

Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:45AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 02:17PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN

SIN No:BED230230598

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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

GSTIN: 37AADCA0733E1Z6
Address: 50-81-1/2, Plot no. 5, Seethamapeta,
Visakhapatnam, Andhra Pradesh



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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	15.1	g/dL	13-17	Spectrophotometer
PCV	44.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.1	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	87	fL	83-101	Calculated
MCH	29.6	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	11.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,800	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

NEUTROPHILS	60.2	%	40-80	Electrical Impedence
LYMPHOCYTES	31.2	%	20-40	Electrical Impedence
EOSINOPHILS	2.9	%	1-6	Electrical Impedence
MONOCYTES	5.6	%	2-10	Electrical Impedence
BASOPHILS	0.1	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4093.6	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2121.6	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	197.2	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	380.8	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	6.8	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT	214000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR				
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GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethamapeta, Visakhapatnam, Andhra Pradesh



APOLLO CLINICS NETWORK

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Visit ID : CVISOPV114735	Status : Final Report
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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			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

SIN No:BED230230598

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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 10:32AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 02:00PM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 03:25PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	147	mg/dL	70-100	GOD - POD
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Comment:

As per American Diabetes Guidelines, 2023

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

Note:

1. The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	236	mg/dL	70-140	GOD - POD
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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.



SIN No:PLF02031127,PLP1371309

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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 02:49PM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 07:52PM
Visit ID : CVISOPV114735	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	8.94	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	210	mg/dL		Calculated

Comment:

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

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 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)

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:EDT230087246

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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GSTIN: 37AADCA0733E1Z6

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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

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

TOTAL CHOLESTEROL	164	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	129	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	33	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	131	mg/dL	<130	Calculated
LDL CHOLESTEROL	105.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	25.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.97		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 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:SE04489719

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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.90	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	79	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	51.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	61.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.50	g/dL	6.3-8.2	Biuret
ALBUMIN	3.90	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.08		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.

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- Correlation with PT (Prothrombin Time) helps.



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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.80	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	29.60	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	13.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.30	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.40	mg/dL	2.5-4.5	PMA Phenol
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.5	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE

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Visakhapatnam, Andhra Pradesh



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.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	37.00	U/L	15-73	Glycylcysteine Nitoranalide



SIN No:SE04489719

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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

GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethamapeta,
Visakhapatnam, Andhra Pradesh



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.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:45AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 03:59PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF IMMUNOLOGY

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
TRI-iodothyronine (T3, TOTAL)	1.71	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	89.90	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	2.230	µIU/mL	0.3-4.5	CLIA

Comment:

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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

TSH	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

Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
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UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 03:59PM
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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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SIN No:SPL23135284

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethamapeta,
Visakhapatnam, Andhra Pradesh



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.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 24/Sep/2023 10:38AM
UHID/MR No : CVIS.0000118804	Reported : 24/Sep/2023 11:11AM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF IMMUNOLOGY

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

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



SIN No:IM06209438

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 |
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GSTIN: 37AADCA0733E1Z6

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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.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 26/Sep/2023 01:13PM
UHID/MR No : CVIS.0000118804	Reported : 26/Sep/2023 04:00PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick

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	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	4-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

SIN No:UR2188953

This test has been performed at Apollo Health and Lifestyle Ltd/Vizag Lab : Vizag-530017

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

GSTIN: 37AADCA0733E1Z6

Address: 50-81-1/2, Plot no. 5, Seethamma peta, Visakhapatnam, Andhra Pradesh



APOLLO CLINICS NETWORK

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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 26/Sep/2023 01:13PM
UHID/MR No : CVIS.0000118804	Reported : 26/Sep/2023 04:00PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick
------------------------	----------	--	----------	----------

***** End Of Report *****

Result/s to Follow:


GLUCOSE (POST PRANDIAL) - URINE



DR. V. SNEHAL
M.D (PATH)
Consultant Pathologist



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



Dr. Michael Leonard Anthony
M.B.B.S, M.D, P.D.C.C (Pathology)
Consultant Pathologist



Patient Name : Mr. CH PRAVEEN KUMAR

Age/Gender : 43 Y/M

UHID/MR No. : CVIS.0000118804

OP Visit No : CVISOPV114735

Sample Collected on :

Reported on : 23-09-2023 16:17

LRN# : RAD2106099

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9533382990

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. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name : Mr. CH PRAVEEN KUMAR

Age/Gender : 43 Y/M

UHID/MR No. : CVIS.0000118804

OP Visit No : CVISOPV114735

Sample Collected on :

Reported on : 23-09-2023 15:25

LRN# : RAD2106099

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9533382990

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver :15 cm. appears normal in size and moderate increased in echotexture. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals.

