



Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 22/Jul/2023 11:07AM
UHID/MR No	: CMYS.0000057255	Reported	: 22/Jul/2023 01:33PM
Visit ID	: CMYSOPV115655	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 639842		

#### DEPARTMENT OF HAEMATOLOGY

## ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECHO - PAN INDIA - FY2324

## PERIPHERAL SMEAR, WHOLE BLOOD EDTA

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#### SIN No:BED230170752

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 APOLLO CLINICS NETWORK GSTIN: 29AADCA0733E1Z3 Address: 22, 23, 24, 25/101/3, Sree Rama Layout, BNR Complex, OPP.RBI Layout, JP Nagar, 7th Phase, Bengaluru, Karnataka



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% illion/cu.mm fL pg g/dL % ells/cu.mm % % % % % %	40-50 4.5-5.5 83-101 27-32 31.5-34.5 11.6-14 4000-10000 40-80 20-40 1-6 2-10	Electronic pulse & Calculation Electrical Impedence Calculated Calculated Calculated Electrical Impedance Electrical Impedance Electrical Impedance Electrical Impedance
fL     pg     g/dL     %     ells/cu.mm     %     %     %     %     %     %     %     %	83-101 27-32 31.5-34.5 11.6-14 4000-10000 40-80 20-40 1-6 2-10	Calculated Calculated Calculated Calculated Electrical Impedance Electrical Impedance Electrical Impedance
pg           g/dL           %           ells/cu.mm           %           %           %           %           %           %           %           %           %           %           %           %           %           %           %           %           %           %	27-32 31.5-34.5 11.6-14 4000-10000 40-80 20-40 1-6 2-10	Calculated Calculated Calculated Electrical Impedance Electrical Impedance Electrical Impedance
g/dL % ells/cu.mm % % % %	31.5-34.5 11.6-14 4000-10000 40-80 20-40 1-6 2-10	Calculated Calculated Electrical Impedance Electrical Impedance Electrical Impedance Electrical Impedance
%           ells/cu.mm           %           %           %           %           %           %           %           %           %	11.6-14 4000-10000 40-80 20-40 1-6 2-10	Calculated Electrical Impedance Electrical Impedance Electrical Impedance Electrical Impedance
ells/cu.mm % % % %	4000-10000 40-80 20-40 1-6 2-10	Electrical Impedance Electrical Impedance Electrical Impedance Electrical Impedance
% % % %	40-80 20-40 1-6 2-10	Electrical Impedance Electrical Impedance Electrical Impedance
% % %	20-40 1-6 2-10	Electrical Impedanc Electrical Impedanc
% % %	20-40 1-6 2-10	Electrical Impedanc Electrical Impedanc
% %	1-6 2-10	Electrical Impedance
%	2-10	
		Electrical Impedanc
0/2		
/0	<1-2	Electrical Impedanc
ells/cu.mm	2000-7000	Electrical Impedanc
ells/cu.mm	1000-3000	Electrical Impedanc
ells/cu.mm	20-500	Electrical Impedance
ells/cu.mm	200-1000	Electrical Impedance
ells/cu.mm	0-100	Electrical Impedanc
ells/cu.mm	150000-410000	Electrical impedence
n at the end	0-15	Modified Westergre
c	Cells/cu.mm cells/cu.mm m at the end	Cells/cu.mm         0-100           cells/cu.mm         150000-410000

R.B.C: Majority are normocytic normochromic.

W.B.C: Are normal in number, morphology and distribution.

Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

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Test Name Result		Unit	Bio. Ref. Range	Method	

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Test Name	Result	Unit	Bio. Ref. Range	Method

BLOOD GROUP ABO AND RH FACTOR, V	BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A	Forward & Reverse Grouping with Slide/Tube Aggluti			
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination			

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<b>GLUCOSE, FASTING</b> , SODIUM FLUORIDE PLASMA	119	mg/dL	70-100	GOD - POD
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Comment:
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As per American Diabetes Guidelines

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

GLUCOSE, POST PRANDIAL (PP), 2	288	mg/dL	70-140	GOD - POD	
HOURS , SODIUM FLUORIDE PLASMA (2					
HR)					

## **Comment:**

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

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Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN ,	7.7	%	HPLC
WHOLE BLOOD EDTA			
ESTIMATED AVERAGE GLUCOSE (eAG),	174	mg/dL	Calculated
WHOLE BLOOD EDTA		-	

## **Comment:**

Reference Range as per American Diabetes Association (ADA):

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

Note: Dietary preparation or fasting is not required.

