

| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 10:30AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:11AM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF HAEMATOLOGY

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

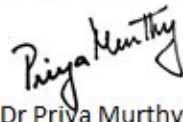
| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|-------------------------|--------------------|--------------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 14.6 | g/dL | 13-17 | Spectrophotometer |
| PCV | 43.00 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 4.8 | Million/cu.mm | 4.5-5.5 | Electrical Impedance |
| MCV | 89.5 | fL | 83-101 | Calculated |
| MCH | 30.5 | pg | 27-32 | Calculated |
| MCHC | 34.1 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 13.3 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,700 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 46.8 | % | 40-80 | Electrical Impedance |
| LYMPHOCYTES | 39.8 | % | 20-40 | Electrical Impedance |
| EOSINOPHILS | 4.2 | % | 1-6 | Electrical Impedance |
| MONOCYTES | 9 | % | 2-10 | Electrical Impedance |
| BASOPHILS | 0.2 | % | <1-2 | Electrical Impedance |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 2667.6 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 2268.6 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 239.4 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 513 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 11.4 | Cells/cu.mm | 0-100 | Calculated |
| Neutrophil lymphocyte ratio (NLR) | 1.18 | | 0.78- 3.53 | Calculated |
| PLATELET COUNT | 246000 | cells/cu.mm | 150000-410000 | Electrical impedance |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 18 | mm at the end of 1 hour | 0-15 | Modified Westegren method |
| PERIPHERAL SMEAR | | | | |

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.



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AND LIFESTYLE LIMITED- RRL BANGALORE



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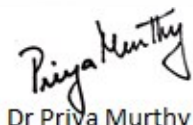
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:51AM |
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| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|----------|------|--------------------|-----------------------------|
| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA | | | | |
| BLOOD GROUP TYPE | AB | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |


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| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 11:09AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:44AM |
| Visit ID : CSAROPV360091 | Status : Final Report |
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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-------------------------------|--------|-------|--------------------|------------|
| GLUCOSE, FASTING , NAF PLASMA | 112 | mg/dL | 70-100 | HEXOKINASE |

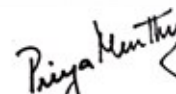
Comment:

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:

- 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.


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| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 12:51PM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 05:02PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 05:56PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |


DEPARTMENT OF BIOCHEMISTRY

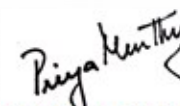
ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------|-------|--------------------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 99 | 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.


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241002888

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| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 11:29AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 12:31PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|-------|--------------------|------------|
| HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA | | | | |
| HBA1C, GLYCATED HEMOGLOBIN | 6.3 | % | | HPLC |
| ESTIMATED AVERAGE GLUCOSE (eAG) | 134 | 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.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. 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.


4. 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.

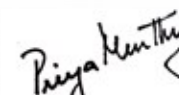
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241002701

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115819)

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| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 04:49PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 06:02PM |
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| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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DEPARTMENT OF BIOCHEMISTRY


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

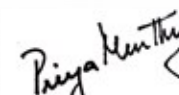
| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|------------------------------|--------|-------|--------------------|----------------------------|
| LIPID PROFILE , SERUM | | | | |
| TOTAL CHOLESTEROL | 246 | mg/dL | <200 | CHO-POD |
| TRIGLYCERIDES | 110 | mg/dL | <150 | GPO-POD |
| HDL CHOLESTEROL | 69 | mg/dL | 40-60 | Enzymatic Immunoinhibition |
| NON-HDL CHOLESTEROL | 176 | mg/dL | <130 | Calculated |
| LDL CHOLESTEROL | 154.5 | mg/dL | <100 | Calculated |
| VLDL CHOLESTEROL | 22 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 3.56 | | 0-4.97 | Calculated |
| ATHEROGENIC INDEX (AIP) | < 0.01 | | <0.11 | 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 |


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: SAR241002696

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115819)
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory,
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APOLLO CLINICS NETWORK
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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. Interval | Method |
|--|--------|-------|--------------------|--------------------|
| LIVER FUNCTION TEST (LFT) , SERUM | | | | |
| BILIRUBIN, TOTAL | 0.47 | mg/dL | 0.3-1.2 | DPD |
| BILIRUBIN CONJUGATED (DIRECT) | 0.09 | mg/dL | <0.2 | DPD |
| BILIRUBIN (INDIRECT) | 0.38 | mg/dL | 0.0-1.1 | Dual Wavelength |
| ALANINE AMINOTRANSFERASE (ALT/SGPT) | 29 | U/L | <50 | IFCC |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT) | 30.0 | U/L | <50 | IFCC |
| AST (SGOT) / ALT (SGPT) RATIO (DE RITIS) | 1.0 | | <1.15 | Calculated |
| ALKALINE PHOSPHATASE | 69.00 | U/L | 30-120 | IFCC |
| PROTEIN, TOTAL | 7.84 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.58 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 3.26 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.4 | | 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. 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.