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

Spleen 11.4 cm.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.

Right kidney : 10.6 x 5.6 cm

Left kidney : 10.8 x 5.9 cm

Urinary Bladder is well distended and appears normal.

Prostate :Normal in size and echo texture.No evidence of necrosis/calcification seen.

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-

***GRADE - II FATTY INFILTRATION OF LIVER.**

For clinico-lab correlation / follow - up / further work up.

This is only a screening test.



Patient Name : Mr. CH PRAVEEN KUMAR

Age/Gender : 43 Y/M

Dr. VINEET WADHWA
DMRD
Radiology

Name: Mr. CH PRAVEEN KUMAR
Age/Gender: 43 Y/M
Address: VIZAG
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. N MUKUNDA RAO

MR No: CVIS.0000118804
Visit ID: CVISOPV114735
Visit Date: 23-09-2023 08:05
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mr. CH PRAVEEN KUMAR
Age/Gender: 43 Y/M
Address: VIZAG
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. GOLI INDIRA PRIYADARSHINI

MR No: CVIS.0000118804
Visit ID: CVISOPV114735
Visit Date: 23-09-2023 08:05
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

Name: Mr. CH PRAVEEN KUMAR
Age/Gender: 43 Y/M
Address: VIZAG
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SRINIVAS GANJI

MR No: CVIS.0000118804
Visit ID: CVISOPV114735
Visit Date: 23-09-2023 08:05
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

Name: Mr. CH PRAVEEN KUMAR
Age/Gender: 43 Y/M
Address: VIZAG
Location: VISAKHAPATNAM, ANDHRA PRADESH
Doctor:
Department: LABORATORY
Rate Plan: VISHAKAPATNAM_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. R ABHISHEK

MR No: CVIS.0000118804
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Visit Date: 23-09-2023 08:05
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HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's 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
23-09-2023 14:10	82 Beats/min	130/80 mmHg	18 Rate/min	98.6 F	161 cms	84 Kgs	%	%	Years	32.41	cms	cms	cms		AHLL09094

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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Vitals

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23-09-2023 14:10	82 Beats/min	130/80 mmHg	18 Rate/min	98.6 F	161 cms	84 Kgs	%	%	Years	32.41	cms	cms	cms		AHLL09094

Physical Medical Examination Format

NAME:- CH- Praveen Kumar	DATE:- 23/9/23
DESIGNATION:-	AGE:- 43 + 1/4
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:- MARRIED/UNMARRIED

MEDICAL EXAMINATION

Complaints (if any)	Nil
Personal /family history	Nil
Past Medical /Occupational History	Nil
Sensitivity/Allergy (if any)	Nil
Heart	Normal
Any other Conditions	Nil

Height:- 161	Weight:- 84	BMI 32.41	Pulse 82
Temp:- 98.6	Pulse 82	Resp:- 18	B.P 130/80

Remarks

Treatment Recommended (if any):

I Hereby Certify that I have examined Mr/Ms. CH- Praveen Kumar for pre-employment /periodical medical examination, I have found / not found any disease, illness, contagious illness

I Certify That Employee Is Medically.....

Fit

Unfit

Signature Of Employee

Temporarily Unfit
 Signature & Seal Of Medical Examiner With
 Regd.No. 63148
 Apollo Family Physician
 Registration No:
 Apollo Clinic, Seethammampet, Vizag

Patient Name	: Mr. CH PRAVEEN KUMAR	Age	: 43 Y/M
UHID	: CVIS.0000118804	OP Visit No	: CVISOPV114735
Reported By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 23-09-2023 14:12
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 82 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 seen.

Impression:

NORMAL RESTING ECG.

