

: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M : STAR.0000065657

UHID/MR No

. 01/410.000000000

Ref Doctor

Visit ID

: STAROPV73733

Emp/Auth/TPA ID

: 0992014455

: Dr.SELF

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 01:17PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

Methodology: Microscopic

RBC : Normocytic normochromic

WBC: Normal in number, morphology and distribution. No abnormal cells seen

Platelets : Adequate on smear.

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 1 of 9



SIN No:BED240234673

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733

Emp/Auth/TPA ID

: Dr.SELF

: 0992014455

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 01:17PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.2	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	43.00	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.96	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.6	fL	83-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	11.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,080	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUN	NT (DLC)			
NEUTROPHILS	51	%	40-80	Electrical Impedance
LYMPHOCYTES	40	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	07	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2590.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2032	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	101.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	355.6	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.28		0.78- 3.53	Calculated
PLATELET COUNT	187000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

Methodology: Microscopic

RBC: Normocytic normochromic

Page 2 of 9



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:BED240234673

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414

Regd Off: 1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733 : Dr.SELF

Emp/Auth/TPA ID

: 0992014455

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 01:17PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

WBC: Normal in number, morphology and distribution. No abnormal cells seen

Platelets: Adequate on smear.

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment: Please Correlate clinically

Page 3 of 9

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:BED240234673

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID

: STAROPV73733

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 0992014455 Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 02:51PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

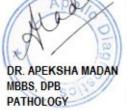
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDT.	A		
BLOOD GROUP TYPE	AB			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

Page 4 of 9





SIN No:BED240234673

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733

Emp/Auth/TPA ID

: Dr.SELF

: 0992014455

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 11:42AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING, NAF PLASMA	102	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- 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.

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

Page 5 of 9



SIN No:PLF02208929

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited) CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 26 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733 : Dr.SELF

Emp/Auth/TPA ID

: 0992014455

Collected

: 04/Oct/2024 10:54AM

Received

: 04/Oct/2024 11:14AM

Reported

: 04/Oct/2024 12:11PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	104	mg/dL	70-140	GOD - POD

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.

Page 6 of 9





SIN No:PLP1486642

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited) CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733

: Dr.SELF

: 0992014455 Emp/Auth/TPA ID

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 11:42AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	14	U/L	4-44	JSCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	0.30	mg/dL	0.1-1.2	Azobilirubin
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO, SERUM				
BLOOD UREA NITROGEN	11.0	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.83	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	13.23			Calculated
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.83	mg/dL	0.6-1.1	ENZYMATIC METHOD



Page 7 of 9



Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited) CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Ref Doctor

Visit ID

: STAROPV73733

Emp/Auth/TPA ID

: Dr.SELF : 0992014455 Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 02:28PM

Reported

: 03/Oct/2024 04:40PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measuremen
pH	6.5		5-7.5	Double Indicator
SP. GRAVITY	1.020		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	Modifed Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Y		
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	Microscopy
RBC	ABSENT	/hpf	0-2	Microscopy
CASTS	7 NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.

*** End Of Report ***

Page 8 of 9



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:UR2415005

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)
CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender

: 34 Y 4 M 25 D/M

UHID/MR No

: STAR.0000065657

Visit ID Ref Doctor : STAROPV73733 : Dr.SELF

Emp/Auth/TPA ID

: 0992014455

Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 02:28PM

Reported

: 03/Oct/2024 04:40PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 9 of 9



CINI No:LID 2415005

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



: Mr.ROHAN SUHAS REGE

Age/Gender UHID/MR No

: 34 Y 4 M 25 D/M : STAR.0000065657

Visit ID

: STAROPV73733

Ref Doctor Emp/Auth/TPA ID

: Dr.SELF : 0992014455 Collected

: 03/Oct/2024 08:22AM

Received

: 03/Oct/2024 02:28PM : 03/Oct/2024 04:40PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY



SIN No:UR2415005

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off: 1-10-62/62,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:



Customer Care

From: noreply@apolloclinics.info
Sent: 30 September 2024 14:18
To: network@mediwheel.in

Cc: cc.tardeo@apollospectra.com; syamsunder.m@apollohl.com

Subject: Your appointment is confirmed



Dear Rohan Rege,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **SPECTRA TARDEO clinic** on **2024-10-01** at **08:00-08:15**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

- 2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
- 3. Please bring all your medical prescriptions and previous health medical records with you.
- 4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

- 1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
- 2. It is advisable not to undergo any health check during menstrual cycle.

