

Certificate No: MC-2433

Patient Name	: Mr.PABITRA MOHAN SETHI	Collected	: 27/Jan/2024 10:20AM
Age/Gender	: 56 Y 9 M 3 D/M	Received	: 27/Jan/2024 04:41PM
UHID/MR No	: CANN.0000119790	Reported	: 27/Jan/2024 06:24PM
Visit ID	: CANNOPV388942	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobE5283		

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

Methodology	: Microscopic
RBC MORPHOLOGY	: Erythrocytosis noted, Mild anisocytosis, microcytic hypochromic RBCs admixed with normocytic normochromic RBCs noted.
WBC MORPHOLOGY	: Mild eosinophilia noted.
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:BED240020006

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 - U85110TG2000PLC115819)

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**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>					
<b>HAEMOGLOBIN</b>	<b>10.8</b>	Low	g/dL	13-17	Spectrophotometer
PCV	<b>35.20</b>	Low	%	40-50	Electronic pulse & Calculation
RBC COUNT	<b>5.93</b>	High	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	<b>59.3</b>	Low	fL	83-101	Calculated
MCH	<b>18.1</b>	Low	pg	27-32	Calculated
MCHC	<b>30.6</b>	Low	g/dL	31.5-34.5	Calculated
R.D.W	<b>15</b>	High	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	<b>11,100</b>	High	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>					
NEUTROPHILS	57.7	Normal	%	40-80	Electrical Impedance
LYMPHOCYTES	29.4	Normal	%	20-40	Electrical Impedance
EOSINOPHILS	<b>6.3</b>	High	%	1-6	Electrical Impedance
MONOCYTES	6.0	Normal	%	2-10	Electrical Impedance
BASOPHILS	0.6	Normal	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>					
NEUTROPHILS	6404.7	Normal	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	<b>3263.4</b>	High	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	<b>699.3</b>	High	Cells/cu.mm	20-500	Calculated
MONOCYTES	666	Normal	Cells/cu.mm	200-1000	Calculated
BASOPHILS	66.6	Normal	Cells/cu.mm	0-100	Calculated
<b>PLATELET COUNT</b>	283000	Normal	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	<b>63</b>	High	mm/hour	0-15	Capillary photometry
<b>PERIPHERAL SMEAR</b>		Normal			

Methodology : Microscopic

RBC MORPHOLOGY : Erythrocytosis noted, Mild anisocytosis, microcytic hypochromic RBCs admixed with normocytic

Page 2 of 17



**Dr THILAGA**  
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Consultant Pathologist



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**DEPARTMENT OF HAEMATOLOGY**

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

normochromic RBCs noted.

WBC MORPHOLOGY : Mild eosinophilia noted.

PLATELETS : Adequate in number

PARASITES : No haemoparasites seen

NOTE/COMMENT : Please correlate clinically.



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Certificate No: MC-2435

Patient Name	: Mr.PABITRA MOHAN SETHI	Collected	: 27/Jan/2024 10:20AM
Age/Gender	: 56 Y 9 M 3 D/M	Received	: 27/Jan/2024 04:41PM
UHID/MR No	: CANN.0000119790	Reported	: 27/Jan/2024 08:02PM
Visit ID	: CANNOPV388942	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: bobE5283		

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>					
BLOOD GROUP TYPE	O				Microplate Hemagglutination
Rh TYPE	Positive				Microplate Hemagglutination

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY



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



SIN No:BED240020006

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Patient Name : Mr.PABITRA MOHAN SETHI	Collected : 27/Jan/2024 10:20AM
Age/Gender : 56 Y 9 M 3 D/M	Received : 27/Jan/2024 04:53PM
UHID/MR No : CANN.0000119790	Reported : 27/Jan/2024 05:51PM
Visit ID : CANNOPV388942	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE5283	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	127	High	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.