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

Dr. SHASHANKA CHUNDURI

Name: Mr. CH PRAVEEN KUMAR
 Age/Gender: 43 Y/M
 Address: VIZAG
 Location: VISAKHAPATNAM, ANDHRA PRADESH
 Doctor:
 Department: LABORATORY
 Rate Plan: VISHAKAPATNAM_06042023
 Sponsor: ARCOFEMI HEALTHCARE LIMITED

MR No: CVIS.0000118804
 Visit ID: CVISOPV114735
 Visit Date: 23-09-2023 08:05
 Discharge Date:
 Referred By: SELF

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
23-09-2023 14:10	82 Beats/min	130/80 mmHg	18 Rate/min	98.6 F	161 cms	84 Kgs	%	%	Years	32.41	cms	cms	cms		AHLL09094

Patient Name	: Mr.CH PRAVEEN KUMAR	Collected	: 23/Sep/2023 08:18AM
Age/Gender	: 43 Y 6 M 6 D/M	Received	: 23/Sep/2023 11:45AM
UHID/MR No	: CVIS.0000118804	Reported	: 23/Sep/2023 02:17PM
Visit ID	: CVISOPV114735	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9533382990		

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN



Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:45AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 02:17PM
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Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	15.1	g/dL	13-17	Spectrophotometer
PCV	44.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.1	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	87	fL	83-101	Calculated
MCH	29.6	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	11.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,800	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	60.2	%	40-80	Electrical Impedance
LYMPHOCYTES	31.2	%	20-40	Electrical Impedance
EOSINOPHILS	2.9	%	1-6	Electrical Impedance
MONOCYTES	5.6	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4093.6	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2121.6	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	197.2	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	380.8	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	6.8	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	214000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR



Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 10:32AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 02:00PM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 03:25PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	147	mg/dL	70-100	GOD - POD
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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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	236	mg/dL	70-140	GOD - POD
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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.



Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	164	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	129	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	33	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	131	mg/dL	<130	Calculated
LDL CHOLESTEROL	105.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	25.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.97		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 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

Patient Name	: Mr.CH PRAVEEN KUMAR	Collected	: 23/Sep/2023 08:18AM
Age/Gender	: 43 Y 6 M 6 D/M	Received	: 23/Sep/2023 11:43AM
UHID/MR No	: CVIS.0000118804	Reported	: 23/Sep/2023 12:47PM
Visit ID	: CVISOPV114735	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 9533382990		

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

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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.90	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	79	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	51.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	61.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.50	g/dL	6.3-8.2	Biuret
ALBUMIN	3.90	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.08		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, Wilsons’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.

ID: 118804

ch praveen kumar
Male 43Years
Req. No. :

