97	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.03	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	5.095	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

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



Patient Name : Mr.KRISHNA KUMAR	Collected : 27/May/2023 08:33AM
Age/Gender : 44 Y 4 M 22 D/M	Received : 27/May/2023 12:53PM
UHID/MR No : CVIM.0000226280	Reported : 27/May/2023 01:19PM
Visit ID : CVIMOPV542485	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : ub0i1166	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

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

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	2 - 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



NAME : KRISHNA KUMAR
AGE: 44 YRS/ MALE

ECHOCARDIOGRAPHY

Mitral valve : . Normal leaflets. No MR. No MS.

Aortic valve : Has thin leaflets, normal gradients across valve.

Tricuspid valve : Thin leaflets, normal gradients across valve. Trivial tricuspid regurgitation. Rvsp- 21 mm hg

Pulmonary valve: Thin leaflets, normal gradients across valves. No pulmonary hypertension.

Left ventricle : LV is normal in size & normal wall thickness.

No segmental wall motion abnormality

Good LV systolic function, LVEF 60%

No LV diastolic dysfunction

Left Atrium : Normal and free of clots.

Right atrium & Right ventricle : Are normal ,

IAS /IVS- intact

No pericardial effusion/No vegetation /clots

M MODE MEASUREMENTS:-

AO : 28

LA : 30

IVS : 11

PW : 10

LVIDd : 38


LVIDs : 33

LVEF : 60%

IMPRESSION :

NORMAL LV SYSTOLIC FUNCTION, LVEF 60%

NO PAH


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

Apollo Health and Lifestyle Limited

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mr. Krishna Kumar

Age : 44 Y M

UHID : CVIM.0000226280

OP Visit No : CVIMOPV542485

Reported on : 27-05-2023 16:57

Printed on : 29-05-2023 09:57

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and raised in echotexture. PV and CBD normal in size at porta hepatis.No dilatation of the intrahepatic biliary radicals.

Gall bladder is partially distended. Wall thickness appears normal.No evidence of periGB collection.

Spleen appears normal. Splenic vein appears normal in size at hilum.

Pancreas appears normal in echopattern. No evidence of peri-pancreatic free fluid or collection.

Both kidneys appear normal in size and echopattern. CM differentiation is maintained. No hydronephrosis seen on either sides. Bilateral renal tiny concretions are seen.

Urinary Bladder is well distended .

Prostate is normal in size.

Gaseous distension of colon is seen.No ascitis is seen.

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APOLLO CLINICS NETWORK MAHARASHTRA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT



Patient Name : Mr. Krishna Kumar
UHID : CVIM.0000226280
Reported on : 27-05-2023 16:57
Adm/Consult Doctor :

Age : 44 Y M
OP Visit No : CVIMOPV542485
Printed on : 29-05-2023 09:57
Ref Doctor : SELF

IMPRESSION:-

---Fatty liver.

---Bilateral renal tiny concretions.

-----Suggest – clinical correlation & further work up.

(The sonography findings should always be considered in correlation with the clinical and other investigation

finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Printed on:27-05-2023 16:57

---End of the Report---



Dr. GIRISH BHOSALE
MBBS DMRD DNB
RADIOLOGY

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK MAHARASHTRA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mr. Krishna Kumar
UHID : CVIM.0000226280
Reported on : 29-05-2023 13:15
Adm/Consult Doctor :

Age : 44 Y M
OP Visit No : CVIMOPV542485
Printed on : 29-05-2023 14:30
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen


Printed on:29-05-2023 13:15

---End of the Report---

Preeti

Dr. PREETI P KATHE
DMRE, MD, DNB
Radiology

I No. 5

Name : Mr. Krishna Kumar	Age : 44 Y	UHID :CVIM.0000226280
Address : pune	Sex : M	
Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT		OP Number :CVIMOPV542485
		Bill No :CVIM-OCR-57663
		Date : 27.05.2023 08:25

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANFERASE (GGT)	
3	HbA1c, GLYCATED HEMOGLOBIN	
4	2 D ECHO 10.15 AM.	
5	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA	
7	GLUCOSE, FASTING	
8	HEMOGRAM + PERIPHERAL SMEAR	
9	ENT CONSULTATION 2nd floor & NO OPD.	
10	FITNESS BY GENERAL PHYSICIAN	
11	DIET CONSULTATION	
12	COMPLETE URINE EXAMINATION	
13	URINE GLUCOSE(POST PRANDIAL)	
14	PERIPHERAL SMEAR	
15	ECG	
16	BLOOD GROUP ABO AND RH FACTOR	
17	LIPID PROFILE	
18	BODY MASS INDEX (BMI)	
19	OPHTHAL BY GENERAL PHYSICIAN	
20	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
21	ULTRASOUND - WHOLE ABDOMEN	
22	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
23	DENTAL CONSULTATION	
24	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

Patient Name : Mr. Krishna Kumar

Age/Gender : 44 Y/M

UHID/MR No. : CVIM.0000226280

OP Visit No : CVIMOPV542485

Sample Collected on :

Reported on : 27-05-2023 16:58

LRN# : RAD2007717

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : ub0i1166

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and raised in echotexture. PV and CBD normal in size at porta hepatis.No dilatation of the intrahepatic biliary radicals.

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Patient Name : Mr. Krishna Kumar

Age/Gender : 44 Y/M

(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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RADIOLOGY