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



SIN No:PLF02095592

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Patient Name : Mr.PABITRA MOHAN SETHI	Collected : 27/Jan/2024 02:13PM
Age/Gender : 56 Y 9 M 3 D/M	Received : 27/Jan/2024 05:31PM
UHID/MR No : CANN.0000119790	Reported : 27/Jan/2024 06:40PM
Visit ID : CANNOPV388942	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE5283	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	<b>278</b>	High	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:PLP1412335

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>					
HBA1C, GLYCATED HEMOGLOBIN	8.5		%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	197		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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SIN No:EDT240008575

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Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>					
TOTAL CHOLESTEROL	81	Normal	mg/dL	<200	CHO-POD
TRIGLYCERIDES	133	Normal	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	<b>35</b>	Low	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	46	Normal	mg/dL	<130	Calculated
LDL CHOLESTEROL	19.4	Normal	mg/dL	<100	Calculated
VLDL CHOLESTEROL	26.6	Normal	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.31	Normal		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.



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SIN No:SE04611089

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Patient Name : Mr.PABITRA MOHAN SETHI	Collected : 27/Jan/2024 10:20AM
Age/Gender : 56 Y 9 M 3 D/M	Received : 27/Jan/2024 05:04PM
UHID/MR No : CANN.0000119790	Reported : 27/Jan/2024 09:10PM
Visit ID : CANNOPV388942	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE5283	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>					
BILIRUBIN, TOTAL	0.72	Normal	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.19	Normal	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.53	Normal	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	38	Normal	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	Normal	U/L	<50	IFCC
ALKALINE PHOSPHATASE	65.00	Normal	U/L	30-120	IFCC
PROTEIN, TOTAL	8.20	Normal	g/dL	6.6-8.3	Biuret
ALBUMIN	4.80	Normal	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.40	Normal	g/dL	2.0-3.5	Calculated
A/G RATIO	1.41	Normal		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.

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



SIN No:SE04611089

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**DEPARTMENT OF BIOCHEMISTRY**

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

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Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>					
CREATININE	0.84	Normal	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	<b>16.00</b>	Low	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>7.5</b>	Low	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.60	Normal	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.70	Normal	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.00	Normal	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	Normal	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.6	Normal	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	103	Normal	mmol/L	101–109	ISE (Indirect)



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**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	34.00	Normal	U/L	<55	IFCC



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Certificate No: MC-2433

Patient Name : Mr.PABITRA MOHAN SETHI	Collected : 27/Jan/2024 10:20AM
Age/Gender : 56 Y 9 M 3 D/M	Received : 27/Jan/2024 05:15PM
UHID/MR No : CANN.0000119790	Reported : 27/Jan/2024 07:44PM
Visit ID : CANNOPV388942	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>					
TRI-IODOTHYRONINE (T3, TOTAL)	1.21	Normal	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	12.01	Normal	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	0.757	Normal	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



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**DEPARTMENT OF IMMUNOLOGY**

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**DEPARTMENT OF IMMUNOLOGY**

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Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b>	0.840	Normal	ng/mL	0-4	CLIA

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**DEPARTMENT OF CLINICAL PATHOLOGY**

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

Test Name	Result	Status	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>					
<b>PHYSICAL EXAMINATION</b>					
COLOUR	PALE YELLOW			PALE YELLOW	Visual
TRANSPARENCY	CLEAR			CLEAR	Visual
pH	5.5	Normal		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010	Normal		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>					
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>					
PUS CELLS	2-4	Normal	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3		/hpf	<10	MICROSCOPY
RBC	NIL		/hpf	0-2	MICROSCOPY
CASTS	ABSENT	Normal		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT			ABSENT	MICROSCOPY

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

SIN No:UR2269584

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**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.PABITRA MOHAN SETHI	Collected : 27/Jan/2024 10:20AM
Age/Gender : 56 Y 9 M 3 D/M	Received : 27/Jan/2024 05:02PM
UHID/MR No : CANN.0000119790	Reported : 27/Jan/2024 06:03PM
Visit ID : CANNOPV388942	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE5283	

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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

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

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



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

SIN No:UF010379

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 - 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

Address:  
D No.30, F - Block, 2nd Avenue, Anna Nagar East, Chennai.600 102,  
Phone - 044.26224504 / 05



**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 (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. PABITRA MOHAN SETHI Age : 56 Y/M  
UHID : CANN.0000119790 OP Visit No : CANNOPV388942  
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 31-01-2024 11:57  
Referred By : SELF

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## **2D-ECHO WITH COLOUR DOPPLER**

### Dimensions:

Ao (ed)	2.3CM
LA (es)	3.2CM
LVID (ed)	4.2CM
LVID (es)	3.2CM
IVS (Ed)	0.8CM
LVPW (Ed)	0.9CM
EF	62%
%FD	32%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	SCLEROSED
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. PABITRA MOHAN SETHI	Age	: 56 Y/M
UHID	: CANN.0000119790	OP Visit No	: CANNOPV388942
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 31-01-2024 11:57
Referred By	: SELF		

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**DOPPLER STUDIES MITRAL INFLOW :**

E : 0.6m/sc A: 0.9m/sc

Velocity / Gradient Across Pulmonic Valve :0.7m/sc

Velocity / Gradient Across Aortic Valve : 0.9m/sc

**IMPRESSION :SUB OPTIMAL ECHO WINDOW**

NO RWMA

NORMAL LEFT VENTRICULAR FUNCTION(EF - 62%)

NORMAL CARDIAC CHAMBERS

SCLEROSED AORTIC VALVE

GRADE I DIASTOLIC DYSFUNCTION

TRIVIAL TRICUSPID REGURGITATION

NO PAH / CLOT / PE .

Dr.  
RAKESH P  
GOPAL

Patient Name	: Mr. PABITRA MOHAN SETHI	Age	: 56 Y/M
UHID	: CANN.0000119790	OP Visit No	: CANNOPV388942
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 31-01-2024 11:57
Referred By	: SELF		

---

Patient Name	: Mr. PABITRA MOHAN SETHI	Age	: 56 Y/M
UHID	: CANN.0000119790	OP Visit No	: CANNOPV388942
Reported By:	: Dr. ARULNITHI AYYANATHAN	Conducted Date	: 28-01-2024 11:15
Referred By	: SELF		

---

### **ECG REPORT**

#### **Observation :-**

1. Normal Sinus Rhythm.
2. Heart rate is 96 beats per minutes.

#### **Impression:**

NORMAL RESTING ECG.

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

Dr. ARULNITHI AYYANATHAN

<b>Patient Name</b>	: Mr. PABITRA MOHAN SETHI	<b>Age/Gender</b>	: 56 Y/M
<b>UHID/MR No.</b>	: CANN.0000119790	<b>OP Visit No</b>	: CANNOPV388942
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 27-01-2024 18:10
<b>LRN#</b>	: RAD2218412	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: bobE5283		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

Liver is normal in size and show fatty changes.( Grade - I )  
Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.  
Wall thickness appear normal.

Pancreas and spleen appear normal.  
Spleen measures 10.8cms.

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 10.2 x 4.5cms.  
Left kidney measures 9.6 x 5.0cms.  
Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Prostate measures 3.9 x 3.3 x 2.9cms volume 20cc and shows normal echopattern.  
Seminal vesicles appear normal.  
Bladder is normal in contour.