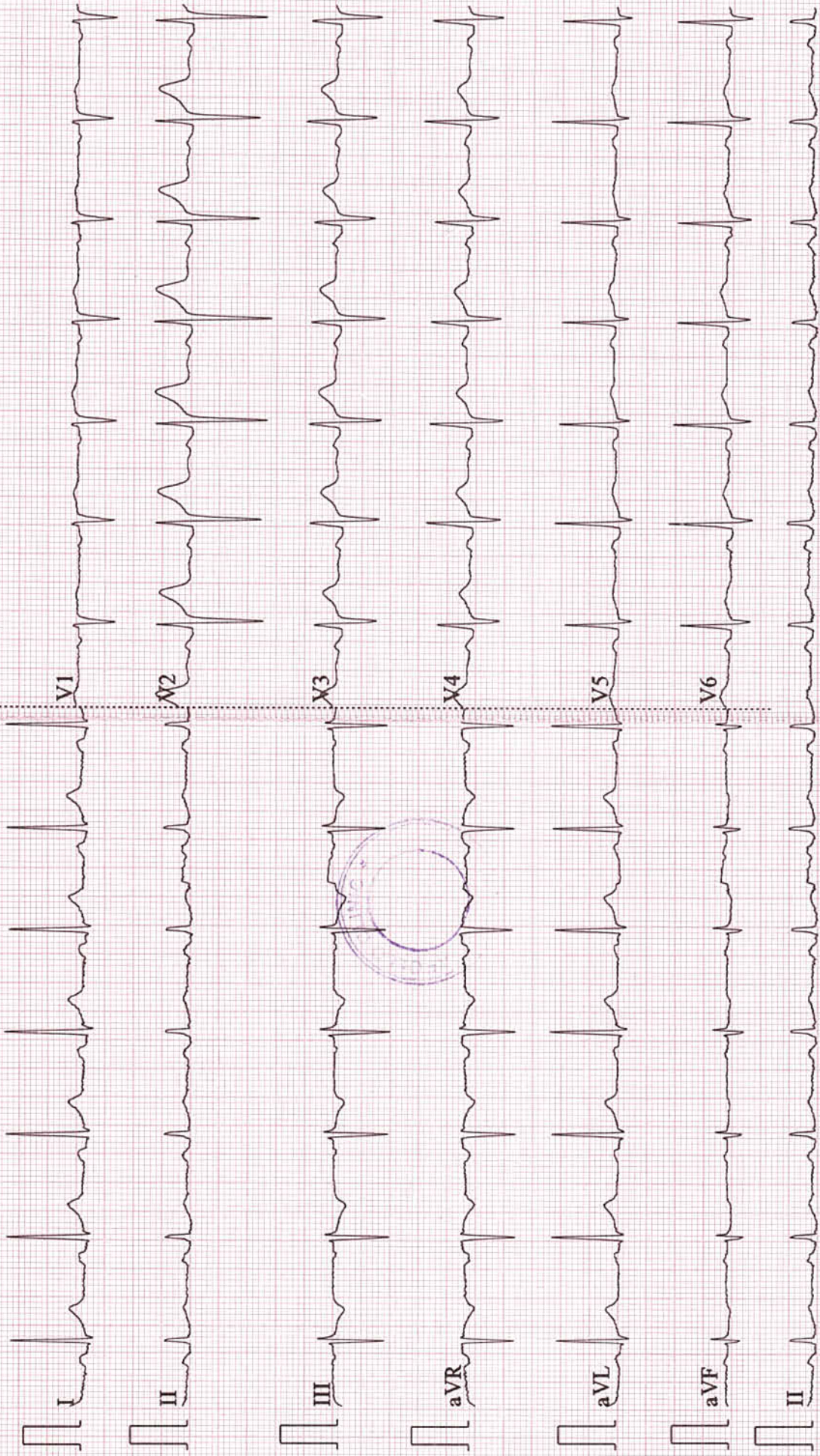
23-09-2023 08:21:56

HR : 82 bpm
P : 112 ms
PR : 160 ms
QRS : 86 ms
QT/QTcBz : 352/412 ms
P/QRS/T : 21/-4/-7 °
RV5/SV1 : 0.968/0.650 mV

Diagnosis Information:

Sinus rhythm
Inferior T wave abnormality is nonspecific
Borderline ECG

Report Confirmed by:



Patient Name	: Mr. CH PRAVEEN KUMAR	Age	: 43 Y M
UHID	: CVIS.0000118804	OP Visit No	: CVISOPV114735
Reported on	: 23-09-2023 16:16	Printed on	: 23-09-2023 16:17
Adm/Consult Doctor	:	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:23-09-2023 16:16

---End of the Report---



Dr. ARUNA PEBBILI
DMRD Radiology
Radiology

Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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• Correlation with PT (Prothrombin Time) helps.



Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.80	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	29.60	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	13.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.50	mg/dL	3.5-8.5	Uricase
CALCIUM	9.30	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	4.40	mg/dL	2.5-4.5	PMA Phenol
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.5	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE



Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:43AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 12:47PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

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

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	37.00	U/L	15-73	Glycylglycine Nitoranalide
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Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:45AM
UHID/MR No : CVIS.0000118804	Reported : 23/Sep/2023 03:59PM
Visit ID : CVISOPV114735	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9533382990	

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

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.71	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	89.90	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	2.230	µIU/mL	0.3-4.5	CLIA

Comment:

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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

TSH	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

Patient Name : Mr.CH PRAVEEN KUMAR	Collected : 23/Sep/2023 08:18AM
Age/Gender : 43 Y 6 M 6 D/M	Received : 23/Sep/2023 11:45AM
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Visit ID : CVISOPV114735	Status : Final Report
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Emp/Auth/TPA ID : 9533382990	


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

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*** End Of Report ***

Result/s to Follow:

COMPLETE URINE EXAMINATION (CUE), GLUCOSE (POST PRANDIAL) - URINE, PROSTATIC SPECIFIC ANTIGEN - TOTAL (PSA), HBA1C (GLYCATED HEMOGLOBIN), BLOOD GROUP ABO AND RH FACTOR, GLUCOSE (FASTING) - URINE



DR. V. SNEHAL
M.D (PATH)
Consultant Pathologist



Patient Name	: Mr. CH PRAVEEN KUMAR	Age	: 43 Y M
UHID	: CVIS.0000118804	OP Visit No	: CVISOPV114735
Reported on	: 23-09-2023 15:24	Printed on	: 23-09-2023 15:25
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver :15 cm. appears normal in size and moderate increased in echotexture. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals.