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

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Test Name	Result	Unit	Bio. Ref. Range	Method

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	131	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	253	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	30	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	101	mg/dL	<130	Calculated
LDL CHOLESTEROL	50.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	50.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.37		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	$\geq$ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	$\geq$ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.70	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	27	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	28.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	76.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.10	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.37		0.9-2.0	Calculated

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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM					
CREATININE	0.90	mg/dL	0.66-1.25	Creatinine amidohydrolase	
UREA	29.60	mg/dL	19-43	Urease	
BLOOD UREA NITROGEN	13.8	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	3.80	mg/dL	3.5-8.5	Uricase	
CALCIUM	8.40	mg/dL	8.4 - 10.2	Arsenazo-III	
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.5-4.5	PMA Phenol	
SODIUM	136	mmol/L	135-145	Direct ISE	
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE	
CHLORIDE	102	mmol/L	98 - 107	Direct ISE	

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# ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECHO - PAN INDIA - FY2324Test NameResultUnitBio. Ref. RangeMethod

ALKALINE PHOSPHATASE, SERUM	76.00	U/L	38-126	p-nitrophenyl phosphate	
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	45.00	U/L	15-73	Glyclyclycine Nitoranalide	

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SIN No:SE04429955

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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 (W 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)





DEPARTMENT OF IMMUNOLOGY ARCOEEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECHO - PAN INDIA - EY2324				
Emp/Auth/TPA ID	: 639842			
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Visit ID	: CMYSOPV115655	Status	: Final Report	
UHID/MR No	: CMYS.0000057255	Reported	: 22/Jul/2023 12:01PM	
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 22/Jul/2023 10:50AM	
Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM	

ARCOPENII - MEDIWHEEL - FULL BODT FLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECHO - FAN INDIA - F12324						
Test Name	Result	Unit	Bio. Ref. Range	Method		

## THYROID PROFILE TOTAL (T3, T4, TSH), SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.04	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.77	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.280	µIU/mL	0.35-4.94	CMIA

## **Comment:**

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

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

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

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### SIN No:SPL23104388

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Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM	
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 22/Jul/2023 10:50AM	
UHID/MR No	: CMYS.0000057255	Reported	: 22/Jul/2023 02:08PM	
Visit ID	: CMYSOPV115655	Status	: Final Report	
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED	
Emp/Auth/TPA ID	: 639842			
DEPARTMENT OF IMMUNOLOGY				

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECHO - PAN INDIA - FY2324					
Test Name	Result	Unit	Bio. Ref. Range	Method	

VITAMIN D (25 - OH VITAMIN D) , SERUM	21	ng/mL	CMIA

## **Comment:**

BIOLOGICAL REFERENCE RANGES

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

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

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

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

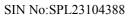
		-		
VITAMIN B12, SERUM	119	pg/mL	187 - 883	CMIA

## **Comment:**

Vitamin B12 deficiency frequently causes macrocytic anemia, glossitis, peripheral neuropathy, weakness, hyperreflexia, ataxia, loss of proprioception, poor coordination, and affective behavioral changes. A significant increase in RBC MCV may be an important indicator of vitamin B12 deficiency.

Patients taking vitamin B12 supplementation may have misleading results. A normal serum concentration of B12 does not rule out tissue deficiency of vitamin B12. The most sensitive test for B12 deficiency at the cellular level is the assay for MMA. If clinical symptoms suggest deficiency, measurement of MMA and homocysteine should be considered, even if serum B12 concentrations are normal.