**Patient Name** : Mr. PABITRA MOHAN SETHI

**Age/Gender** : 56 Y/M

---

**IMPRESSION:**

**\*GRADE - I FATTY LIVER.**

DISCLAIMER: THIS ULTRASOUND SCREENING STUDY IS BASED ON SOUND WAVES AND REFLECTION. NOT A DIRECT VISUALISATION OF ORGANS. BASED ON PATIENT HABITUS, BOWEL GAS OBSCURATION AND OTHER FACTORS, MANY CONDITIONS MAY NOT BE PICKED UP BY US STUDY AND SHOULD BE TREATED WITH CLINICAL CORRELATION. NOT AN MLC DOCUMENT. MANY INCIDENTAL FINDINGS OF LOW PRIORITY MIGHT NOT BE MENTIONED AS IT IS NOT A FOCUSED STUDY.

**Dr. PRAVEENA SHEKAR T**  
MBBS, DMRD, FAGE  
Radiology

<b>Patient Name</b>	: Mr. PABITRA MOHAN SETHI	<b>Age/Gender</b>	: 56 Y/M
<b>UHID/MR No.</b>	: CANN.0000119790	<b>OP Visit No</b>	: CANNOPV388942
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 27-01-2024 15:23
<b>LRN#</b>	: RAD2218412	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: bobE5283		

**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



**CASE RECORD**

Name: <u>Mr. Paritosh Mohan Sethi</u>	Date: <u>27/1/24</u>
Occupation: <u>✓</u>	UHID No.: <u>119790</u>
Age: <u>56</u> Sex: <u>Male</u> Female	OP / Company: <u>Arcofemi Medicheerl</u>
Address: .....	Ref. Physician: <u>Dr. Anurag</u>
Tel No: .....	

Consultant :

ATC  
Obs

- ① Anemia
- ② ↑TLC
- ③ ↑FBS / ↑PPBS  
HbA1c = 8.5%
- ④ GER

⇒ R/H/O DM (12 yrs) - on mede  
IHD (2018)  
(Angioplasty - 1stent)

History :

Chief Complaints : (If pain is present. please describe location, character, score etc.)

⇒ % Headache (F) on + off .

- Adv
- ① F/U with Diabetologist .
- ② T. Livogen 1-0-0 x 2 months
- ③ Low carb / Low fat diet / Reg. physical exercise .

History of Present illness :

Physical Examination

96  
94

68.1

General :

Build

Height 162

Weight

Anaemia

Icterus

Cyanosis

Clubbing

Oedema

Glands

ENT :

CVS :

Heart Rate & Rhythm 100/min

B.P. : Supine 140/90 mmHg Sitting

Standing

Chest Shape

Heart Sounds

Murmurs

Thrills

RS :

Rate & Type

Breath Sounds

Abdomen :

Appearance

Liver

Spleen

Tenderness

Bowel sounds

Fluid

Genitals :

N

CNS :

Cranial Nerves

Sensors SYstem

Motor System

Reflexes

Fundus

Skin :

Extremities :

## RE: Health Check-up Bookings No. 13 (Annual)

Corporate Apollo Clinic <corporate@apolloclinic.com>

Mon 1/15/2024 2:21 PM

To:Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Cc:Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>;Network : Mediwheel : New Delhi <network@mediwheel.in>;

deepak <deepak.c@apolloclinic.com>;HC Alwarpet <hc.alwarpet@apollospectra.com>;AHCN Apollo Clinic <ahcn@apolloclinic.com>;Rahul Rai <rahul.raai@apolloclinic.com>;Dilip Baniya <Dilip.b@apolloclinic.com>;Electronic City <ecity@apolloclinic.com>;Cc Tardeo <cc.tardeo@apollospectra.com>;Electronic City <ecity@apolloclinic.com>;Annanagar Apolloclinic <annanagar@apolloclinic.com>;Nigdi Apolloclinic <nigdi@apolloclinic.com>;Dilip Baniya <Dilip.b@apolloclinic.com>;AHCN Apollo Clinic <ahcn@apolloclinic.com>

📎 1 attachments (16 KB)

15012024.xlsx;

Namaste Team,

Greetings from Apollo clinics,

PFA. With status.