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

Spleen 11.4 cm.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.

Right kidney : 10.6 x 5.6 cm

Left kidney : 10.8 x 5.9 cm

Urinary Bladder is well distended and appears normal.

Prostate :Normal in size and echo texture.No evidence of necrosis/calcification seen.

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-

Patient Name : Mr. CH PRAVEEN KUMAR

Age : 43 Y M

UHID : CVIS.0000118804

OP Visit No : CVISOPV114735

Reported on : 23-09-2023 15:24

Printed on : 23-09-2023 15:25

Adm/Consult Doctor :

Ref Doctor : SELF

***GRADE - II FATTY INFILTRATION OF LIVER.**

For clinico-lab correlation / follow - up / further work up.

This is only a screening test.

Printed on:23-09-2023 15:24

---End of the Report---

Dr. VINEET WADHWA

DMRD

Radiology

Patient Name	: Mr. CH PRAVEEN KUMAR	Age	: 43 Y/M
UHID	: CVIS.0000118804	OP Visit No	: CVISOPV114735
Conducted By:	: Dr. SHASHANKA CHUNDURI	Conducted Date	: 23-09-2023 12:07
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (cd)	2.3 CM
LA (es)	2.4 CM
LVID (cd)	3.4 CM
LVID (es)	3.2 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.9 CM
EF	60.00%
%FD	33.00%

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

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES :


PF:0.8m/sec.

MF:E>A

AF:0.9m/sec.

IMPRESSION :
NORMAL CARDIAC SIZE.
NO RWMA.
GOOD LV/ RV FUNCTION.
TRIVIALMR/NO AR/NO TR/NO PAH. NO CLOT.
NO PERICARDIAL EFFUSION.
LVEF:60%.

Dr. SHASHANKA
CHUNDURI

Name : Mr. CH PRAVEEN KUMAR Address : VIZAG Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT	Age : 43 Y Sex : M	UHID :CVIS.0000118804  * CVIS . 0 0 0 0 1 1 8 8 0 4 * OP Number :CVISOPV114735 Bill No :CVIS-OCR-62387 Date : 23.09.2023 08:06
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
4	HbA1c, GLYCATED HEMOGLOBIN	
5	2 D ECHO	
6	LIVER FUNCTION TEST (LFT)	
7	X-RAY CHEST PA	
8	GLUCOSE, FASTING	
9	HEMOGRAM + PERIPHERAL SMEAR	
10	ENT CONSULTATION	
11	FITNESS BY GENERAL PHYSICIAN	
12	DIET CONSULTATION	
13	COMPLETE URINE EXAMINATION	
14	URINE GLUCOSE(POST PRANDIAL)	
15	PERIPHERAL SMEAR	
16	ECG	
17	BLOOD GROUP ABO AND RH FACTOR	
18	LIPID PROFILE	
19	BODY MASS INDEX (BMI)	
20	OPHTHAL BY GENERAL PHYSICIAN	
21	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
22	ULTRASOUND - WHOLE ABDOMEN	
23	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
24	DENTAL CONSULTATION	
25	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

Fwd: Health Check up Booking Confirmed Request(UBOI1959),Package Code-PKG10000367, Beneficiary Code-272557

1 message

Praveen Kumar <pluto.praveen@gmail.com>
To: chaitu navadeep <chaitu.internet@gmail.com>

Fri, Sep 22, 2023 at 5:01 PM

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Fri, 15 Sep, 2023, 12:09 pm

Subject: Health Check up Booking Confirmed Request(UBOI1959),Package Code-PKG10000367, Beneficiary Code-272557