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Visit ID	: CMYSOPV115655	Status	: Final Report	
UHID/MR No	: CMYS.0000057255	Reported	: 23/Jul/2023 02:16PM	
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 23/Jul/2023 11:10AM	
Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM	

ARCOFEMI - MEDIWHEEL - FULL BODY	PLUS ANNUAL CHE	CK ADVANCED	HC MALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

TOTAL PROSTATIC SPECIFIC ANTIGEN	0.293	ng/mL	<4	CMIA
(tPSA), SERUM		-		

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#### SIN No:IM05857918

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DEPARTMENT OF CLINICAL PATHOLOGY					
Emp/Auth/TPA ID	: 639842				
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CMYSOPV115655	Status	: Final Report		
UHID/MR No	: CMYS.0000057255	Reported	: 22/Jul/2023 01:04PM		
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 22/Jul/2023 12:00PM		
Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM		

ARCOFEMI - MEDIWHEEL - FULL BODY	PLUS ANNUAL CHE	CK ADVANCED	HC MALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

COMPLETE URINE EXAMINATION (CUE	), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	POSITIVE (TRACE)		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE	2	NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MOUN	IT AND MICROSCOPY			
PUS CELLS	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2152083

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DEPARTMENT OF CLINICAL PATHOLOGY					
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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED		
Visit ID	: CMYSOPV115655	Status	: Final Report		
UHID/MR No	: CMYS.0000057255	Reported	: 22/Jul/2023 01:03PM		
Age/Gender	: 59 Y 5 M 12 D/M	Received	: 22/Jul/2023 12:00PM		
Patient Name	: Mr.THATTANDA A BABY	Collected	: 22/Jul/2023 08:23AM		

ARCOFEMI - MEDIWHEEL - FULL BODY	PLUS ANNUAL CHE	CK ADVANCED	HC MALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

URINE GLUCOSE(POST PRANDIAL) , URINE	POSITIVE (++)	NEGATIVE	Dipstick	
URINE GLUCOSE(FASTING), URINE	POSITIVE (TRACE)	NEGATIVE	Dipstick	

Dr.Anita Shobha Flynn

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

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

DR.SHIVARAJA SHETTY M.B.B.S.M.D(Biochemistry M.B.B.S)MD(Pathology) CONSULTANT BIOCHEMIST Consultant Pathologist





SIN No:UPP015181,UF009063

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GSTIN: 29AADCA0733E1Z3 Address: 22, 23, 24, 25/101/3, Sree Rama Layout, BNR Complex OPP.RBI Layout, JP Nagar, 7th Phase, Bengaluru, Karnataka



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Date '	22-07-2023	Department	GENERAL
MR NO	CMYS.0000057255	Doctor	RO HITH.H.K.
Name	Mr. THATTANDA A E	BABY Registration No	:
Age/ Gender	59 Y / Male	Qualification	:

Consultation Timing: 08:20

1

He	eight: 167	Weight: 79-3	BMI :	Waist Circum :
Te	emp:	Pulse :	Resp:	B.P: 110 (70
Gi Al FT PF	eneral Examination / Ilergies History 3 S - 11 9 9 S - 288 · 6 A C - 7.7.	Clinical Diagnosis & Mar	for Anna Yo freeh	al Health cheek of
AP	o AL C		FIC 10 . 3.	¢ -0
75.	Church the		No Llo	HTW
				Apolio Cliffic # 23, 1st Floor, Kalidasa Road, Mysore - 02 Ph : 0821-4006040/41
		Follow up date :		Doctor Signature

Date	: 22-07-2023	Department	GENERAL
MR NO	: CMYS.0000057255	Doctor	:
Name	: Mr. THATTANDA A BABY	Registration No	:
Age/ Gender	: 59 Y / Male	Qualification	:

14.5

1

Consultation Timing: 08:20

2

Height: 6-	Weight: 79.3	BMI :	Waist Circu	
Temp :	Pulse :	Resp :	B.P :	110 70
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State State				
Date	;	22-07-2023	Department	GENERAL
MR NO	:	CMYS 0000057255	Doctor	
Name	:	Mr. THATTANDA A BABY	Registration No Oualification	. Al. Haveen KUNGI-R MS 1647
Age/ Gender	:	59 Y / Male		
				Kme-No 66012

Consultation Timing: 08:20

Height: 167	Weight: 79.3	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P: 110/70
General Examination / Allergies History		hagement Plan fre rejular	
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	NGBE -	Naval m	cosa- Normal
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	Ac Re	aerund	p_
	Follow up date :		ADottor Signature or, # 23, 1000000000000000000000000000000000000