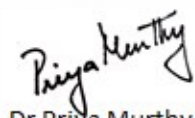
2. Cholestatic Patten:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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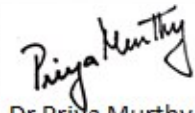
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| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|--------|--------------------|--------------------------|
| RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM | | | | |
| CREATININE | 0.97 | mg/dL | 0.84 - 1.25 | Modified Jaffe, Kinetic |
| UREA | 25.80 | mg/dL | 17-43 | GLDH, Kinetic Assay |
| BLOOD UREA NITROGEN | 12.1 | mg/dL | 8.0 - 23.0 | Calculated |
| URIC ACID | 5.91 | mg/dL | 3.5-7.2 | Uricase PAP |
| CALCIUM | 9.30 | mg/dL | 8.8-10.6 | Arsenazo III |
| PHOSPHORUS, INORGANIC | 3.38 | mg/dL | 2.5-4.5 | Phosphomolybdate Complex |
| SODIUM | 139 | mmol/L | 136-146 | ISE (Indirect) |
| POTASSIUM | 4.2 | mmol/L | 3.5-5.1 | ISE (Indirect) |
| CHLORIDE | 105 | mmol/L | 101-109 | ISE (Indirect) |
| PROTEIN, TOTAL | 7.84 | g/dL | 6.6-8.3 | Biuret |
| ALBUMIN | 4.58 | g/dL | 3.5-5.2 | BROMO CRESOL GREEN |
| GLOBULIN | 3.26 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.4 | | 0.9-2.0 | Calculated |


Dr. Govinda Raju N L
 MSc, PhD (Biochemistry)
 Consultant Biochemistry


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



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 SIN No: SAR241002696

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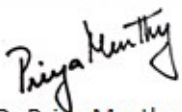

1860 500 7788
 www.apolloclinic.com

| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 04:49PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 05:41PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|------|--------------------|--------|
| GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM | 16.00 | U/L | <55 | IFCC |



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



| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 04:48PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 06:04PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF IMMUNOLOGY

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


| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------|--------|--------------------|--------|
| THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM | | | | |
| TRI-iodothyronine (T3, TOTAL) | 1 | ng/mL | 0.7-2.04 | CLIA |
| THYROXINE (T4, TOTAL) | 6.3 | µg/dL | 5.48-14.28 | CLIA |
| THYROID STIMULATING HORMONE (TSH) | 5.546 | µIU/mL | 0.34-5.60 | CLIA |

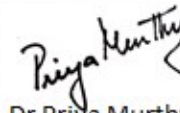
Comment:

| | |
|-----------------------------|--|
| 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 |


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 Consultant Pathologist



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 Karnataka - 560034


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| | |
|--------------------------------------|--|
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| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF IMMUNOLOGY

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

| | | | | |
|------|------|------|------|--|
| High | High | High | High | Pituitary Adenoma; TSHoma/Thyrotropinoma |
|------|------|------|------|--|

Govinda Raju
Dr.Govinda Raju N L
 MSc,PhD(Biochemistry)
 Consultant Biochemistry

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



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 SIN No: SAR241002695

Apollo Health and Lifestyle Limited

(CIN - U06110TC2800PLG115819)
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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** Ghaziabad (Indrapuram) | **Gujarat:** Ahmedabad (Satellite) | **Punjab:** Amritsar (Court Road) | **Haryana:** Faridabad (Railway Station Road)

| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 04:48PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 05:28PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF IMMUNOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------|-------|--------------------|--------|
| TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM | 0.720 | ng/mL | 0-4 | CLIA |

Priya Murthy

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



| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 10:40AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:42AM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |


DEPARTMENT OF CLINICAL PATHOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|-------------|------|-----------------------|----------------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | PALE YELLOW | | PALE YELLOW | Scattering of light |
| TRANSPARENCY | Clear | | CLEAR | Scattering of light |
| pH | 6.5 | | 5-7.5 | Bromothymol Blue |
| SP. GRAVITY | 1.003 | | 1.002-1.030 | Bromothymol Blue |
| BIOCHEMICAL EXAMINATION | | | | |
| URINE PROTEIN | NEGATIVE | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NORMAL | | NEGATIVE | GOD-POD |
| URINE BILIRUBIN | NEGATIVE | | NEGATIVE | Diazonium Salt |
| URINE KETONES (RANDOM) | NEGATIVE | | NEGATIVE | Sodium nitro prusside |
| UROBILINOGEN | NORMAL | | NORMAL (0.1-1.8mg/dl) | Diazonium salt |
| NITRITE | NEGATIVE | | NEGATIVE | Sulfanilic acid |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | Diazonium salt |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | |
| PUS CELLS | 0 | /hpf | 0-5 | Automated Image based microscopy |
| EPITHELIAL CELLS | 0 | /hpf | < 10 | Automated Image based microscopy |
| RBC | 0 | /hpf | 0-2 | Automated Image based microscopy |
| CASTS | NEGATIVE | /lpf | 0-2 Hyaline Cast | Automated Image based microscopy |
| CRYSTALS | NEGATIVE | /hpf | Occasional-Few | Automated Image based 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.


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| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 10:40AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:42AM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF CLINICAL PATHOLOGY

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


Dr. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist


Dr. Vidya Aniket Gore
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 Consultant Pathologist



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| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 05:05PM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 05:38PM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

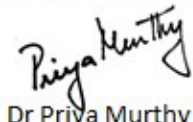
DEPARTMENT OF CLINICAL PATHOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|------------------------------|----------|------|--------------------|---------|
| URINE GLUCOSE(POST PRANDIAL) | NEGATIVE | | NEGATIVE | GOD-POD |



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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

AND LIFESTYLE LIMITED- RRL BANGALORE




| | |
|--------------------------------------|--|
| Patient Name : Mr.BALJIT SINGH GULIA | Collected : 26/Oct/2024 08:17AM |
| Age/Gender : 57 Y 5 M 10 D/M | Received : 26/Oct/2024 10:40AM |
| UHID/MR No : CSAR.0000146008 | Reported : 26/Oct/2024 11:42AM |
| Visit ID : CSAROPV360091 | Status : Final Report |
| Ref Doctor : Self | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 22E36964 | |

DEPARTMENT OF CLINICAL PATHOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|------------------------|----------|------|--------------------|---------|
| URINE GLUCOSE(FASTING) | NEGATIVE | | NEGATIVE | GOD-POD |

*** End Of Report ***


Dr. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist


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



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Patient Name : Mr.BALJIT SINGH GULIA
Age/Gender : 57 Y 5 M 10 D/M
UHID/MR No : CSAR.0000146008
Visit ID : CSAROPV360091
Ref Doctor : Self
Emp/Auth/TPA ID : 22E36964

Collected : 26/Oct/2024 08:17AM
Received : 26/Oct/2024 10:40AM
Reported : 26/Oct/2024 11:42AM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. 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 (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr. Rajalakshmi D
M.B.B.S, M.D
Consultant Pathologist



Dr. Vidya Aniket Gore
M.B.B.S, M.D (Pathology)
Consultant Pathologist



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| | | | |
|--------------|--------------------------|---------------------|----------------------|
| Patient Name | : Mr. BALJIT SINGH Gulia | Age | : 57Yrs 5Mths 11Days |
| UHID | : CSAR.0000146008 | OP Visit No. | : CSAROPV360091 |
| Printed On | : 26-10-2024 02:23 PM | Advised/Pres Doctor | : -- |
| Department | : Radiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employer Id | : 22E36964 | | |

DEPARTMENT OF RADIOLOGY

ULTRASONOGRAPHY OF ABDOMEN & PELVIS

LIVER : Normal in size & echotexture normal. No focal lesion seen. No intra hepatic biliary duct dilatation. Portal & hepatic veins appears normal. CBD is not dilated.

GALL BLADDER : **A Gall stone seen within the gall bladder measuring 1.8 cm.**

PANCREAS : Obscured by bowel gas. However the visualized parts of the pancreas appear grossly normal. Para-Aortic areas could not be seen.

SPLEEN : Normal in size and echotexture normal. No focal / diffuse lesions.

KIDNEYS : RIGHT KIDNEY : 8.6 x 4.2 cms, LEFT KIDNEY : 9.7 x 4.8 cms, normal parenchymal thickness. Both kidneys are normal in size and echotexture.

No calculi. No pelvicalyceal dilatation on both sides. Corticomedullary differentiation is well maintained.

URINARY BLADDER : Moderately distended. No intraluminal calculi/mass lesion seen.

PROSTATE : Normal in size & echotexture.

IMPRESSION : **A Gall stone seen within the gall bladder measuring 1.8 cm.**

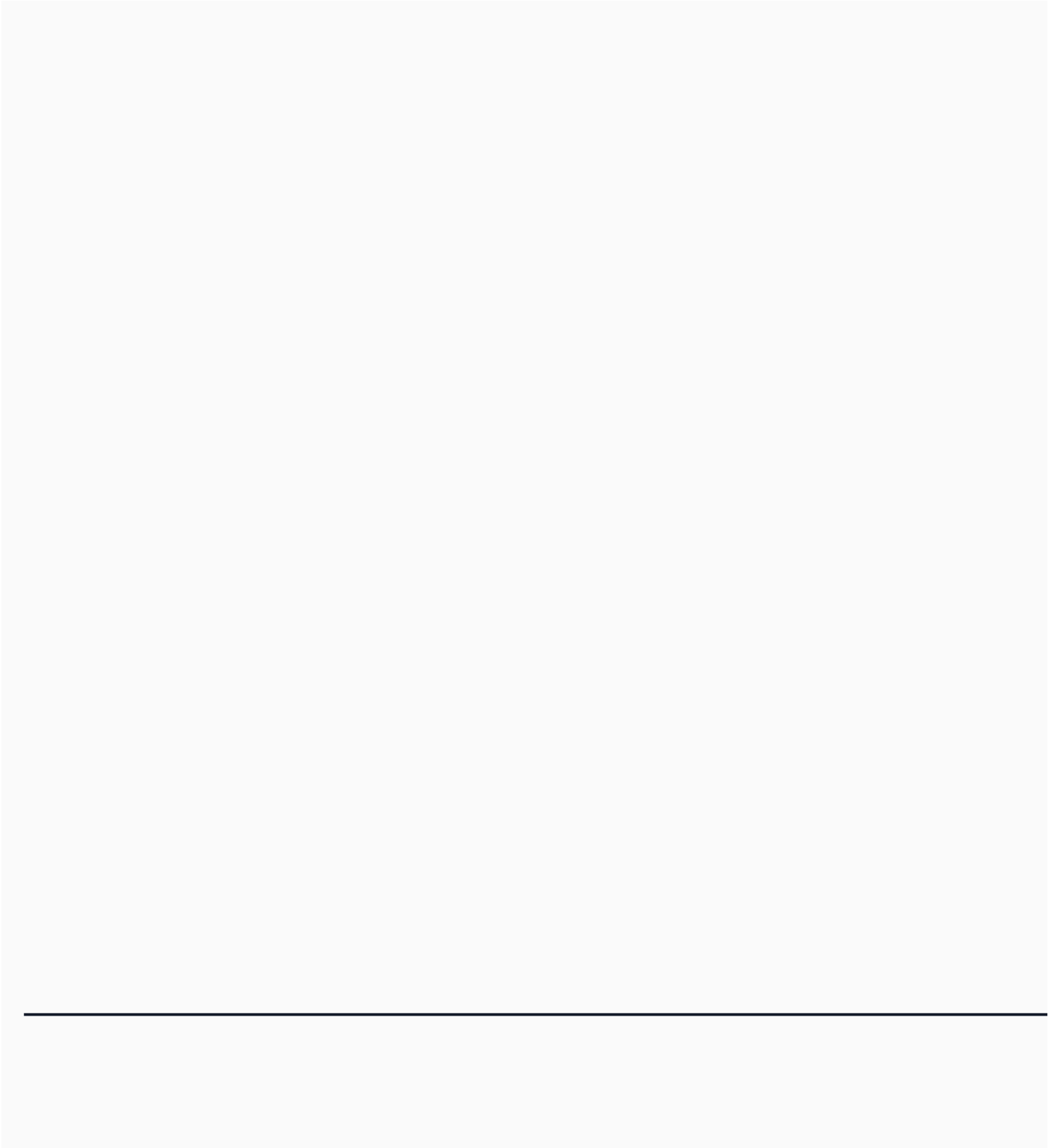
(The sonography findings should always be considered in correlation with the clinical and other investigation findings where applicable). It is only a professional opinion. Not valid for medico-legal purpose) Higher imaging techniques to be done, depending on the condition of the patient, if clinically needed.

---End Of The Report---



Dr. RAMESH G
MBBS, DMRD

27462
Radiology



| | | | |
|--------------|--------------------------|---------------------|----------------------|
| Patient Name | : Mr. BALJIT SINGH Gulia | Age | : 57Yrs 5Mths 14Days |
| UHID | : CSAR.0000146008 | OP Visit No. | : CSAROPV360091 |
| Printed On | : 29-10-2024 12:46 PM | Advised/Pres Doctor | : -- |
| Department | : Cardiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employeer Id | : 22E36964 | | |

DEPARTMENT OF CARDIOLOGY

2D ECHO CARDIOGRAPHY REPORT

M-MODE MEASUREMENTS

AORTA : 2.8cm LV (D) 4.6cm IVS (D) : 1.1cm
LA : 3.5cm LV (S) : 3.2cm PW (S) : 1.1 cm
EF : 60%

VALVES

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED, NORMAL LV SYSTOLIC FUNCTION
RIGHT VENTRICLE : NORMAL SIZED, TAPSE-19 MM, NORMAL RV FUNCTION

SEPTAE

IAS : INTACT
IVS : INTACT

GREAT ARTERIES

AORTA :NORMAL

PULMONARY ARTERY :NORMAL

PERICARDIUM :NORMAL

DOPPLER FLOW VELOCITIES

MITRAL FLOW - E/A 0.9/0.6 m/sec, Normal LV Diastolic function, MR- Trivial

AORTIC FLOW PG-10 mmHg

TRICUSPID FLOW PASP -29 mmHg, TR-Trivial

PULMONARY FLOW PG-06 mmHg

REGIONAL WALL MOTION: NO RWMA

OTHER FINDINGS

IVC -12 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE

IMPRESSION

NORMAL CHAMBER DIMENSIONS

NORMAL VALVES

NORMAL PA PRESSURE

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LV SYSTOLIC FUNCTION

NO CLOT / EFFUSION / VEGETATION

DR .SAIKAT KANJILAL

CONSULTANT INTERVENTIONAL CARDIOLOGY

PRASAD.B

CARDIAC SONOGRAPHER

Note: investigations have their limitations solitary pathological/ Radiological and investigations never confirm the final diagnosis they are help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly ,this report is not for medico-legal Purpose

---End Of The Report---



Mr.PRASAD BOODUGURI
BSC, DIP IN CARDIO TECH
19XXMCC04712/TSPMB
Cardiology

| | | | |
|--------------|--------------------------|---------------------|----------------------|
| Patient Name | : Mr. BALJIT SINGH Gulia | Age | : 57Yrs 5Mths 12Days |
| UHID | : CSAR.0000146008 | OP Visit No. | : CSAROPV360091 |
| Printed On | : 27-10-2024 06:24 AM | Advised/Pres Doctor | : -- |
| Department | : Radiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employeer Id | : 22E36964 | | |

DEPARTMENT OF RADIOLOGY

CHEST PA VIEW

Trachea central.
Mediastinum is central.
Cardiac silhouette appear normal.
visualized lung fields appear normal.
Bilateral hilum appear normal.
CP angles are clear.

IMPRESSION : No obvious gross abnormality noted in the x-ray.

ADVICE : Higher imaging techniques to be done, if clinically needed, depending on the clinical condition of the patient for further evaluation.

---End Of The Report---



Dr. RAMESH G
MBBS, DMRD
27462
Radiology

| | | | |
|--------------|--------------------------|---------------------|----------------------|
| Patient Name | : Mr. BALJIT SINGH Gulia | Age | : 57Yrs 5Mths 11Days |
| UHID | : CSAR.0000146008 | OP Visit No. | : CSAROPV360091 |
| Printed On | : 26-10-2024 11:57 AM | Advised/Pres Doctor | : -- |
| Department | : Cardiology | Qualification | : -- |
| Referred By | : Self | Registration No. | : -- |
| Employer Id | : 22E36964 | | |

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:-

NORMAL RESTING ECG.

NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED

---End Of The Report---



Dr. SUMANJITA BORA
MBBS, PGDCC
MCI-IMR-13/903
Cardiology

APOLLO CLINIC
CONSENT FORM

Patient name BALJIT SINGH GULIA Age 57 YRS

UHID Number 146008 Company Name BANK OF BARODA

I Mr/Mrs/Ms _____ Employee of _____

Company want to inform u that I am not interested in getting fitness by gp

.....And I claim the above statement in my full Consciousness.

B Singh
Patient signature _____ Date 26-10-2024

Consultation Pending. GA



Name : Mr. BALJIT SINGH Gulia

Age : 57Y 5M 10D

UHID : CSAR.0000146008

Address : Carmelaram Bangalore Rural Karnataka INDIA 560035

sex : Male



CSAR.0000146008

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
PAN INDIA OP AGREEMENT

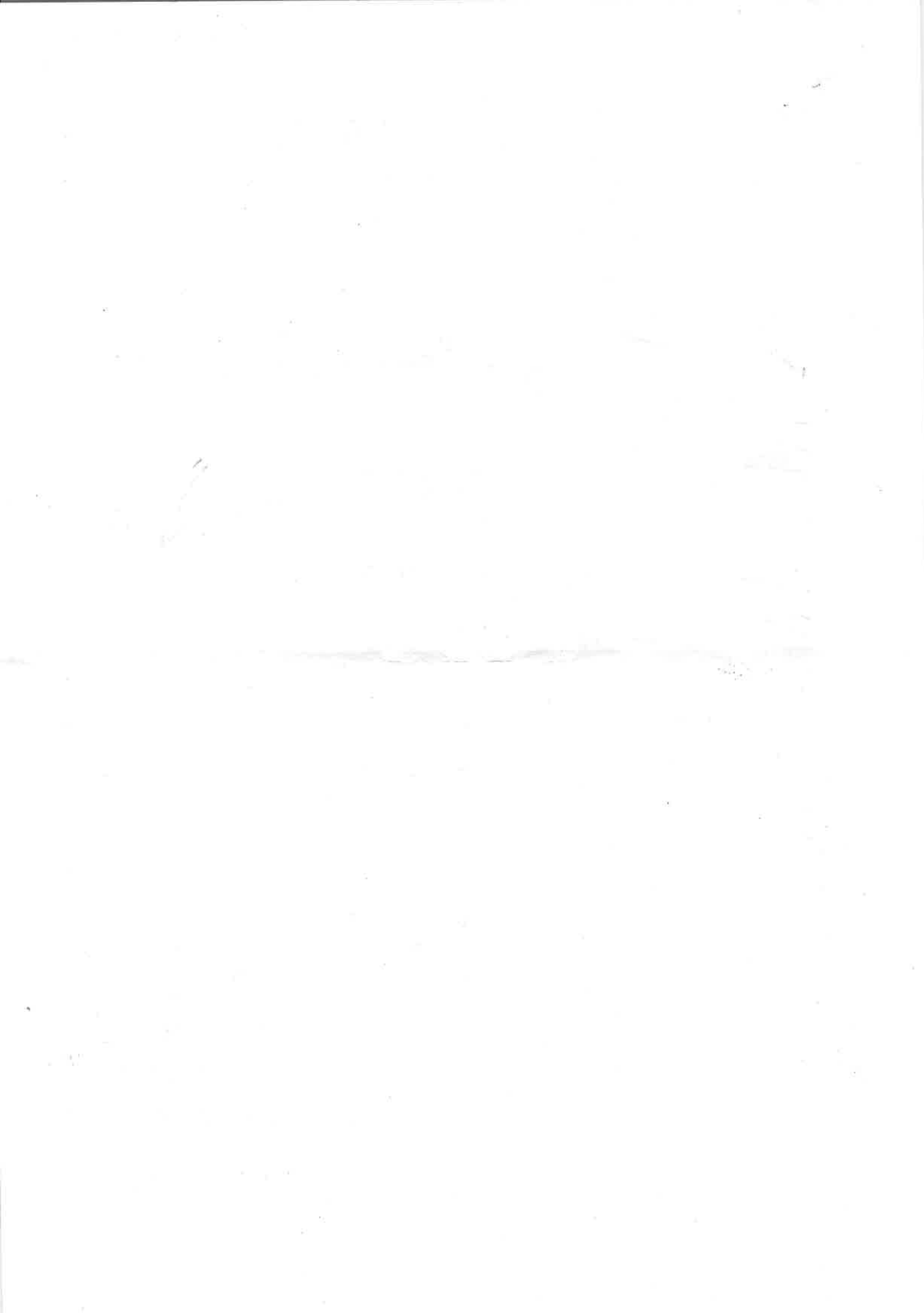
OP No: CSAROPV360091

Bill No: CSAR-OCR-49354

Date: Oct 26th, 2024, 8:14 AM

| Sno. | Service Type/Service Name | Department | |
|------|--|----------------------|--------------------------|
| 1 | ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324 | | |
| 1 | DENTAL CONSULTATION - 15 | Consultation | <input type="checkbox"/> |
| 2 | PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL) | Biochemistry | <input type="checkbox"/> |
| 3 | THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) | Biochemistry | <input type="checkbox"/> |
| 4 | HbA1c, GLYCATED HEMOGLOBIN | Biochemistry | <input type="checkbox"/> |
| 5 | ULTRASOUND - WHOLE ABDOMEN - 18. 12.00 pm | Ultrasound Radiology | <input type="checkbox"/> |
| 6 | OPHTHAL BY GENERAL PHYSICIAN - Idnaskli | Consultation | <input type="checkbox"/> |
| 7 | ENT CONSULTATION - 3 | Consultation | <input type="checkbox"/> |
| 8 | DIET CONSULTATION - 5 11.30. | Consultation | <input type="checkbox"/> |
| 9 | FITNESS BY GENERAL PHYSICIAN - After reports | Consultation | <input type="checkbox"/> |
| 10 | 2 D ECHO - 18 10.00 | Cardiology | <input type="checkbox"/> |
| 11 | X-RAY CHEST PA - 9 | X Ray Radiology | <input type="checkbox"/> |
| 12 | ECG - 10 | Cardiology | <input type="checkbox"/> |
| 13 | BODY MASS INDEX (BMI) | General | <input type="checkbox"/> |
| 14 | BLOOD GROUP ABO AND RH FACTOR | Blood Bank | <input type="checkbox"/> |
| 15 | COMPLETE URINE EXAMINATION | Clinical Pathology | <input type="checkbox"/> |
| 16 | HEMOGRAM + PERIPHERAL SMEAR | Haematology | <input type="checkbox"/> |
| 17 | RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) | Biochemistry | <input type="checkbox"/> |
| 18 | GAMMA GLUTAMYL TRANSFERASE (GGT) | Biochemistry | <input type="checkbox"/> |
| 19 | LIVER FUNCTION TEST (LFT) | Biochemistry | <input type="checkbox"/> |
| 20 | LIPID PROFILE | Biochemistry | <input type="checkbox"/> |
| 21 | URINE GLUCOSE(POST PRANDIAL) | Clinical Pathology | <input type="checkbox"/> |
| 22 | URINE GLUCOSE(FASTING) | Clinical Pathology | <input type="checkbox"/> |
| 23 | GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) | Biochemistry | <input type="checkbox"/> |
| 24 | GLUCOSE, FASTING | Biochemistry | <input type="checkbox"/> |

wt - 62.2kg
Hb2 158 gm
BP2 132/81mmHg
P2 65b/min
BAI 24-9



Name: Mr. Bajir Singh
Age: 57yrs


DI = 28/10/24
DR. RAKA Bhatt


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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

ENT CONSULTATIONS

O/E
E.N.T: 
Bilateral
Nose: Right, pale & lobulated
Throat: PPW Wyeckel
Neck: WNL


Follow up 8 w.

Follow up date:


Doctor Signature

| S. NO. | NAME OF DRUG & STRENGTH (Generic Name and in CAPITAL) | A MEDICATION DOSAGE | B | | | | C NO. OF DAYS | (A*B*C) TOTAL QTY. | INSTRUCTIONS FOR ADMINISTERING DOSAGE | | |
|--------|--|---------------------------|---------|-----------|---------|-------|---------------------|--------------------------|--|------------|--------|
| | | | MORNING | AFTERNOON | EVENING | NIGHT | | | Before Meal | After Meal | Others |
| | | | | | | | | | | | |
| 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| 6 | | | | | | | | | | | |
| 7 | | | | | | | | | | | |
| 8 | | | | | | | | | | | |
| 9 | | | | | | | | | | | |

RECOMMENDED INVESTIGATIONS

BIO CHEMISTRY

- ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM
- CALCIUM, SERUM
- CREATININE, SERUM
- FERRITIN - 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.

ORAL EXAMINATION FORM



Date: 26/10/24

Patient ID: _____ MHC

Patient Name: Mr. Baljit Singh Gudia Age: 57 Sex: Male Female

Chief Complaint:

Medical History :

Drug Allergy :

Medication currently taken by the Guest :

Initial Screenign Findings :

Dental Caries :

Missing Teeth : 7
6

Impacted Teeth :

Attrition / Abrasion :

Bleeding :

Pockets / Recession :

Calculus / Stains : 7 ne

Mobility :

Restored Teeth : 321/12

Non - restorable Teeth for extraction /
Root Stumps :

Malocclusion :

Others :

Advice:- Scaling

Doctor
Name & Signature :

Dr. Ranya

For Appontments,
Call Us at
Mob-8870032885

MRD No 1040228735

PatientName: Mr.BALJIT SINGH GULIA /m/57 Yr(s) 0 Mn(s) 0 Day(s)

Address: APOLLO HOSPITAL , SARJAPUR BANGALORE

Mobile Number: 9880110186

Consultation Date: 26-10-2024 12:12:00 PM



Consultant Dr Hemanth Kumar

Ophthalmic History **Both Eye :** SPECTACLE USE [SINCE 3 YRS, PG CHANGED SINCE 1 YR BACK]

Medical History NIL

Current Spectacle Prescription

| | SPH | CYL | AXIS | ADD | DVA | NVA |
|-----------|-------|------|------|-------|------|-----|
| Right Eye | -0.50 | 0.00 | 180 | +2.00 | 6/6B | N6 |
| Left Eye | -0.50 | 0.00 | 180 | +2.00 | 6/6 | N6 |

Vision

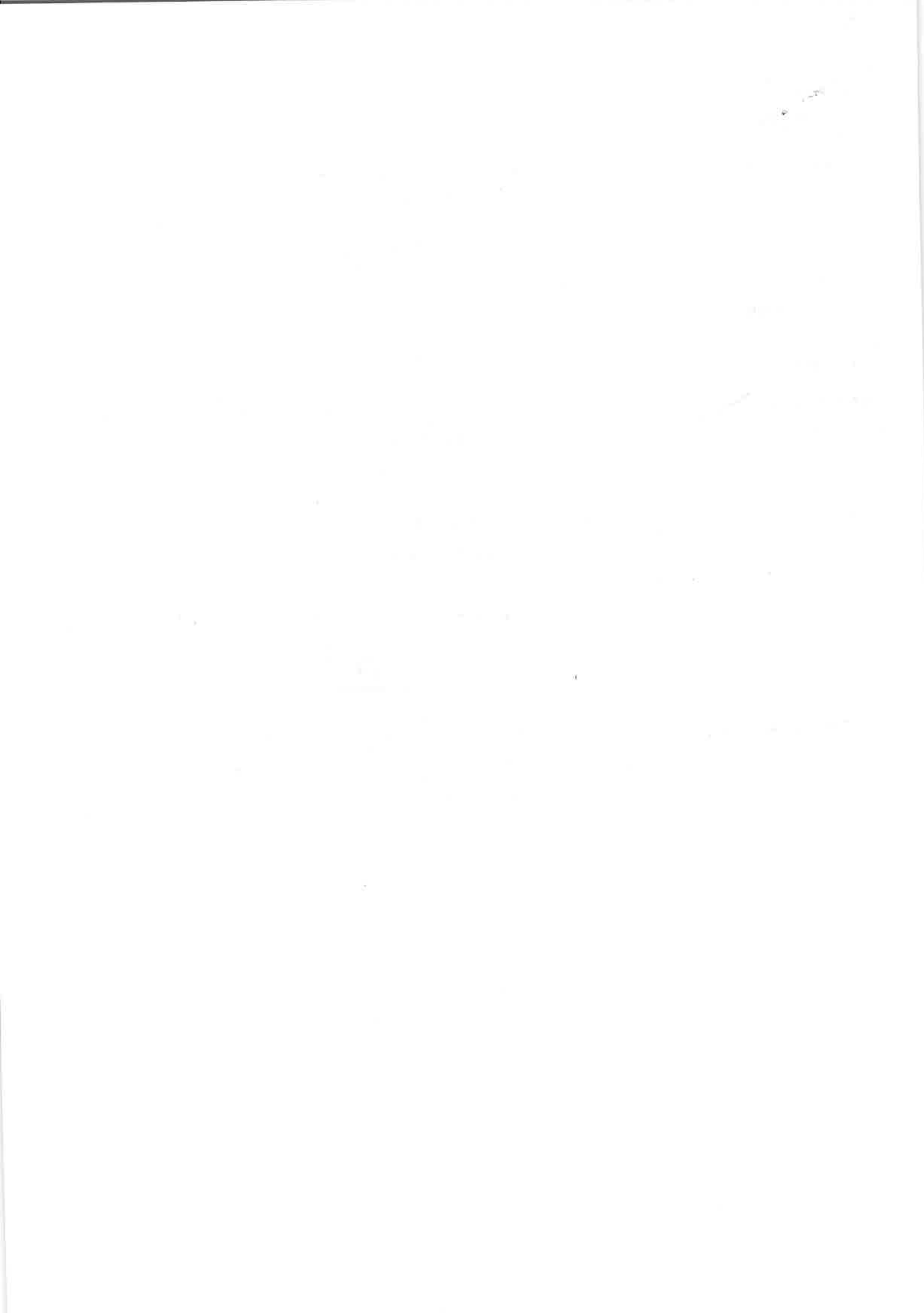
| Eye | Distance Vision | | | Near Vision | | IOP | | | |
|-------|-----------------|-------|-----|-------------|-------|---------------------------------|-----|-----|------|
| | UCDVA | BCDVA | PH | UCNVA | BCNVA | Date Time : 26-10-2024 12:22 PM | | | |
| Right | 6/9P | | 6/6 | N12 | | | | | |
| Left | 6/9 | | 6/6 | N12 | | | | | |
| | | | | | | NCT | GAT | CCT | CIOP |
| Right | | | | | | 12mmHg | | | |
| Left | | | | | | 13mmHg | | | |

Final Prescription Spectacle Correction

| | SPH | CYL | AXIS | ADD | DVA | NVA |
|-----------|-------|------|------|-------|-----|-----|
| Right Eye | -0.75 | 0.00 | 180 | +2.25 | 6/6 | N6 |
| Left Eye | -0.50 | 0.00 | 180 | +2.25 | 6/6 | N6 |

Issued Date & Time : 26-10-2024 12:36:55 PM

Dr Hemanth Kumar
(95381)

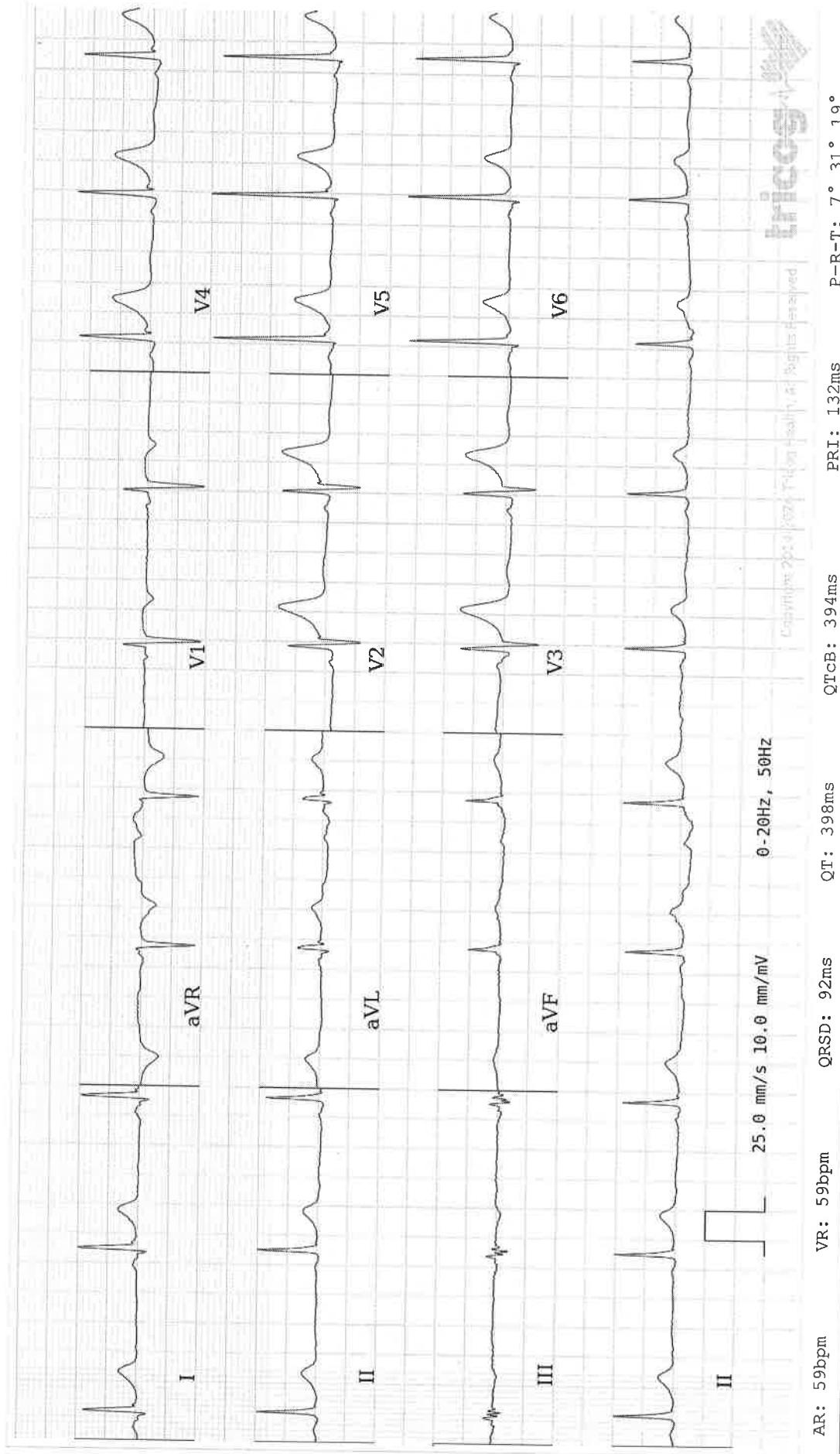




Apollo Clinic, Kaikondrahalli

Age / Gender: 57/Male
Patient ID: BALJIT

Date and Time: 26th Oct 24 9:14 AM



Sinus Bradycardia, Early repolarization with an ascending ST segment. Please correlate clinically.

REPORTED BY



Dr. Arundhati Murugoji

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

2D ECHO CARDIOGRAPHY REPORT

PATIENT NAME:MR.BALJIT SINGH GULIA

AGE :57 YEARS/MALE

Date:26/10/2024

M-MODE MEASUREMENTS

AORTA : 2.8cm LV (D) 4.6cm IVS (D) : 1.1cm
LA : 3.5cm LV (S) : 3.2cm PW (S): 1.1 cm
EF :60%

VALVES

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED, NORMAL LV SYSTOLIC FUNCTION
RIGHT VENTRICLE : NORMAL SIZED, TAPSE-19 MM, NORMAL RV FUNCTION

SEPTAE

IAS : INTACT
IVS : INTACT

GREAT ARTERIES

AORTA : NORMAL
PULMONARY ARTERY : NORMAL

PERICARDIUM :NORMAL

DOPPLER FLOW VELOCITIES

MITRAL FLOW - E/A 0.9/0.6 m/sec, Normal LV Diastolic function, MR- Trivial
AORTIC FLOW PG-10 mmHg
TRICUSPID FLOW PASP -29 mmHg, TR-Trivial
PULMONARY FLOW PG-06 mmHg

REGIONAL WALL MOTION: NO RWMA

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 KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments:www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

OTHER FINDINGS

IVC -12 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE

IMPRESSION

NORMAL CHAMBER DIMENSIONS

NORMAL VALVES

NORMAL PA PRESSURE

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LV SYSTOLIC FUNCTION

NO CLOT / EFFUSION / VEGETATION

DR .SAIKAT KANJILAL
CONSULTANT INTERVENTIONAL CARDIOLOGY

PRASAD.B
CARDIAC SONOGRAPHER

Note: investigations have their limitations solitary pathological/ Radiological and investigations never confirm the final diagnosis they are help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly ,this report is not for medico-legal Purpose

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**





बैंक ऑफ बड़ोदा
Bank of Baroda



SL.No.102

नाम
Name

बलजीत सिंह गुलिया
Baljit Singh Gulia

E.C. No

167632


जारीकर्ता प्राधिकारी
Issuing Authority


धारक के हस्ताक्षर
Signature of Holder



Fwd: Health Check up Booking Re Schedule Request(22E36964),Package Code-PKG10000367, Beneficiary Code-300108

From Baljit Singh Gulia <baljit.701816@gmail.com>
Date Sat 26-10-2024 08:12
To Sarjapur Apolloclinic <sarjapur@apolloclinic.com>

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

From: **Mediwheel** <wellness@mediwheel.in>
Date: Fri, Oct 25, 2024 at 11:29 AM
Subject: Health Check up Booking Re Schedule Request(22E36964),Package Code-PKG10000367, Beneficiary Code-300108
To: <baljit.701816@gmail.com>
CC: <customercare@mediwheel.in>

011-41195959

Dear **Baljit Singh Gulia**,

Your Health Checkup has been successfully rescheduled with the following details.

Health Package Code: Arcofemi MediWheel Full Body Annual Plus Male Above 50 2D ECHO

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

Patient Package Name : Mediwheel Full Body Health Checkup Male Above 40

Name of Diagnostic/Hospital : Apollo Clinic - Sarjapur Road

Address of Diagnostic/Hospital- : Apollo Clinic, #769, GYR Chambers, Opp South Indian Bank, Kaikondanahalli, Sarjapur Road -560034

Booking Id : 22E36964

Appointment Date : 26-10-2024

Preferred Time : 08:00 AM - 08:30 AM

Booking Status : Booking ReSchedule

| Member Information | | |
|------------------------|---------|--------|
| Booked Member Name | Age | Gender |
| MR. GULIA BALJIT SINGH | 57 year | Male |