To: <pluto.praveen@gmail.com>

Cc: <uttamsingh1994s@gmail.com>



Mediwheel
...Your wellness partner

011-41195959

Dear **CH PRAVEEN KUMAR,**

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

Booking Date : 28-08-2023

Hospital Package Name : Mediwheel Full Body Annual Plus Above 50 Male

Patient Package Name : MediWheel Full Body Health Checkup Male 40 To 50

Name of Diagnostic/Hospital : Apollo Clinic

Address of Diagnostic/Hospital : Apollo Clinic, 50, Plot 5, Sheethammampeta, Beside BVK college, Dwaraka Nagar, Vishakapatnam-530016

City : Visakhapatnam

State :

Pincode : 530016

Appointment Date : 23-09-2023

Confirmation Status : Booking Confirmed

Preferred Time : 9:00am-9:30am

Note - Please note to not pay any amount .

- 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.



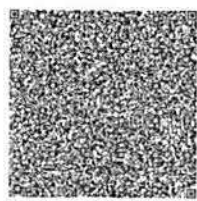
భారత ప్రభుత్వం
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్ / Enrolment No.: 2710/01755/09290

To
చిల్లం ప్రవేన్ కుమార్
Chinchilam Praveen Kumar
C/O Late Chinchilam Bhaklavatsala Rao
4-4-6/1, FLAT NO-JF-2
VICEROY HOMES
PEDAWALTAI
SETTI BALUA STREET
Visakhapatnam (Udhan)
L B Colony
Visakhapatnam Andhra Pradesh - 530017
9533382990

Issue Date: 20/02/2020



మీ ఆధార్ సంఖ్య / Your Aadhaar No.:
4554 4830 8967
UID : 9173 4311 6134 0867
నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



చిల్లం ప్రవేన్ కుమార్
Chinchilam Praveen Kumar
విశిష్ట సంఖ్య: 9173/01/755/09290
లింగం: MALE

Download Date: 29/02/2020

Issue Date: 20/02/2020

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నా ఆధార్, నా గుర్తింపు



సమాచారం

- ఆధార్ ఒక గుర్తింపు చూపే మాత్రమే ధారాపత్రం కాదు
- మరేవిటికీ డాక్యుంట్ లేదా / ఆధార్ వల్ల వి నెట్ / ఆధార్ ప్రామాణికాలను అనుసరించే గుర్తింపు ఉంటుంది.
- ఈ సర్టిఫికేట్ ఎలక్ట్రానిక్స్ ద్వారా ఉత్పత్తం చేయబడింది.

INFORMATION

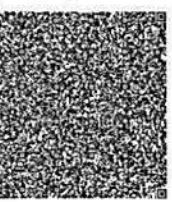
- Aadhaar is a proof of Identity, not of citizenship.
- Verify Identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ఆధార్ ధారాపత్రం మాత్రమే ధారాపత్రం.
- వివిధ ప్రభుత్వ సేవలకు ప్రభుత్వ సేవలను సులభంగా ధారాపత్రం ఆధార్ మీద సాధ్యమవుతుంది.
- ఎలక్ట్రానిక్స్ ద్వారా మాత్రమే ఆధార్ సంఖ్యను ఉత్పత్తం చేయబడింది.
- ఆధార్ ఒక గుర్తింపు చూపే మాత్రమే ధారాపత్రం కాదు.
- ఆధార్ ఆన్ లైన్ ధారాపత్రం. ఆధార్ ను ఎలక్ట్రానిక్స్ ద్వారా ఉత్పత్తం చేయబడింది.
- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



భారత ప్రభుత్వం
Unique Identification Authority of India

చిల్లం ప్రవేన్ కుమార్
C/O లేట్ చిన్చిలం భక్తవత్సలా రావు, 4-4-6/1, ఫ్లాట్ నెంబర్-2, వీసరాయి హోమ్స్, పేదావల్తాయి, విశాఖపట్నం.
సంఖ్య: 9173 - 530017



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UNFIT EXPLANATION

Date: 23/9/2023.
Patient Name: Ch. Peaveenkumar
UHID: 118804
Corporate Name: Arcofemi

The above-mentioned client unfit given due to doctor advised some tests.
As per physician advice it was hold not given FIT, once client met with Physician, we will update closure remarks.

Regards,

Apollo clinic,

Vizag

Ph:0891-2585511/12.