

Name: Mr. ABHISHEK KUMAR
Age/Gender: 41 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. YASODHA KUMARA REDDY MOKKALA

MR No: CVEL.0000140085
Visit ID: CVELOPV195515
Visit Date: 23-12-2023 08:35
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Name: Mr. ABHISHEK KUMAR
Age/Gender: 41 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. SHILFA NIGAR N

MR No: CVEL.0000140085
Visit ID: CVELOPV195515
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Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. V J NIRANJANA BHARATHI

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Doctor's Signature

Name: Mr. ABHISHEK KUMAR
Age/Gender: 40 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: VELACHERY_03122022
Sponsor: ARCOFEMI HEALTHCARE LIMITED
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HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
23-12-2023 16:35	72 Beats/min	160/110 mmHg	20 Rate/min	98 F	163 cms	92 Kgs	%	%	Years	34.63	cms	cms	cms		AHLL03253

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
23-12-2023 16:35	72 Beats/min	160/110 mmHg	20 Rate/min	98 F	163 cms	92 Kgs	%	%	Years	34.63	cms	cms	cms		AHLL03253

Fwd: Health Check up Booking Confirmed Request(UBOIE3094),Package Code-
PKG10000367, Beneficiary Code-302841

Sagar Abhishek <abhishekeklavya@gmail.com>

Sat 12/23/2023 8:40 AM

To:Velachery Apolloclinic <velachery@apolloclinic.com>

140085
24

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

From: **Mediwheel** <wellness@mediwheel.in>

Date: Fri, 22 Dec, 2023, 11:45 am

Subject: Health Check up Booking Confirmed Request(UBOIE3094),Package Code-PKG10000367,
Beneficiary Code-302841

To: <abhishekeklavya@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959

Dear **ABHISHEK KUMAR**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 20-12-2023

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

Patient Package Name : MediWheel Full Body Health Checkup Male 40 To 50

Name of Diagnostic/Hospital : Apollo Clinic

Address of Diagnostic/Hospital- Apollo Clinic, Plot no:46, 7th street, Near Vijayanagar bus stand, Tansi nagar, Velachery - 600042

City : Chennai

State :

Pincode : 600042

Appointment Date : 23-12-2023

Confirmation Status : Booking Confirmed

Preferred Time : 8:30am-9:30am

Booking Status : Booking Confirmed

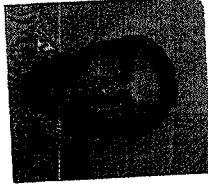
Member Information		
Booked Member Name	Age	Gender
ABHISHEK KUMAR	40 year	Male

Note - Please note to not pay any amount .

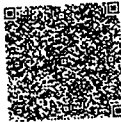
Instructions to undergo Health Check:



भारत सरकार
GOVERNMENT OF INDIA



अभिषेक कुमार
Abhishek Kumar
जन्म तिथि/ DOB: 31/12/1982
पुरुष / MALE



4268 9788 1466

आधार-आम आदमी का अधिकार

Name <i>Mr. Abhishek Kumar</i>	Date <i>28/12/2023</i>
Age <i>40 yrs</i>	UHID No. <i>140085</i>
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	

OPHTHAL FITNESS CERTIFICATE

	RE	LE
DV-UCVA :	<i>6/6</i>	<i>6/6</i>
DV-BCVA :		
NEAR VISION :	<i>N₆st</i>	<i>N₆st</i>
ANTERIOR SEGMENT :		
IOP :	<i>(2)</i>	<i>(2)</i>
FIELDS OF VISION :	<i>(2)</i>	<i>(2)</i>
E O M :		
COLOUR VISION :	<i>Normal</i>	<i>Normal</i>
FUNDUS :		
IMPRESSION :	<i>(BE) presbyopic</i>	
ADVICE :	<i>fit / reading glass is required</i>	

[Signature]
23/12/2023

CERTIFICATE OF MEDICAL FITNESS

Height: <u>163</u> Cm	Weight: <u>92.2</u> kg	BMI: <u>34.7</u>	BP: <u>160 / 110</u> mmHg
OPTHAL CHECK : Right Eye: <u>6/6</u>		Left Eye: <u>6/6</u>	Colour vision: <u>(N)</u>

This is to certify that I have conducted the clinical examination

Of MR. ABHISHEK KUMAR on 23-12-2023.

After reviewing the medical history and on clinical examination it has been found that he/she is

• Medically Fit

FIT FOR WORK.

