

Patient Name : Ms.KAMALAM A K	Collected : 14/Nov/2024 10:16AM
Age/Gender : 43 Y 3 M 1 D/F	Received : 14/Nov/2024 03:41PM
UHID/MR No : CANN.0000242945	Reported : 14/Nov/2024 04:42PM
Visit ID : CANNOPV431618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 36E2404	

DEPARTMENT OF HAEMATOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.4	g/dL	12-15	Spectrophotometer
PCV	34.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.66	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	74.6	fL	83-101	Calculated
MCH	24.6	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	16.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,600	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	52.9	%	40-80	Electrical Impedance
LYMPHOCYTES	38.2	%	20-40	Electrical Impedance
EOSINOPHILS	2.6	%	1-6	Electrical Impedance
MONOCYTES	5.9	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2962.4	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2139.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	145.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	330.4	Cells/cu.mm	200-1000	Calculated
BASOPHILS	22.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.38		0.78- 3.53	Calculated
PLATELET COUNT	434000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	22	mm/hour	0-20	Capillary photometry
PERIPHERAL SMEAR				

METHODOLOGY : Microscopic
RBC MORPHOLOGY : Mild anisocytosis, microcytic hypochromic RBC's admixed with predominantly normocytic

Dr THILAGA
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



SIN No:CAG241102576
This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.
This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Patient Name : Ms.KAMALAM A K	Collected : 14/Nov/2024 10:16AM
Age/Gender : 43 Y 3 M 1 D/F	Received : 14/Nov/2024 03:40PM
UHID/MR No : CANN.0000242945	Reported : 14/Nov/2024 04:33PM
Visit ID : CANNOPV431618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 36E2404	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	93	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 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. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	76	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. Interval	Method
ALANINE AMINOTRANSFERASE	12	U/L	<50	UV with P5P



DR. R. SRIVATSAN
M.D.(Biochemistry)



SIN No: CAG241102574

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (DN: U65110TG2000PUC1156119)

Regd. Office: 1-10-92/5G, Ashoka Reghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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Patient Name	: Ms.KAMALAM A K	Collected	: 14/Nov/2024 10:16AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

(ALT/SGPT), SERUM

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	0.29	mg/dL	0.3-1.2	DPD

DR.R.SRIVATSAN
M.D.(Biochemistry)



SIN No:CAG241102574

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

Patient Name : Ms.KAMALAM A K	Collected : 14/Nov/2024 10:16AM
Age/Gender : 43 Y 3 M 1 D/F	Received : 14/Nov/2024 03:47PM
UHID/MR No : CANN.0000242945	Reported : 14/Nov/2024 04:37PM
Visit ID : CANNOPV431618	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 36E2404	

DEPARTMENT OF CLINICAL PATHOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

*** End Of Report ***


Dr THILAGA
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



SIN No:CAG241102575
This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN: U65110TG2000PUN015619)
Regd. Office: 1-10-92/52, Anbala Bagh (opposite) Chembur, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohsl.com | Email: hr.enquiry@apollohsl.com, Ph: 0800-988 7777, Fax: 024664 7244

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Patient Name	: Ms. KAMALAM A K	Age	: 43Yrs 3Mths 2Days
UHID	: CANN.0000242945	OP Visit No.	: CANNOPV431618
Printed On	: 14-11-2024 01:11 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 36E2404		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

---End Of The Report---

Dr. PRAVEENA T
MBBS, DMRD, FAGE
72064
Radiology

Patient Name	: Ms. KAMALAM A K	Age	: 43Yrs 3Mths 4Days
UHID	: CANN.0000242945	OP Visit No.	: CANNOPV431618
Printed On	: 16-11-2024 11:50 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 36E2404		

DEPARTMENT OF CARDIOLOGY

ECG Report

Observation :-

Heart rate is 75 beats per minutes.

Impression:

**POOR R WAVE PROGRESSION
NON SPECIFIC ST-T WAVE CHANGES
SINUS ARRHTHMIA**

---End Of The Report---

Dr. ARULNITHI AYYANATHAN
MBBS., MRCP, AB, MBA
63907
Cardiology

CANN-262945
OCR-108218

आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT. OF INDIA

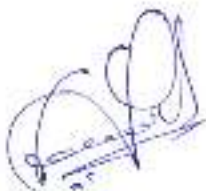
KAMALAM A K
KUPPUSWAMY ALLAPAN

13/08/1981
Permanent Account Number
AQEPK9273K


Signature







Name: Ms. Kamalamm A.K
 Occupation:
 Age: 43 Sex: Male Female
 Address:
 Ph:

Date: 14/1/20 Reg. No: 242915
 Ref. Physician:
 Copies to:

REPORT ON OPHTHALMIC EXAMINATION

History:

Present Complaint:

Regular checkup

ON EXAMINATION:

	RE	LE
Ocular Movements :	Full	Full
Anterior Segment :	N	N
Intra-Ocular-Pressure :		
Visual Acuity: D.V. :		
Without Glass :	6/6	6/6
With Glass :		
N.V. :	N	N
Visual Fields :		
Fundus :		
Impression :		
Advice :		
Colour Vision :	N	N

[Signature]

Fwd: Health Check up Booking Confirmed Request(36E2404),Package Code-, Beneficiary Code-323054

From Kamalam Kuppuswamy <kamalam.aks@gmail.com>
Date Thu 11/14/2024 10:07 AM
To Annanagar Apolloclinic <annanagar@apolloclinic.com>

Hi,

As requested.