Thanks & Regards,

**Rani N** | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: [corporate@apolloclinic.com](mailto:corporate@apolloclinic.com) | [www.apolloclinic.com](http://www.apolloclinic.com) |

---

**From:** Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

**Sent:** 15 January 2024 11:39

**To:** Corporate Apollo Clinic <corporate@apolloclinic.com>

**Cc:** Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>; Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>

**Subject:** Health Check-up Bookings No. 13 (Annual)

Dear Team,

Please find the attached Health Check-up Bookings file and confirm the same.

Thanks & Regards



Arcofemi Health Care Ltd. | F-701 A, Lado Sarai, Mehrauli | New Delhi – 110 030

Ph No. 011-41195959

Email : [customercare@mediwheel.in](mailto:customercare@mediwheel.in); | Web: [www.mediwheel.in](http://www.mediwheel.in)

9/23


CANN- 49790

OCN- 99424

**B** बैंक ऑफ बड़ोदा  
**Bank of Baroda**

नाम **पबित्र मोहन सेठी**  
Name **Pabitra Mohan Sethi**

कर्मचारी कूट क्र  
E.C. No. **52700**



जारीकर्ता प्राधिकारी  
Issuing Authority

धारक के हस्ताक्षर  
Signature of Holder



8658041349

## Apollo Clinic

### CONSENT FORM

Patient Name: ..... Papitha ..... Age: ..... 26 M .....  
UHID Number: ..... 119790 ..... Company Name: ..... Arcolami .....


I Mr/Mrs/Ms ..... Employee of .....

(Company) Want to inform you that I am not interested in getting ..... ENT / Dental .....

Tests done which is a part of my routine health check package.

On Review

And I claim the above statement in my full consciousness.

Patient Signature: .....  .....

Date: ..... 27/01/2024 .....

 **Apollo Medical Centre**  
No. 30, F-Block, 2nd Avenue,  
Anna Nagar East, Chennai-600 102  
Tel: 044-26224505, Mobile: 7358392880  
Toll No. 1860 500 7788

Mr. Pabitra Mohan

27/1/2024

Sethi 56/M

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

General Examination / Allergies  
History

Adv:

- OPG
- Later Root Canal treatment of (Crowns) for the Posteriors (Due to severe attrition)



Follow up date:

Doctor Signature & Stamp

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

Pabitra Mohan Sathi 50/M

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

General Examination / Allergies  
History

EAR :- 7M intact

Nose :- DNS to @

Throat :- NORMAL

Nose :- DNS to @  
with @ CSOM

Plan :- septoplasty + SA

CDR-SHARANMATHI  
1050279

To do  
PTA.

Follow up date:

Doctor Signature & Stamp

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

In case of emergency, Please call 1066 or come directly to emergency room of the hospital

**Apollo Health and Lifestyle Limited**

To book an appointment

 **1860 500 7788**

Name: Pabitra mohan  
 Occupation: Sethi  
 Age: 56y Sex: Male  Female   
 Address: .....  
 .....Ph: .....

Date: 27/1/24 Reg. No: 119790  
 Ref. Physician: .....  
 Copies to: .....

**REPORT ON OPHTHALMIC EXAMINATION**

History: existing glass user 15 year  
having diabetic 10 year taking tablet

Present Complaint: Comfortable with present  
glasses with glass BE 6/6 N6

**ON EXAMINATION:**

	RE	LE
Ocular Movements :		Full
Anterior Segment :	Full	
Intra-Ocular-Pressure :		
Visual Acuity: D.V. :		N
Without Glass :	N	
With Glass :	6/9 <sup>P</sup>	6/9 <sup>P</sup>
N.V. :		
Visual Fields :		
Fundus :	N10	N10
Impression :		Full.
Advice :	Full	
Colour Vision :	N	N.



Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 74 ms  
QT / QTcBaz : 330 / 416 ms  
PR : 128 ms  
P : 96 ms  
RR / PP : 628 / 625 ms  
P / QRS / T : 56 / 59 / 35 degrees