- Urine PCR
- avoid red meat

• Fit with restrictions/recommendations

Though following restrictions have been revealed, in my opinion, these are not impediments to the job.

1.....

2.....

3.....

However the employee should follow the advice/medication that has been communicated to him/her.

Review after _____

• Currently Unfit.

Review after nil recommended

• Unfit nil



Dr. Yashodh Reddy

Medical officer
Apollo clinic(Location)

This certificate is not meant for medico-legal purposes

Dr. YASODH REDDY
M.B.B.S., F sp Diabetology
CLIN - Cardiology
Reg. No: 93787
Apollo Family Physician

Date: 23-12-23

Ref. by: _____

Name: Mr. ABHISHEK KUMAR

Age: 40 Sex: M/F

Consultant: Dr. NITYANA BHARATHI

UHID: 140085

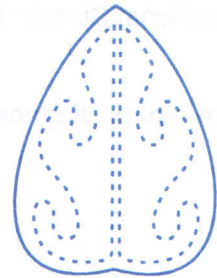
ALLERGIES :

Chief Complaints:

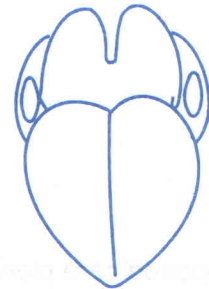
Pain Score : _____ Location : _____ Character : _____

No ENT complaints

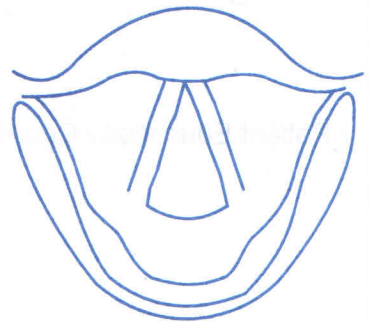
NOSE



THROAT



LARYNX



R



L



Past History :

Nutritional assessment :

Build :

Social History : Smoking Ethanol Tobacco

Clinical Examination :

O/E B/L - m ok

Nox / throat / NAD

Psychological Evaluation : Normal Anxious Depressed

Functional Status : (ability to perform routine activities)

Provisional Diagnosis:

Clinically normal ENT

Investigation :

Proposed care plan:

Patient Education / Counselling -

- Current status
- Outcome
- Expected Cost
- Others specify _____

Follow up:

Signature *Dr. V. J. NIRANJANA BHARATHI*, MBBS., MS(ENT)
Name : Consultant ENT, Head & Neck Surgeon
Date & Time : Reg. No.103833

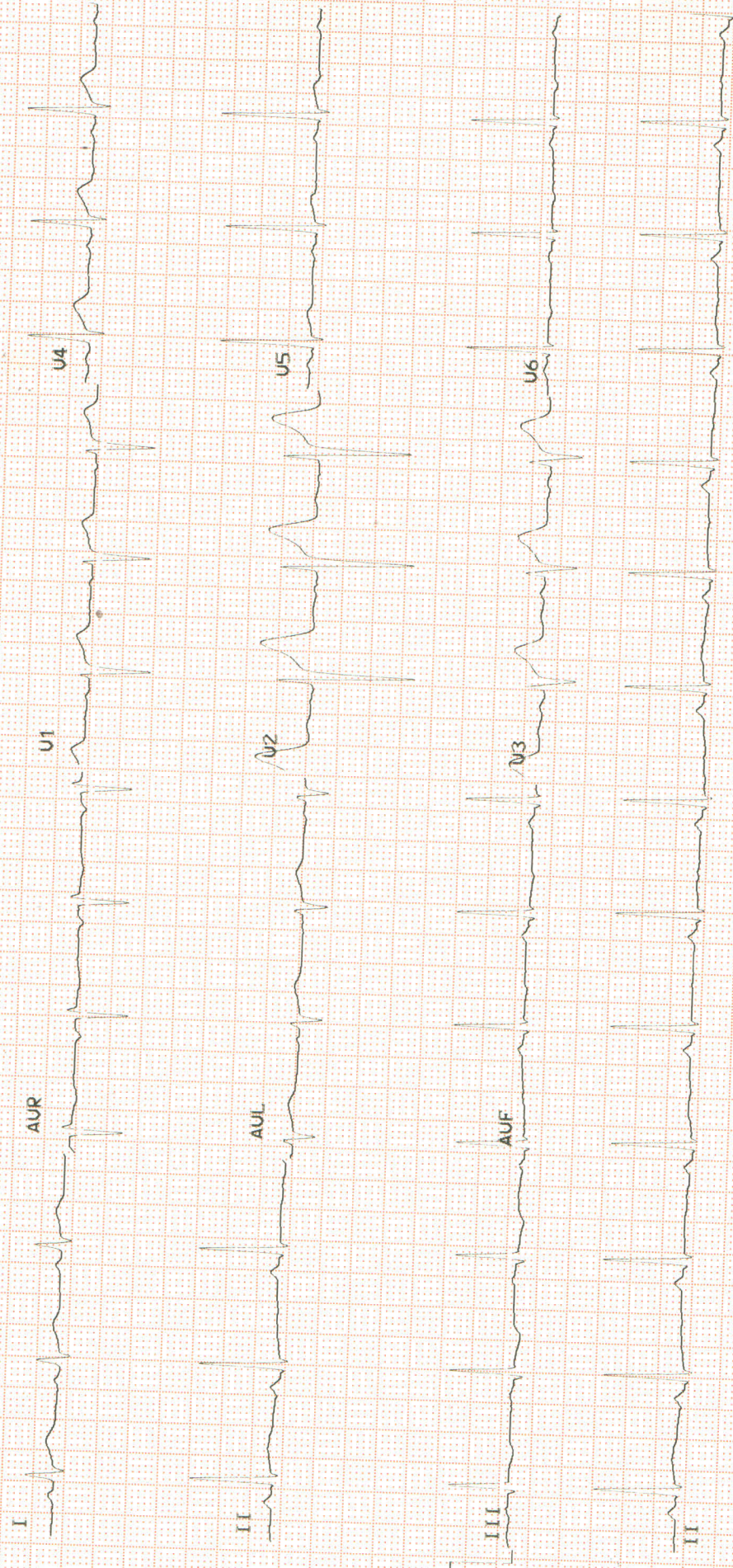
HR 81 bpm

Measurement Results:

RS	:	100 ms	< P
TI/QTcB	:	374 / 435 ms	< T
R	:	140 ms	< QRS
R/PP	:	738 / 735 ms	aUL
PR/QT	:	60 / 75 / -5 degrees	0 I
TD/QTcBD	:	52 / 61 ms	III +90 II
okolow	:	2.4 mV	aUF
<	:	12	

Interpretation:

Unconfirmed report.



Patient Name : Mr. ABHISHEK KUMAR Age : 40 Y/M
UHID : CVEL.0000140085 OP Visit No : CVELOPV195515
Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 23-12-2023 16:14
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.0 CM
LA (es)	3.8 CM
LVID (ed)	4.3 CM
LVID (es)	2.6 CM
IVS (Ed)	1.2 CM
LVPW (Ed)	1.5 CM
EF	68.00%
%FD	38.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	INTACT
INTER VENTRICULAR SEPTUM	INTACT
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	

Patient Name	: Mr. ABHISHEK KUMAR	Age	: 40 Y/M
UHID	: CVEL.0000140085	OP Visit No	: CVELOPV195515
Conducted By:	: Dr. SHANMUGA SUNDARAM D	Conducted Date	: 23-12-2023 16:14
Referred By	: SELF		

NO REGIONAL WALL MOTION ABNORMALITY;

COLOUR AND DOPPLER STUDIES

AV max 1.0m/s; PG 4.4 mmHg;

PV max 1.0m/s; PG 4.2 mmHg;

MV E 0.6 m/s ; MV A 0.5 m/s;

TV E 0.3 m/s; TV A 0.2 m/s.

Impression

LEFT VENTRICULAR HYPERTROPHY

*NO REGIONAL WALL MOTION ABNORMALITY;

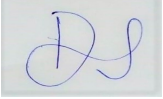
*NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

TRIVIAL MITRAL REGURGITATION/ TRICUSPID REGURGITATION

;

*NO PERICARDIAL EFFUSION/ PULMONARY ARTERY
HYPERTENSION.

Patient Name : Mr. ABHISHEK KUMAR Age : 40 Y/M
UHID : CVEL.0000140085 OP Visit No : CVELOPV195515
Conducted By: : Dr. SHANMUGA SUNDARAM D Conducted Date : 23-12-2023 16:14
Referred By : SELF



DR SHANMUGASUNDARAM D

CONSULTANT CARDIOLOGIST



Certificate No. MC-2439

Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:42PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 03:21PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

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





Certificate No. MC-2439

Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF HAEMATOLOGY**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	14.6	g/dL	13-17	Spectrophotometer
PCV	43.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.63	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	93.3	fL	83-101	Calculated
MCH	31.4	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	13.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,900	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYtic COUNT (DLC)

NEUTROPHILS	62.4	%	40-80	Electrical Impedance
LYMPHOCYTES	28.4	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	7.2	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4929.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2243.6	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	126.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	568.8	Cells/cu.mm	200-1000	Calculated
BASOPHILS	31.6	Cells/cu.mm	0-100	Calculated

PLATELET COUNT	256000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

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

PLATELETS : Adequate in number.

PARASITES : No haemoparasites seen.



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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IMPRESSION : Normocytic normochromic blood picture.

NOTE/ COMMENT : Please correlate clinically.





Certificate No. MC-2439

Patient Name : Mr.ABHISHEK KUMAR	Collected : 23/Dec/2023 08:46AM
Age/Gender : 40 Y 11 M 23 D/M	Received : 23/Dec/2023 12:42PM
UHID/MR No : CVEL.0000140085	Reported : 23/Dec/2023 05:09PM
Visit ID : CVELOPV195515	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOIE3094	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - 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	Negative			Microplate Hemagglutination

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



Patient Name : Mr.ABHISHEK KUMAR	Collected : 23/Dec/2023 08:46AM
Age/Gender : 40 Y 11 M 23 D/M	Received : 23/Dec/2023 02:11PM
UHID/MR No : CVEL.0000140085	Reported : 23/Dec/2023 02:41PM
Visit ID : CVELOPV195515	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOIE3094	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	99	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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	102	mg/dL	70-140	HEXOKINASE
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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.





Certificate No. MC-2439

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Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:42PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 02:16PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA

HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	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
 - HbF >25%
 - Homozygous Hemoglobinopathy.
(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:52PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 02:29PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	166	mg/dL	<200	CHO-POD
TRIGLYCERIDES	189	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	36	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	130	mg/dL	<130	Calculated
LDL CHOLESTEROL	92.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	37.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.61		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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. 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.
5. 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.
6. 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.



Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:52PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 02:29PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.71	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.57	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	89.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.70	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated
A/G RATIO	1.2		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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Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:52PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 02:29PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.76	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	17.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.70	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.00	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.40	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.5	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	101	mmol/L	101–109	ISE (Indirect)



Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 12:52PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 02:18PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	23.00	U/L	<55	IFCC





Certificate No. MC-2439

Patient Name : Mr.ABHISHEK KUMAR	Collected : 23/Dec/2023 08:46AM
Age/Gender : 40 Y 11 M 23 D/M	Received : 23/Dec/2023 12:47PM
UHID/MR No : CVEL.0000140085	Reported : 23/Dec/2023 01:44PM
Visit ID : CVELOPV195515	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOIE3094	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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

TRI-iodothyronine (T3, TOTAL)	1.21	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.11	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.562	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





Certificate No. MC-2439

Patient Name : Mr.ABHISHEK KUMAR	Collected : 23/Dec/2023 08:46AM
Age/Gender : 40 Y 11 M 23 D/M	Received : 23/Dec/2023 12:47PM
UHID/MR No : CVEL.0000140085	Reported : 23/Dec/2023 01:34PM
Visit ID : CVELOPV195515	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOIE3094	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.470	ng/mL	0-4	CLIA





Certificate No. MC-2439

Patient Name : Mr.ABHISHEK KUMAR	Collected : 23/Dec/2023 08:46AM
Age/Gender : 40 Y 11 M 23 D/M	Received : 23/Dec/2023 06:34PM
UHID/MR No : CVEL.0000140085	Reported : 23/Dec/2023 07:58PM
Visit ID : CVELOPV195515	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOIE3094	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	6.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	POSITIVE +		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name	: Mr.ABHISHEK KUMAR	Collected	: 23/Dec/2023 08:46AM
Age/Gender	: 40 Y 11 M 23 D/M	Received	: 23/Dec/2023 01:21PM
UHID/MR No	: CVEL.0000140085	Reported	: 23/Dec/2023 01:45PM
Visit ID	: CVELOPV195515	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: UBOIE3094		

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324

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

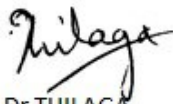
*** End Of Report ***



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