0.5~45Hz AC50 25mm/s 10r	avr (	avi	aVR				Male S9Years 167cm 79kg 110/70 mmHg	MR THATTANDA A BABY
10mm/mV 2*5.0s ♥72								22-07-2023 10
CARDIART 9 D VIA3			14			# 23, 1st Floor, Kalidasa Road, Mysore - 02 Ph : 0821-4006040/41	Apollo Clinic	10:14:20 Avi Diagnosis
Glasgow V28.6.0		}	$\left\{ \begin{array}{c} \\ \\ \\ \\ \\ \end{array} \right\}$		Unconfirmed Report.	)2		osis Information:
APOLLO CLINIC MYSURU								
			\$ -	5				





Patient Name: Mr . Thattanda A Baby	Date: 22.07.2023	Doctor:Dr. Self
Age / Sex : 59yrs /Male	UHID No : 57255	OP:
ULTRASONOGRAPH	Y – ABDOMEN	& PELVIS

LIVER: It is increased in size(15.4 cm) and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal in size, outline and echopattern.

<u>RIGHT KIDNEY:</u> It Measure 94x47mm with parenchymal thickness of 13 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.Cortical cyst measuring 24mm seen in midpole.

**LEFT KIDNEY:** It Measures 101x53 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No e/o calculi.

**PROSTATE:** It measures 36x31x36 mm with a volume of 21cc. It is normal in size, outline and echotexture. The vascularity of prostate is normal.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

**OTHERS:** No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

## **IMPRESSION:** GRADE I FATTY LIVER.

Dr. Pradeep Kumar C N, DNB **Consultant Radiologist.** 

#### Apollo Health and Lifestyle Limited

CIN UESTIGTOPOCOPICITS819

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Susavaria)udi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Kuramati jala i Susjaji ur Roadi Mysore (VV Mohalla)

Online appointments www.atkilloclinic.com







Patient Name	: Mr. THATTANDA A BABY	Age	: 59 Y M
UHID	: CMYS.0000057255	<b>OP</b> Visit No	: CMYSOPV115655
Reported on	: 22-07-2023 15:27	Printed on	: 22-07-2023 15:28
Adm/Consult Doctor		Ref Doctor	: SELF

## DEPARTMENT OF RADIOLOGY

## X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

## **IMPRESSION :NORMAL STUDY.**

Printed on:22-07-2023 15:27

---End of the Report---

# · fredul-

Dr. PRADEEP KUMAR C N MBBS DNB( RADIOLOGY) Radiology

Apollo Health and Lifestyle Limited

CIN URSTIDTG2000PLC115819

Regis Office: 1:10:60:62; Ashoka Raghupathi Chambers Sth Floor Begumpet, Hyderabad, Telangana - 500:016. Phylio (44):4:94:7777; Fax Nu: 4904:7744 ; Email ID: enguiry#apollohi com j: www.apollohi.com.

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavahagudi ) Beliandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Ronamangala i Sarjapur Roadi Mysore (VV Mohalla)

Online appointments www.apolloclinic.com

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Patient's Name : Mr Thattanda A Baby	Age & Sex: 59Yrs /Male
Date :22.07.2023	UHID No :57255

## **2D ECHOCARDIOGRAPHY STUDY**

## Impression:

- > Concentric LV hypertrophy
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 62 %
- Grade I LV diastolic dysfunction
- No clots. No pericardial effusion

## Findings

Concentric LVH. No RWMA
Normal
Intact
Intact
Normal
Normal
Grade I LVDD

# Apollo Health and Lifestyle Limited

CIN URS110102000PLC1158191

Online appointments www.appilicklinic.com



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Kegd Office 1:10:60:62 Autoka Kaghupathi Chambers Sth Floor Begumpet Hyderabad Telangana : 500.016 tro han bank to the total bank of the total to the total to enquiry application of any application of the

APOLLO CLINICS NETWORK KARNATAKA Bangalore: Savavanayudi: Beliandur | Electronic City | Fraver Town | HSR Layout | Indira Nagar | JP Nagar | Kundalaha Koramahijala I harjapur Roadi Mysore (VV Mohalla)