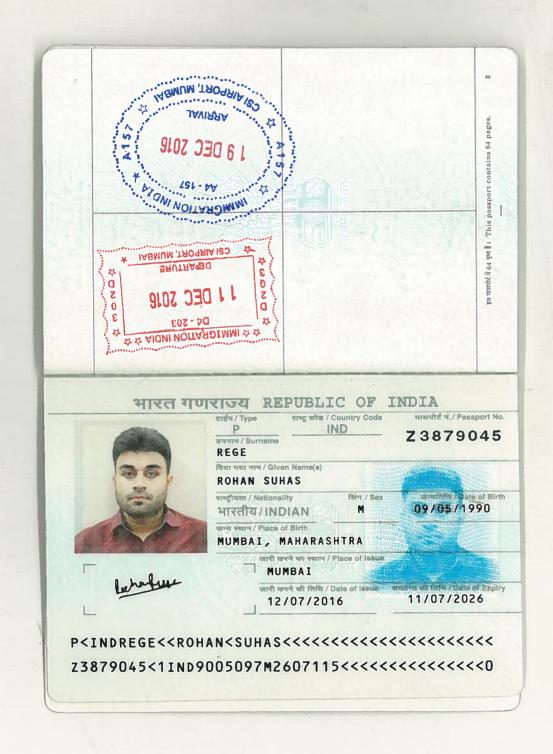
For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: FAMOUS CINE LABS, 156, PT.M.M.MALVIYA RAOD, TARDEO, MUMBAI, 400034.

Contact No: 022 - 4332 4500.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards, Apollo Clinic



Ch 129	
THE ADMINISTRAÇÃO DE PRINCIPA	
	ESPOLENZA A
NO	ITAVR3280 \ fformSi
//	
prospection and their properties delicated delicated their perfect or graph that however, produced for the prospect of the beat or property of the beat of the perspect of the beat or property of the beat of the perspect of	
IS SEBAICE	विविध येवा/ MISCELLANEOU
पिता / कानूनी अविभावक का नाम / Name of Fathe SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE	r/Legal Guardian Z3879045
SUHAS GAJANAN REGE माला का नाम / Name of Mother	(ma to im terme it temples 3 f 23 2 f 2
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या पत्नी का नाम / Name of Spouse	Z3879045
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या परनी का नाम / Name of Spouse	Z3879045
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या पत्नी का नाम / Name of Spouse	Z3879045
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या पत्नी का नाम / Name of Spouse पता / Address 503 YASHOWAN TOWER, LT. MAHIM, MUMBAI PIN: 400016, MAHARASHTRA	DILIP GUPTE MARG
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या पत्नी का नाम / Name of Spouse पता / Address 503 YASHOWAN TOWER, LT. MAHIM, MUMBAI PIN: 400016, MAHARASHTRA पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एर	Z3879045 DILIP GUPTE MARG ,INDIA
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या परनी का नाम / Name of Spouse पता / Address 503 YASHOWAN TOWER, LT. MAHIM, MUMBAI PIN: 400016, MAHARASHTRA पुराने पालपोर्ट का नं. और इसके जारी होने की तिथि ए F7041994 03/03	DILIP GUPTE MARG
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या पत्नी का नाम / Name of Spouse पता / Address 503 YASHOWAN TOWER, LT. MAHIM, MUMBAI PIN: 400016, MAHARASHTRA पुराने पासपोर्ट का नं. और इसके जारी होने की तिथि एर	DILIP GUPTE MARG , INDIA d verifier / Old Passport No. with Date and Place of Issue
SUHAS GAJANAN REGE माता का नाम / Name of Mother HARSHADA SUHAS REGE पति या परनी का नाम / Name of Spouse पता / Address 503 YASHOWAN TOWER, LT. MAHIM, MUMBAI PIN: 400016, MAHARASHTRA पुराने पालपोर्ट का नं. और इसके जारी होने की तिथि एर F7041994 03/03 कार्युक मं./ File No.	DILIP GUPTE MARG , INDIA d verifier / Old Passport No. with Date and Place of Issue



Name : Mr. Rohan Suhas Rege

Age: 34 Y

Sex: M

Address : Mahim

Plan

: ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP

AGREEMENT

UHID:STAR.0000065657

OP Number:STAROPV73733
Bill No :STAR-OCR-8748

Date : 03.10.2024 08:18

Sno	Serive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324	
	BILIRUBIN, TOTAL - SERUM	
	OLUCOSE, FASTING	
	HEMOGRAM + PERIPHERAL SMEAR	
	ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	
	COMPLETE URINE EXAMINATION	BP. BMF
_	PERIPHERAL SMEAR	
	ECG	
	CREATININE, SERUM	
<u></u>	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 4 16 2 4	
· 10	X-RAY CHEST PAL	
	FITNESS BY GENERAL PHYSICIAN	
12	BLOOD GROUP ABO AND RH FACTOR	
13	OPTHAL BY GENERAL PHYSICIAN	
11/	BUN/CREATININE RATIO	
1 [Delet Day Or Mali	

(*T)enfal: Dr Rinal Modi



OUT- PATIENT RECORD

Date

4/0/24

MRNO

Name

65657 Mr Rohan S Rege

Age/Gender

3441m

Mobile No Passport No

Aadhar number :

Pulse :	Qo	B.P: 110/70	Resp: (8	Temp : /V
Weight: 6	6.9	Height: [63	,	Waist Circum: 87 cn

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Unroassied, Norrygetanoan

Sleep: 10 No Allerpy 9 Jab Sulphad

No addreton

operated for Hygrard Dyos borek PH: Moslum: DM.

Normal Reposts

Physician & Cardiologist Reg. No. 56942 Follow up date:

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034 Ph No: 022 - 4332 4500 | www.apollospectra.com



Age/Gender

UHID/MR No Visit ID

Ref Doctor Emp/Auth/TPA ID

: STAROPV73733 : Dr.SELF

: 0992014455

: Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M

: STAR.0000065657

Collected Received

: 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM : 03/Oct/2024 01:17PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

Methodology: Microscopic

RBC: Normocytic normochromic

WBC: Normal in number, morphology and distribution. No abnormal cells seen

Platelets: Adequate on smear.

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically

Page 1 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:BED240234673



Age/Gender UHID/MR No

Visit ID Ref Doctor : Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M : STAR.0000065657

: STAROPV73733

: Dr.SELF : 0992014455 Emp/Auth/TPA ID

Collected Received

Reported

: 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM : 03/Oct/2024 01:17PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.2	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	43.00	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.96	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.6	fL	83-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	11.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,080	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT	(DLC)			
NEUTROPHILS	51	%	40-80	Electrical Impedance
LYMPHOCYTES	40	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	07	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2590.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2032	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	101.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	355.6	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.28		0.78- 3.53	Calculated
PLATELET COUNT	187000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

Methodology: Microscopic

RBC: Normocytic normochromic

Page 2 of 8



DR. APEKSHA MADAN MBBS, DPB

PATHOLOGY

SIN No:BED240234673



Age/Gender

UHID/MR No Visit ID

Ref Doctor Emp/Auth/TPA ID : Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M

: STAR.0000065657 : STAROPV73733

: Dr.SELF

: 0992014455

Collected

: 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM

Received : 03/Oct/2024 01:17PM Reported

Status

: Final Report Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

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

WBC: Normal in number, morphology and distribution. No abnormal cells seen

Platelets: Adequate on smear.

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment: Please Correlate elinically

Page 3 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY SIN No:BED240234673



Age/Gender

Visit ID

UHID/MR No

Ref Doctor

Rh TYPE

: Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M

: STAR.0000065657 : STAROPV73733

: Dr.SELF

: 0992014455 Emp/Auth/TPA ID

Collected Received : 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM

Reported

: 03/Oct/2024 02:51PM

Status Sponsor Name

: Final Report : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name

Result

Unit

Bio. Ref. Interval

Method

Expertise. Empowering you.

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA

BLOOD GROUP TYPE

ΑB

POSITIVE

Forward & Reverse Grouping with Slide/Tube Aggluti Forward & Reverse Grouping with

Slide/Tube Agglutination

Page 4 of 8



DR. APEKSHA MADAN MBBS, DPB

PATHOLOGY SIN No:BED240234673



Visit ID

: Mr.ROHAN SUHAS REGE

Age/Gender

UHID/MR No

Ref Doctor

: STAROPV73733

Emp/Auth/TPA ID

34 Y 4 M 25 D/M

: STAR.0000065657

: Dr.SELF

: 0992014455

Collected

: 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM

Received : 03/Oct/2024 11:42AM Reported

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

Method

GOD - POD

DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name GLUCOSE, FASTING, NAF PLASMA	Result 102	Unit mg/dL	Bio. Ref. Interval 70-100
Comment: As per American Diabetes Guidelines, 2023	;	. m m m v. m. v. m. v.	a programment of the filler of the deleter of the d
Fasting Glucose Values in mg/dL	Interpretation		
70-100 mg/dL	Normal		
100-125 mg/dL	Prediabetes		

Note:

≥126 mg/dL

<70 mg/dL

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.

Diabetes

Hypoglycemia

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	14	U/L	4-44	JSCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method	
BILIRUBIN, TOTAL , SERUM	0.30	mg/dL	0.1-1.2	Azobilirubin	

DR. APEKSHA MADAN

MBBS, DPB PATHOLOGY

SIN No:SE04831899



Page 5 of 8



Age/Gender

UHID/MR No

Visit ID

Ref Doctor

: Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M

: STAR.0000065657

: STAROPV73733 : Dr.SELF

Emp/Auth/TPA ID : 0992014455 Collected Received : 03/Oct/2024 08:22AM

: 03/Oct/2024 10:48AM : 03/Oct/2024 11:42AM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO , SERUM BLOOD UREA NITROGEN CREATININE BUN / CREATININE RATIO	11.0 0.83 13.23	mg/dL mg/dL	8.0 - 23.0 0.6-1.1	Calculated ENZYMATIC METHOD Calculated
Test Name CREATININE, SERUM	Result 0.83	Unit mg/dL	Bio. Ref. Interval 0.6-1.1	Method ENZYMATIC METHOD

Page 6 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY SIN No:SE04831899



Age/Gender

UHID/MR No

Visit ID Ref Doctor

Emp/Auth/TPA ID

: Mr.ROHAN SUHAS REGE

: 34 Y 4 M 25 D/M

: STAR.0000065657 : STAROPV73733

: Dr.SELF : 0992014455 Collected

: 03/Oct/2024 08:22AM

: 03/Oct/2024 02:28PM

Received Reported

: 03/Oct/2024 04:40PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

Expertise. Empowering you.

N4 - 4 h - d

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

Test Name Result		Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION	(CUE) , URINE			
PHYSICAL EXAMINATION				
COLOUR TRANSPARENCY pH SP. GRAVITY	PALE YELLOW CLEAR 6.5 1.020		PALE YELLOW CLEAR 5-7.5 1.002-1.030	Visual Physical Measurement Double Indicator Bromothymol Blue
BIOCHEMICAL EXAMINATION URINE PROTEIN	NEGATIVE		NEGATIVE	Protein Error Of Indicator
GLUCOSE URINE BILIRUBIN URINE KETONES (RANDOM) UROBILINOGEN	NEGATIVE NEGATIVE NEGATIVE NORMAL		NEGATIVE NEGATIVE NEGATIVE NORMAL	Glucose Oxidase Azo Coupling Reaction Sodium Nitro Prusside Modifed Ehrlich Reaction
NITRITE LEUCOCYTE ESTERASE CENTRIFUGED SEDIMENT WET	NEGATIVE NEGATIVE MOUNT AND MICROSCOPY		NEGATIVE NEGATIVE	Diazotization Leucocyte Esterase
PUS CELLS EPITHELIAL CELLS RBC CASTS CRYSTALS	1-2 0-1 ABSENT NIL ABSENT	/hpf /hpf /hpf	0-5 <10 0-2 0-2 Hyaline Cast ABSENT	Microscopy Microscopy Microscopy Microscopy Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.

*** End Of Report ***

Page 7 of 8



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:UR2415005



Age/Gender

UHID/MR No

Visit ID

Ref Doctor Emp/Auth/TPA ID

: Mr.ROHAN SUHAS REGE

: 34 Y 4 M 26 D/M

STAR.0000065657

: STAROPV73733 : Dr.SELF

: 0992014455

Collected Received : 04/Oct/2024 10:54AM

: 04/Oct/2024 11:14AM : 04/Oct/2024 12:11PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name

Result 104

Unit mg/dL Bio. Ref. Interval 70-140

Method

GOD - POD

Expertise. Empowering you

GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)

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

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dictary 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.

*** End Of Report ***

Page 1 of 1



DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:PLP1486642



Expertise. Empowering you.

Patient Name

: Mr.ROHAN SUHAS REGE

Age/Gender UHID/MR No : 34 Y 4 M 26 D/M : STAR.0000065657

Visit ID

: STAROPV73733

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 0992014455 Collected

: 04/Oct/2024 10:54AM

Received

: 04/Oct/2024 11:14AM : 04/Oct/2024 12:11PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient.

Assays are performed in accordance with standard procedures. The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.

DR. APEKSHA MADAN

PATHOLOGY SIN No:PLP1486642

MBBS, DPB



Ph No: 040-4904 7777 | www.apollohl.com | Email ID:enquiry@apollohl.com





Name

: Mr. Rohan Rege

Date

: 03/10/2024

Age

: 34 Year(s)

Sex

: Male

Ref by

: Health Check Up

Visit Type : OPD

UHID

: STAR.0000065657

PLAIN RADIOGRAPH OF CHEST (PA VIEW)

- Lungs show equal translucency and normal vasculature on both sides.
- No active pulmonary lesion seen.
- Trachea and mediastinum are in midline.
- Cardiac size and configuration are within normal limits.
- Pleural cavities are clear.
- Domes of diaphragm are smooth in outline.
- Bony thorax is normal.

CONCLUSION: No evidence of pulmonary, pleural or cardiac lesion seen.

Dr. Vinod V. Shetty

Radiologist

Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034 Ph No: 022 - 4332 4500 | www.apollospectra.com



mr-Rohan Rege Age

Height

163cm

Male

Gender

Date 4. 10. 2024

Time

11:18:26

APOLLO SPECTRA HOSPITAL

Body Composit	ion				Segmen	tal Lean	Lean Mass Evaluation	
Weight	40 55 70 85 100	115 130 145 160 175 65. 9 kg	190 205	19. 7 ~ 67. 2	2. 7kg Normal		3. 3 kg Over	
Muscle Mass Skeletal Muscle Mass	60 70 80 90 100	110 120 130 140 150 B. 2 kg	160 170	24. 8 ~ 30. 3	-eft	Trunk 23. 8kg		Right
Body Fat Mass	20 10 60 80 100	160 220 280 340 400	460 520	7. 0 ~ 14. 0	ي	Normal	,	jht
T B W Total Body Water	36. 6 kg (32. 9~ 40. 2)	F F M Fat Free Mass	49. 9 kg	(42. 7~53. 2)	7.3kg Normal		7.3kg Normal	
Protein	10. 1 kg (8. 8~10. 8)	Mineral*		(3. 04~3. 72)				
		* Mineral is estimated					PBF Fat Mass	

Obesity Diagnosis

Obesity D	-			Nutrition	al Evaluatio	n	
4			MAINTER REGIONS	Protein	Mormal	□ Deficient	
ВМІ				Mineral	$ \underline{M} $ Normal	□ Deficient	
Body Mass Index	(kg/m²)	24. 8	18. $5 \sim 25.0$	Fat	□Normal	□ Deficient	☑ Excessive
			***	Weight M	lanagemen	t	
PBF Percent Body Fat	(%)	24. 3	10.0 ~ 20.0	Weight	✓ Normal	□ Under	□ Over
reitent body rat				SMM	Mormal	□Under	Strong
WHR		0.04		Fat	□Normal	□Under	✓ Over
VV F1 K Waist-Hip Ratio		0. 94	0.80~0.90	Obesity E	Diagnosis		
BMR	** 15			ВМІ	Mormai	Under Extremely	Over Over
Basal Metabolic Rat	(kcal)	Tai) 1447 14	1459 ~ 1701	PBF	□Normal	□ Under	✓ Over
				WHR	□Normal	□ Under	

	Segment	tal Fat	PBF Fat Mass Evaluation	
	34. 8%		6.4%	
	1. 5 kg		0. 2 kg	
Left	Over	Trunk 25. 7% 8. 7 kg Over	Under	Night
	22. 4%		22. 5%	
	2. 2kg		2. 2kg	
	Normal		Normal	
	:	¥ Segmantal Fat	is estimated	

Muscle-Fat Control

Muscle Control

 $0.0 \, \mathrm{kg}$

Fat Control

 $7.2 \, \mathrm{kg}$

Fitness Score

73

Impedance

Z RA LA TR RL LL 20kHz 279. 9 289. 2 27. 6 274. 3 273. 9 100kHz 189, 1 322, 2 22, 8 238, 0 238, 3

Exercise Planner Plan your weekly exercises from the followings and estimate your weight loss from those activities.

	Energy expenditure of each activity(base weight: 65, 9 kg / Duration: 30min. / unit: kcal)										. 0		
	ĵ	Walking	1781	Jogging	MC	Bicycle		Swim	<u>L</u>	Mountain Climbing	% /	Aerobic	1
	N	132	P	231		198	^	231	1	215		231	ı
	1 Pais	Table tennis	& :-	Tennis	*	Football		Oriental Fencing	A.	Gate ball	<u> </u>	. Badminton	
	N	149	7	198	1.	231	人	330	$V^{\mathcal{F}}$	125	M	149	
	2	Racket ball		Tae- kwon-do	. 3	Squash	*	Basketball	•	Rope jumping	1	Golf	
N. Carlot	A	330		330	97	330	人	198		231	A	116	•
,		Push-ups	e.	Sit-ups	6	Weight training	ů.	Dumbbell exercise	9	Elastic band		Squats	0
	TEM.	development of upper body		abdominal muscle training		backache prevention	K	muscle strength		muscle strength	\$ 1	maintenance of lower body muscle	
	·		l						L		<u> </u>		

• How to do

- 1. Choose practicable and preferable activities from the left.
- 2. Choose exercises that you are going to do for 7 days.
- 3. Calculate the total energy expenditure for a week.
- 4. Estimate expected total weight loss for a month using the formula shown below.
- Recommended calorie intake per day 1900

*Calculation for expected total weight loss for 4 weeks: **Total energy expenditure (kcal/week)** X 4weeks ÷ 7700

^{*} Use your results as reference when consulting with your physician or fitness trainer.



Patient Name: Mr. Rohan Suhas RegeAge/Gender: 34 Y/M

UHID/MR No.: STAR.0000065657OP Visit No: STAROPV73733Sample Collected on: 03-10-2024 13:03

Ref Doctor : SELF **Emp/Auth/TPA ID** : 0992014455

LRN#

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Dr. VINOD SHETTYRadiology



Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd) F-701A, Lado Sarai, Mehrauli, New Delhi - 110030 Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that <u>Mr.Rohan Suhas Rege</u> aged, <u>34yr</u>. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: Mumbai

Date: 03/10/2024

Name & Signature of

Medical officer