

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार है हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. KIRAN K S
क.कू.संख्या	163376
पदनाम	BRANCH HEAD
कार्य का स्थान	RANIPETTAI
जन्म की तारीख	17-02-1978
स्वास्थ्य जांच की प्रस्तावित तारीख	10-02-2024
बुकिंग संदर्भ सं.	23M163376100089712E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 09-02-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)

MR KIRAN K S
ID: 232891 RMC

10.02.2024 12:36:22 PM
APOLLO MEDICAL CENTER
ANNA NAGAR
CHENNAI

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

78 bpm
--/-- mmHg

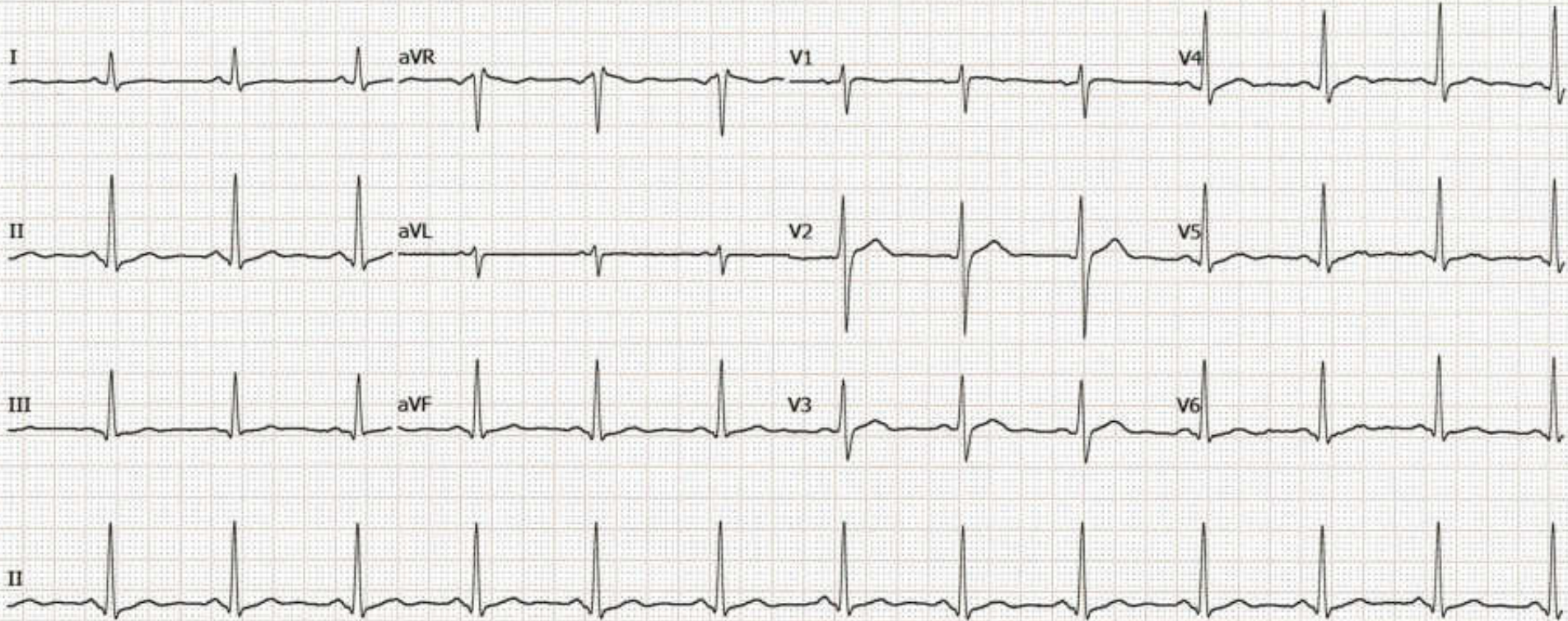
13

45 Years

Male

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 100 ms
QT / QTcBaz : 370 / 421 ms
PR : 130 ms
P : 100 ms
RR / PP : 772 / 769 ms
P / QRS / T : 52 / 69 / 62 degrees



Handwritten signature

S/B Dr. SUNNY

Mr. KERAN . K . S

10/2/24

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies History

Co Heaviness
in (R)
Ear

C

HE: (R) EAR



(L) EAR → WAX (+)

NOSE

THROAT (NA)

R/A 3 days for wax removal (+)

Plan Audiometry thereafter

Follow up date:

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

S. No.	NAME OF DRUG & STRENGTH <small>Generic Name And In Capital</small>	A		B				C	(A*B*C)		
		Medication Dosage	Route	Allergies	Timing	Night	No. of Days	Total Qty.	Instructions for Administering Dosage		
									Before Meal	After Meal	Others
1	Solimax ear										
2	drops	30	✓	✓	✓	3					
3	(L) Ear)										
4											
5											
6											
7											
8											
9											

RECOMMENDED INVESTIGATIONS

BIO CHEMISTRY

- ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM
- CALCIUM, SERUM
- CREATININE, SERUM
- FREE T4 SERUM
- GLUCOSE (FASTING)
- GLUCOSE (POST PRANDIAL)
- GLUCOSE, FASTING (F) AND POST PRANDIAL (PP)
- GLUCOSE, RANDOM
- HbA1c
- IgE (TOTAL)
- LIPID PROFILE
- LIVER FUNCTION TESTS (LFT)
- PROLACTIN - SERUM
- SERUM ELECTROLYTES
- THYROID FUNCTION TEST, TOTAL
- TOTAL BETA- HCG (TB-HCG)
- TSH: THYROID STIMULATING HORMONE-SERUM-FREE
- UREA - SERUM / PLASMA
- URIC ACID SERUM
- VITAMIN B12 -SERUM
- VITAMIN D3

SEROLOGY

- C-REACTIVE PROTEIN (Qualitative)
- DENGUE IgM
- DENGUE IgM & IgG
- DENGUE NS1 ANTIGEN
- HIV I AND II ANTIBODIES
- MALARIAL ANTIGEN (VIVAX AND FALCIPARUM)
- RHEUMATOID FACTOR - SERUM
- TYPHI DOT - M
- WIDAL TEST

HEMATOLOGY

- ABSOLUTE EOSINOPHIL COUNT
- BLOOD GROUP ABO & Rh FACTOR
- COMPLETE BLOOD COUNT
- ERYTHROCYTE SEDIMENTATION RATE (ESR)
- HEMOGRAM (CBP+ ESR)
- PERIPHERAL SMEAR FOR MALARIAL PARASITE (MP)
- PLATELET COUNT

RADIOLOGY

- ULTRASOUND - ABDOMEN AND PELVIS
- ULTRASOUND - WHOLE ABDOMEN
- ULTRASOUND EARLY PREGNANCY (WITHIN 10 WEEKS)
- X-RAY CERVICAL SPINE AP AND LAT
- X-RAY CHEST PA
- X-RAY LUMBAR SPINE AP AND LAT
- X-RAY PNS

CARDIOLOGY

- 2D-ECHO WITH COLOUR DOPPLER
- CARDIAC STRESS TEST - (TMT)
- ECG

CLINICAL PATHOLOGY & MICRO BIOLOGY

- URINE ROUTINE (CUE)
- CULTURE AND SENSITIVITY (URINE)
- URINE ROUTINE AND MICROSCOPY

OTHER

- PULMONARY FUNCTION TEST

Additional Investigation Recommended:

In case of emergency or any rash or other allergic complaints, please call 1066 or come directly to emergency room of the hospital

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

Name: Mr. Kiran
 Occupation:
 Age: 45 Sex: Male Female
 Address:
 Ph:

Date: 10/02/24 Reg. No: 390934
 Ref. Physician:
 Copies to:

REPORT ON OPHTHALMIC EXAMINATION

History:

Present Complaint:

ON EXAMINATION:

RE

LE

Ocular Movements :

Anterior Segment :

Intra-Ocular-Pressure :

Visual Acuity: D.V. :

Without Glass :

With Glass :

N.V. :

Visual Fields :

Fundus :

Impression :

Advice :

Colour Vision :

6/60
6/6
Add +1.50D sph N6

6/24
6/6
Add +1.50D sph N6

Normal

Normal

10/02/2024

MR KIRAN. K.S

45/M

232891

Height:	Weight:	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination / Allergies
History

Rx

Adv Scaling



Follow up date:

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

CANN-232891
OCC-99877



बैंक ऑफ बरोडा
Bank of Baroda

किरण के एस
Kiran K S
163376



किरण के एस
Signature of Holder

किरण के एस
Signature of Holder

Patient Name	: Mr. KIRAN K S	Age	: 46 Y/M
UHID	: CANN.0000232891	OP Visit No	: CANNOPV390934
Reported By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 10-02-2024 16:48
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 78 beats per minutes.

Impression:

NORMAL RESTING ECG.

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

Dr. ARULNITHI AYYANATHAN

Patient Name : Mr. KIRAN K S Age : 46 Y/M
UHID : CANN.0000232891 OP Visit No : CANNOPV390934
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 10-02-2024 15:21
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.9CM
LA (es)	3.5CM
LVID (ed)	4.6CM
LVID (es)	3.0CM
IVS (Ed)	0.9CM
LVPW (Ed)	1.0CM
EF	65%
%FD	35%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
PULMONARY VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
PULMONARY ARTERY	NORMAL
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
LEFT VENTRICLE	NORMAL
PERICARDIUM	NORMAL

Patient Name	: Mr. KIRAN K S	Age	: 46 Y/M
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Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 10-02-2024 15:21
Referred By	: SELF		

DOPPLER STUDIES MITRAL INFLOW :

E : 0.8m/sc A: 0.6 m/sc

Velocity / Gradient Across Pulmonic Valve : 1.0m/sc

Velocity / Gradient Across Aortic Valve : 0.8m/sc

IMPRESSION :

NO RWMA

NORMAL LEFT VENTRICULAR FUNCTION(EF - 65%)

NORMAL CARDIAC CHAMBERS & VALVES

TRIVIAL TRICUSPID REGURGITATION

NO PAH / CLOT / PE .

Dr.
RAKESH P
GOPAL

Patient Name	: Mr. KIRAN K S	Age	: 46 Y/M
UHID	: CANN.0000232891	OP Visit No	: CANNOPV390934
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 10-02-2024 15:21
Referred By	: SELF		

Name: Mr. KIRAN K S
Age/Gender: 46 Y/M
Address: #247 VASANTHA STREET GOLDEN GEORGE COLONY
MOGAPPAIR EAST
Location: CHENNAI, TAMIL NADU
Doctor: Dr. ANUSHA ARUMUGAM
Department: General Practice
Rate Plan: ANNANAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. ANUSHA ARUMUGAM

MR No: CANN.0000232891
Visit ID: CANNOPV390934
Visit Date: 10-02-2024 10:26
Discharge Date:
Referred By: SELF

DRUG ALLERGY

DRUG ALLERGY: **FLUROQUINOLONE ALLERGY,**

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: **For Corporate Health Checkup,**

Present Known Illness

No history of: **No History of diabetes / Hypertension / Heart Disease,**

SYSTEMIC REVIEW

Cardiovascular System

CHEST PAIN: **No,**

GastroIntestinal System

APPETITE.: (+) **Good,**

BOWEL HABITS : **regular,**

Flatulence and Dyspepsia: (+) **Secondary to outside food ,**

GenitoUrinary System

:- **Nil,**

Central Nervous System

HEAD ACHE : **On and Off,**

SLEEP- : **Normal,**

Eye

Vision : **Normal,**

Glasses : **Yes,**

****Weight**

--->: **Stable,**

HT-HISTORY

Past Medical History

**Cancer: No,

Past surgical history

Appendectomy: 2017,

Personal History

Marital Status	Married,
-->	
No. of Children	2,
-->	
Diet	Vegetarian,
-->	
Physical Activity	Mild,

PHYSICAL EXAMINATION

General Examination

Height (in cms): 164,

Weight (in Kgs): 76,

Waist: 94,

Hip: 100,

SYSTEMIC EXAMINATION

CardioVascularSystem

Heart Rate(Per Minute):: 82,

Systolic: 120,

Diastolic: 80,

IMPRESSION

Apollo Health check

Findings: 1. HLD 2. Gall Bladder Polyp / Calculus ,

RECOMMENDATION

Advice on Diet

Diet instructions : Low fat diet,

Advice on Physical Activity

Advice on Physical Activity: Regular Physical Exercise,

Advice on Medication

Advice: **TAB. ROSEDAY (10 MG) (0-0-1) - 3 MONTHS,**

Other Recommendations

Test/Investigation: **To get Gastroenterologist opinion,**

DISCLAIMER

Disclaimer: **The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,**

Doctor's Signature

Patient Name	: Mr. KIRAN K S	Age/Gender	: 45 Y/M
UHID/MR No.	: CANN.0000232891	OP Visit No	: CANNOPV390934
Sample Collected on	:	Reported on	: 10-02-2024 14:17
LRN#	: RAD2232564	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 103376		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic 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.**

Dr. PRAVEENA SHEKAR T
MBBS, DMRD, FAGE
Radiology

Patient Name	: Mr. KIRAN K S	Age/Gender	: 45 Y/M
UHID/MR No.	: CANN.0000232891	OP Visit No	: CANNOPV390934
Sample Collected on	:	Reported on	: 10-02-2024 19:00
LRN#	: RAD2232564	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 103376		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of focal or diffuse pathology.
Intra and extra hepatic biliary passages are not dilated.

Gall bladder - A polyp measuring 3-4 mm size noted in gall bladder. Another echogenic lesion ~ 5 mm (polyp / calculus) noted in gall bladder.

Pancreas and spleen appear normal.
Spleen measures 10.4 cms.

Portal and splenic veins appear normal.
No evidence of ascites or lymphadenopathy.

Diaphragmatic movements are satisfactory.
There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 10.1 x 4.8 cms.
Left kidney measures 10.6 x 4.9 cms.
Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Prostate measures 2.7 x 3.8 x 2.9 cms volume 16 cc and shows normal echopattern.
Seminal vesicles appear normal.
Bladder is normal in contour.

IMPRESSION:

Patient Name : Mr. KIRAN K S

Age/Gender : 45 Y/M

- * GALL BLADDER POLYP.
- * GALL BLADDER POLYP / CALCULUS
- SUGGESTED REVIEW SCAN IN FASTING.

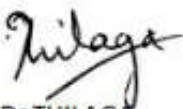
Dr. PRAVEENA SHEKAR T
MBBS, DMRD, FAGE
Radiology

Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 06:48PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 09:12PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

METHODOLOGY	: Microscopic
RBC MORPHOLOGY	: Mild anisocytosis, predominantly normocytic normochromic RBC's noted.
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.
PLATELETS	: Adequate in number.
PARASITES	: No haemoparasites seen.
NOTE/ COMMENT	: Please correlate clinically.



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

SIN No:BED240034016

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 (CIN - U85110TG2000PLC115B19)
Regd. Office: 1-10-66/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 940-4904 7777, Fax No: 4904 7744

Address:
D No.36, F - Block, 2nd Avenue, Anna Nagar East, Chennai-600 102.
Phone - 044 26224504 / 85

1860 500 7788
www.apolloclinic.com

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh: Vizag** (Seethamma Peta) | **Karnataka: Bangalore** (Banwanagudi | Bellandur | Electronics City | Frazer Town | Hill Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamil Nadu: Chennai** (Anna Nagar | Kotturpuram | Mogappair | T Nagar | Velamavakkam | Velachery) | **Maharashtra: Pune** (Aundh | Nigdi Pradhikaran | Viman Nagar | Warananer) | **Uttar Pradesh: Ghazalbad** (Indrapuram) | **Gujarat: Ahmedabad** (Satellite) | **Punjab: Amritsar** (Court Road) | **Haryana: Faridabad** (Railway Station Road)



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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
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12	g/dL	13-17	Spectrophotometer
PCV	36.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.53	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	80.8	fL	83-101	Calculated
MCH	26.4	pg	27-32	Calculated
MCHC	32.7	g/dL	31.5-34.5	Calculated
R.D.W	17.2	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,900	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	53.2	%	40-80	Electrical Impedance
LYMPHOCYTES	35.3	%	20-40	Electrical Impedance
EOSINOPHILS	3.8	%	1-6	Electrical Impedance
MONOCYTES	7.1	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3138.8	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2082.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	224.2	Cells/cu.mm	20-500	Calculated
MONOCYTES	418.9	Cells/cu.mm	200-1000	Calculated
BASOPHILS	35.4	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	333000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm/hour	0-15	Capillary photometry
PERIPHERAL SMEAR				
METHODOLOGY	: Microscopic			
RBC MORPHOLOGY	: Mild anisocytosis, predominantly normocytic normochromic RBC's noted.			



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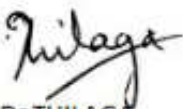
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Consultant Pathologist

SIN No:BED240034016

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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 06:48PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 09:50PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination
PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.				



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

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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:56AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 06:26PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 07:10PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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
GLUCOSE, FASTING , NAF PLASMA	79	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. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	106	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.



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



SIN No:PLP1417258

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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 12:44PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 01:21PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	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)



Dr. MARQUESS RAJ
M.D, DipRCPATH, D.N.B (PATH)
Consultant Pathologist

SIN No:EDT240015074

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



Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 01:21PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 02:57PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	258	mg/dL	<200	CHO-POD
TRIGLYCERIDES	158	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	44	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	214	mg/dL	<130	Calculated
LDL CHOLESTEROL	182.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	31.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.86		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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



SIN No:SE04625612

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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.64	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	83.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.00	g/dL	6.6-8.3	Biuret
ALBUMIN	4.50	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.8		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.
- Correlation with PT (Prothrombin Time) helps.



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



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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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.86	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	14.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.00	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.8	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	106	mmol/L	101–109	ISE (Indirect)



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M.D.(Biochemistry)



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Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 01:21PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 02:55PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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	18.00	U/L	<55	IFCC



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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 12:59PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 02:55PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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)	1.5	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.39	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.010	µIU/mL	0.34-5.60	CLIA

Comment:

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

- 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.
- 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.
- 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.
- 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



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



SIN No: SPL24022444

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

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APOLLO CLINICS NETWORK

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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 12:59PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 02:15PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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	0.510	ng/mL	0-4	CLIA

The normal reference PSA for the decadal age group of 40-49 years is 0-2.5 ng/mL



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M.D.(Biochemistry)



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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 06:55PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 07:25PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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Consultant Pathologist

SIN No:UR2279954

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

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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:56AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 10/Feb/2024 06:55PM
UHID/MR No : CANN.0000232891	Reported : 10/Feb/2024 07:26PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick



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Patient Name : Mr.KIRAN K S	Collected : 10/Feb/2024 10:41AM
Age/Gender : 45 Y 11 M 21 D/M	Received : 11/Feb/2024 04:42PM
UHID/MR No : CANN.0000232891	Reported : 11/Feb/2024 05:06PM
Visit ID : CANNOPV390934	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 103376	

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 ***



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