Regards
Kamalam

Sent from my iPhone

Begin forwarded message:

From: Mediwheel <wellness@mediwheel.in>
Date: 9 November 2024 at 4:32:46 PM IST
To: kamalam.aks@gmail.com
Cc: customercare@mediwheel.in
Subject: Health Check up Booking Confirmed Request(36E2404),Package Code-, Beneficiary Code-323054

011-41195959

Dear **Kamalam Kuppuswamy**,

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

Hospital Package Name : Pre-employment Health Checkup H

Name of Diagnostic/Hospital : Apollo Clinic - Anna Nagar

Address of Diagnostic/Hospital- : 30, F- Block, 2nd Avenue, Anna Nagar East, Chennai - 600012

City : Chennai
State : Tamil Nadu
Pincode : 600012
Appointment Date : 14-11-2024
Confirmation Status : Booking Confirmed
Preferred Time : 08:30 AM - 09:00 AM
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Kamalam Kuppuswamy	43 year	Male

Note - Please note to not pay any amount at the center.

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.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team
Please Download Mediwheel App

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

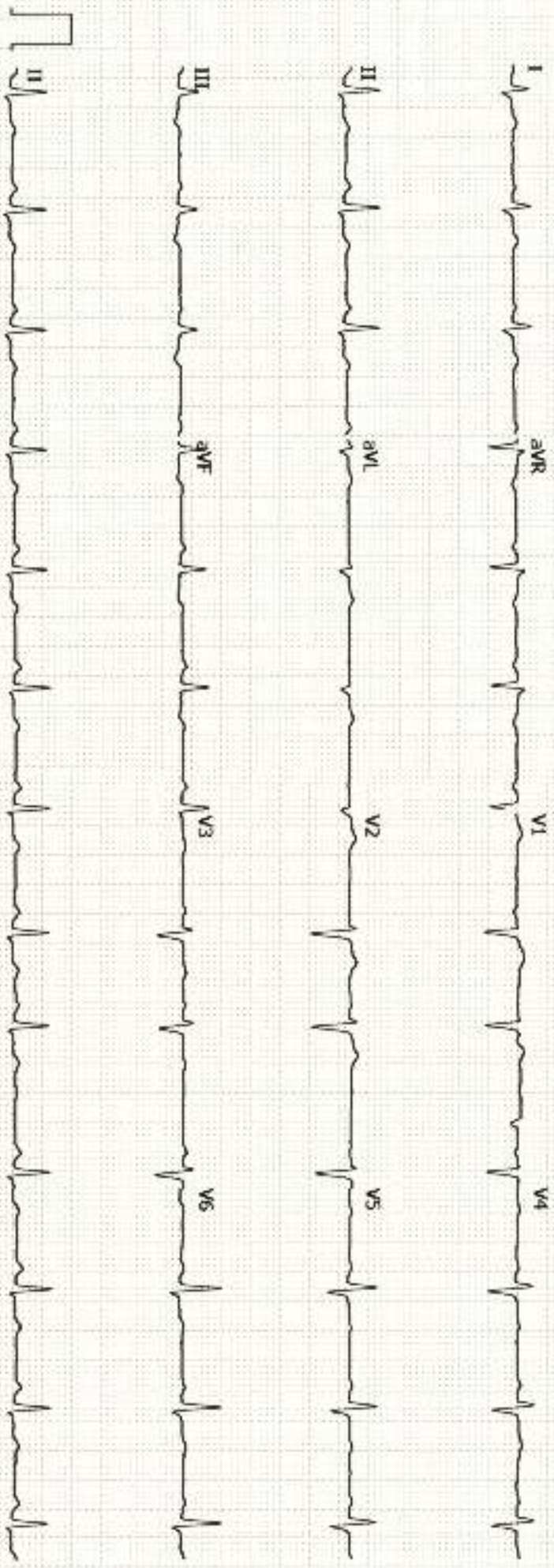
message.

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

Technician:
Ordering Pn:
Referring Pn:
Attending Pn:

QRS : 92 ms
QT / QTcBaz : 348 / 388 ms
PR : 146 ms
P : 98 ms
RR / PP : 798 / 800 ms
P / QRS / T : 55 / 74 / 26 degrees



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Ms. Karalam, A.K on 14/11/24

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 for Employment. 	<input type="checkbox"/>
<p>Fit with restrictions/recommendations</p> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>microcytic Hypochromic RBCs</u></p> <p>2. <u>mcv ↓ Hb ↓ Pft ↑</u></p> <p>3. <u>E.CG → P.PWP</u></p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after <u>2DECHO, Sr. Iron Studies</u></p>	✓
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended • Unfit 	<input type="checkbox"/>

Dr. VIGNESH R. N, MBBS, DNB
Apollo Family Physician
Reg. No. 125615

Dr. [Signature]
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes