

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:20PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 07:01PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	16.9	g/dL	13-17	Spectrophotometer
PCV	50.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.62	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	89.1	fL	83-101	Calculated
MCH	30.1	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	15.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,810	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	53.7	%	40-80	Electrical Impedence
LYMPHOCYTES	33.7	%	20-40	Electrical Impedence
EOSINOPHILS	4	%	1-6	Electrical Impedence
MONOCYTES	8	%	2-10	Electrical Impedence
BASOPHILS	0.6	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4193.97	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2631.97	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	312.4	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	624.8	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	46.86	Cells/cu.mm	0-100	Electrical Impedence
PLATELET COUNT	261000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				
RBCs ARE NORMOCYTIC NORMOCHROMIC.				
TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.				
PLATELETS ARE ADEQUATE.				
NO HEMOPARASITES SEEN				



SIN No:BED230076650

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:20PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 06:12PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF HAEMATOLOGY

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

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

BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



SIN No:BED230076650

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:20PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 05:53PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF BIOCHEMISTRY

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

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

Comment:

As per American Diabetes Guidelines

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



SIN No:PLF01950400

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 11:55AM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:14PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 06:04PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	102	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.

Ref: Marks medical biochemistry and clinical approach



SIN No:PLP1315165

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:20PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 08:38PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	111	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



SIN No:EDT230031569

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.VISHNU NAIR	Collected	: 25/Mar/2023 01:08PM
Age/Gender	: 30 Y 5 M 13 D/M	Received	: 25/Mar/2023 04:09PM
UHID/MR No	: CAUN.0000132885	Reported	: 25/Mar/2023 07:05PM
Visit ID	: CAUNOPV151825	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: AQTPN1250E		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	183	mg/dL	<200	CHO-POD
TRIGLYCERIDES	92	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	49	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	134	mg/dL	<130	Calculated
LDL CHOLESTEROL	115.28	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.33	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.73		0-4.97	Calculated

Comment:

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

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

Measurements in the same patient can show physiological and analytical variations.

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



SIN No:SE04332099

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.VISHNU NAIR	Collected	: 25/Mar/2023 01:08PM
Age/Gender	: 30 Y 5 M 13 D/M	Received	: 25/Mar/2023 04:09PM
UHID/MR No	: CAUN.0000132885	Reported	: 25/Mar/2023 07:05PM
Visit ID	: CAUNOPV151825	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: AQTPN1250E		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.72	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.32	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	39.92	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	27.8	U/L	<50	IFCC
ALKALINE PHOSPHATASE	57.03	U/L	30-120	IFCC
PROTEIN, TOTAL	7.37	g/dL	6.6-8.3	Biuret
ALBUMIN	4.17	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.20	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		0.9-2.0	Calculated



SIN No:SE04332099

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:09PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 07:05PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	1.02	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	25.35	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	11.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.97	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.65	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.15	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	137.96	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	99.31	mmol/L	101–109	ISE (Indirect)



SIN No:SE04332099

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Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:09PM
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Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	18.36	U/L	<55	IFCC



SIN No:SE04332099

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:08PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:10PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 05:16PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF IMMUNOLOGY

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

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

TRI-iodothyronine (T3, TOTAL)	1.03	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	10.15	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	1.170	µIU/mL	0.35-4.94	CMIA

Comment:

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

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

Note:

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



Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 10:21AM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 05:52PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 06:37PM
Visit ID : CAUNOPV151825	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AQTPN1250E	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		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	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	1 - 2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2085622

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab


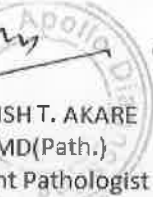
Patient Name	: Mr.VISHNU NAIR	Collected	: 25/Mar/2023 01:08PM
Age/Gender	: 30 Y 5 M 13 D/M	Received	: 25/Mar/2023 04:54PM
UHID/MR No	: CAUN.0000132885	Reported	: 25/Mar/2023 05:30PM
Visit ID	: CAUNOPV151825	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: AQTPN1250E		

DEPARTMENT OF CLINICAL PATHOLOGY


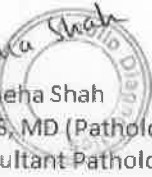
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

*** End Of Report ***

DR. MANISH T. AKARE
M.B.B.S, MD(Path.)
Consultant Pathologist

Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist




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



Patient Name : Mr.VISHNU NAIR	Collected : 25/Mar/2023 01:09PM
Age/Gender : 30 Y 5 M 13 D/M	Received : 25/Mar/2023 04:06PM
UHID/MR No : CAUN.0000132885	Reported : 25/Mar/2023 05:55PM
Visit ID : CAUNOPV151866	Status : Final Report
Ref Doctor : Dr.SELF	

DEPARTMENT OF IMMUNOLOGY

HUL VITAMIN D FY 23 PROMO

Test Name	Result	Unit	Bio. Ref. Range	Method
VITAMIN D (25 - OH VITAMIN D) , SERUM	24.94	ng/mL		CLIA

Comment:

BIOLOGICAL REFERENCE RANGES

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10 – 30
SUFFICIENCY	30 – 100
TOXICITY	>100

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs)

The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D.

Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.

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



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

Page 1 of 1

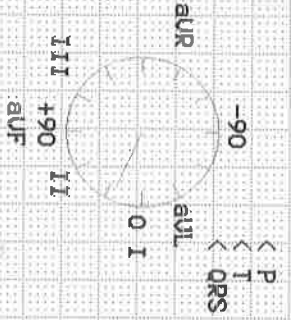


SIN No: SPL23050727

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Measurement Results:

QRS	92 ms
QT/QTcB	368 / 415 ms
PR	122 ms
P	100 ms
RR/PP	788 / 790 ms
P/ORS/T	45 / 25 / 25 degrees
QTd/QTcBd	52 / 59 ms
Sokolow	1.5 mV
NK	10

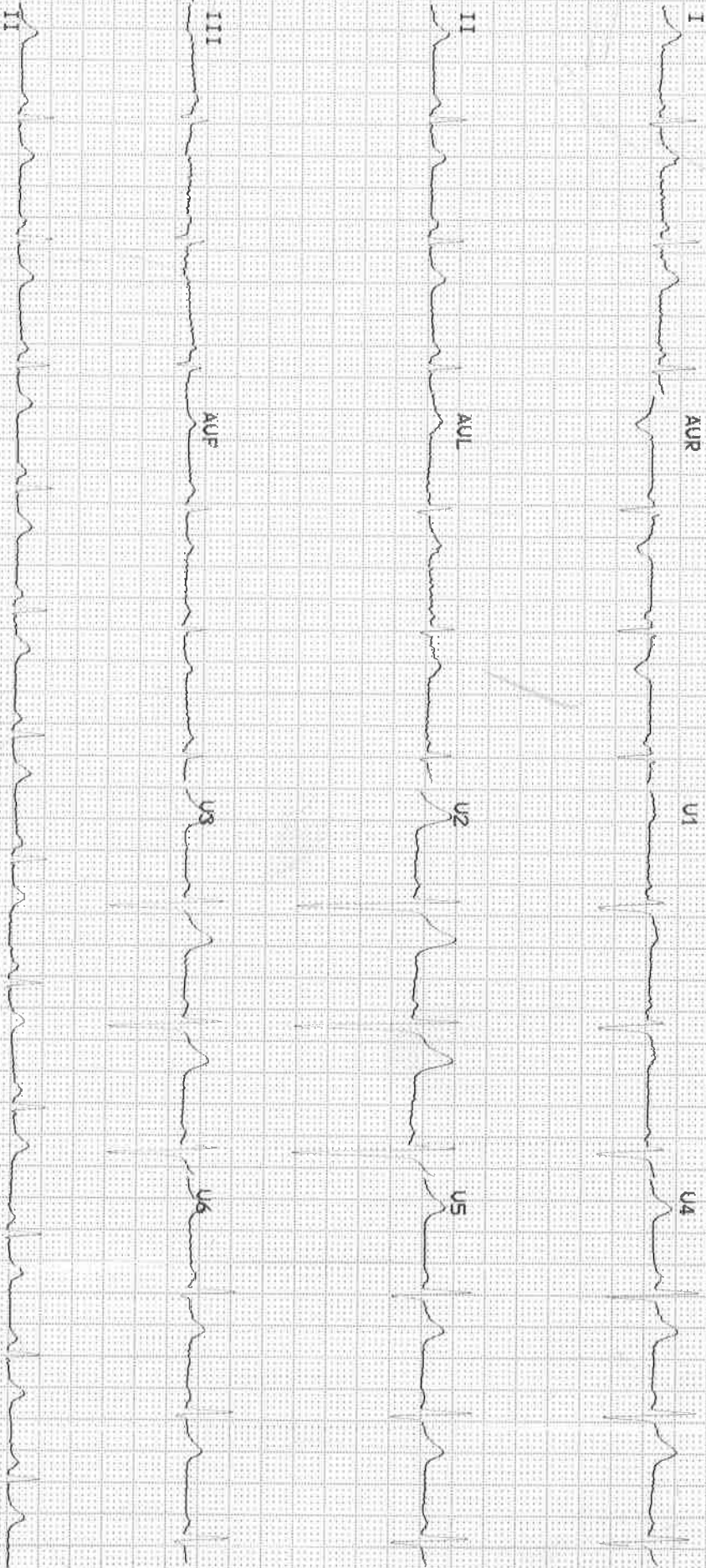


Interpretation:

APOLLO CLINIC AUNDRH
 Dr. RISHU KHANWAT
 General Physician
 Reg. No. 2011/16537

No significant HR 76bpm
 abnormality

Unconfirmed report.



Patient Name : Mr. VISHNU NAIR

Age : 30 Y M

UHID : CAUN.0000132885

OP Visit No : CAUNOPV151825

Reported on : 25-03-2023 17:00

Printed on : 25-03-2023 17:01

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

No evidence of any focal lesion.

Trachea is central in position.

Costophrenic angles are clear.

Cardio thoracic ratio is normal.

Cardiac silhouette is well maintained.

Mediastinal and hilar regions are normal.

Both diaphragmatic domes are well visualized and normal.

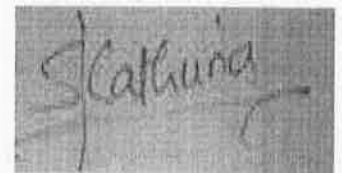
Visualized skeleton and soft tissues around thoracic cage appear normal.

COMMENT: No significant abnormality seen.

Please correlate clinically.

Printed on:25-03-2023 17:00

---End of the Report---



Dr. SUIAS SANJEEV KATHURIA
MBBS,DMRE, RADIOLOGY
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK MAHARASHTRA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

PATIENT NAME :-MR. VISHNU NAIR
REFERRED BY :-ARCOFEMI HEALTHCARE
UHID :-132885

AGE :-30YRS/ M
DATE :- 25.03.2023

2D ECHO CARDIOGRAPHY & COLOR DOPPLER REPORT

- Mitral Valve : Normal.
- Aortic Valve : Normal.
- Tricuspid Valve : Normal.
- Pulmonary Valve : Normal.

RWMA: Absent.

RA : Normal
RV : Normal
IVS : Intact
IAS : Intact
Pericardial effusion : No
IVC : Normal.

CONCLUSION:

- Normal size cardiac chambers.
- No RWMA.
- Good LV function LVEF-60%.
- No AR/MR/TR No PAH.
- No e/o clot, thrombus, vegetation or pericardial effusion.

Apollo Clinic - Aundh
Dr. Satyajeet Suryawanshi
MBB (Cardiology)
MNAAS, FCPS
Reg. No. 2905/05/2998

DR.SATYAJEET SURYAWANSHI
(CONSULTANT CARDIOLOGIST)

P/S : Normal echo does not rule out coronary artery disease.

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK MAHARASHTRA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name	: Mr. VISHNU NAIR	Age	: 30 Y M
UHID	: CAUN.0000132885	OP Visit No	: CAUNOPV151825
Reported on	: 25-03-2023 16:30	Printed on	: 25-03-2023 16:32
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and **shows enhanced in echotexture.**

No focal lesion is seen.

PV and CBD are normal.

No dilatation of the intrahepatic billiary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of peri-GB collection. No evidence of focal lesion is seen.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Spleen appears normal. No focal lesion seen. Spleenic vein appears normal.

Right Kidney is - 11.1 x 4.4 cm. Left Kidney is - 9.9 x 5.3 cm.

Both Kidneys are normal in size and echotexture.

The cortico medullary differentiation is maintained bilaterally.

No evidence of calculus / hydronephrosis seen on either side.

Urinary bladder is normal. No evidence of filling defect or mass effect. The wall thickness is normal.

Prostate is normal in size and echotexture. No evidence of calcification seen.

No obvious free fluid or lymphadenopathy is noted in the abdomen .

Patient Name : Mr. VISHNU NAIR
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Adm/Consult Doctor :

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Ref Doctor : SELF

IMPRESSION :

- Grade I fatty liver.
- No other significant abnormality seen.

Suggest – clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, not valid for medico legal purpose.

Printed on:25-03-2023 16:30

---End of the Report---



Dr. SUHAS SANJEEV KATHURIA
MBBS,DMRE, RADIOLOGY
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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Online appointments: www.apollodivc.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Date : 25-03-2023
 MR NO : CAUN.0000132885
 Name : Mr. VISHNU NAIR
 Age/ Gender : 30 Y / Male

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 10:05

Height	175
Waight	92
BP	130/86
Pulse	76
Waist	105
Hip	114

IBW 75kg

- Oil - 1 Person For 1 month 1/2 L
- Buttr
- Non veg X

→ Avoid products - Khari, Mayo, Maida, Junk food, Namkeen

→ Salads, sprouts, dal, legums, pulses, SMP (Skimmed Milk powder)
 - egg whites.

→ Exercise - Brisk walk - 45 mins

→ Meal Timing
 ↓ B-fast 8am
 ↓ Lunch 1pm
 ↓ Dinner 8pm

Diencian

Plup Next
 c reports,
 Prachi Bhagwat
 9552599494