Patient's Name : Mr Thattan	la A Baby	Age & Sex: 59Yrs /Male	
Date :22.07.2023		UHID No :57255	
Measurement			
	S		
0 : 3.0 cm			
A : 3.0 cm	- ·		
RV : 2.5 cm			
LVIDd : 4.44 cm			
LVIDs : 2.86 cm			
IVSd : 1.24 cm IVSs : 1.59 cm			
PWd : 1.30 cm			
PWs : 1.52 cm			
EF : 62 %			
FS : 35.0 %			
Doppler			
MV TV	AV	PV V man m/s	
E: 0.68 m/s E m	/s V max - 1.04	m/s V max m/s 0.95	
A: 0.40 m/s A m/	5		
MR Nil TR Nil	AR Nil	PR Nil	
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Dr. GURU PRASAD. B. V, MBBS, PGDCC CONSULTANT - NON-INVASIVE CARDIOLOGY

# Apollo Health and Lifestyle Limited

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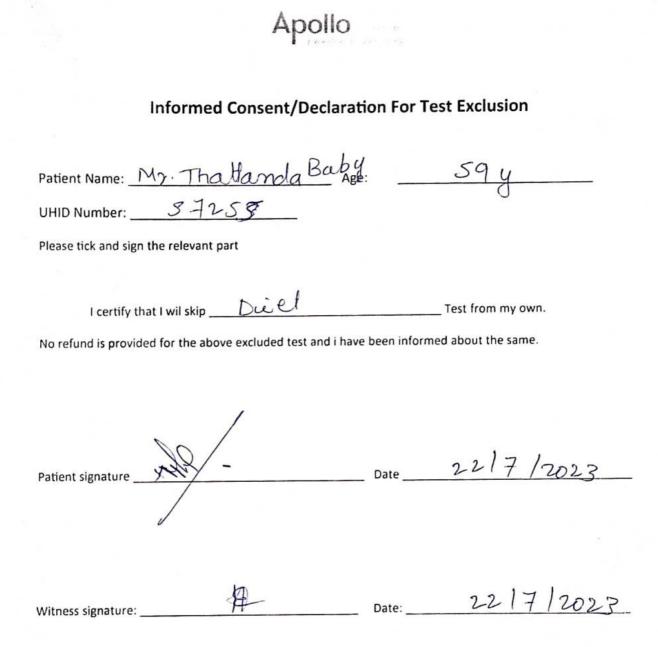
APOLLO CLINICS NETWORK RARNATAKA

Bangalore Succealiagueli Beliandur Electronic City FraverTown (HSR Layout (India Nagar (JP Nagar (Kundalahalli) Karamana ang karatan Karadi Mysore (Al Mahalia)

Online appointments, www.studie.knic.com



Apollo Clinic



	Apolio Clinic
	# 23, 15( Provide a contract of the second s
11	Ph: 0821-40080407



Patient Name	: Mr. THATTANDA A BABY	Age/Gender	: 59 Y/M
UHID/MR No.	: CMYS.0000057255	<b>OP</b> Visit No	: CMYSOPV115655
Sample Collected on	:	Reported on	: 22-07-2023 15:28
LRN#	: RAD2054011	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 639842		

## DEPARTMENT OF RADIOLOGY

## X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

**IMPRESSION :NORMAL STUDY.** 

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Dr. PRADEEP KUMAR C N MBBS DNB( RADIOLOGY) Radiology



Patient Name	: Mr. THATTANDA A BABY	Age/Gender	: 59 Y/M
UHID/MR No.	: CMYS.0000057255	<b>OP</b> Visit No	: CMYSOPV115655
Sample Collected on	:	Reported on	: 22-07-2023 12:00
LRN#	: RAD2054011	Specimen	:
<b>Ref Doctor</b>	: SELF		
Emp/Auth/TPA ID	: 639842		

## DEPARTMENT OF RADIOLOGY

#### **ULTRASOUND - WHOLE ABDOMEN**

LIVER: It is increased in size(15.4 cm) and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal in size, outline and echopattern.

<u>RIGHT KIDNEY:</u> It Measure 94x47mm with parenchymal thickness of 13 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.Cortical cyst measuring 24mm seen in midpole.

**LEFT KIDNEY:** It Measures 101x53 mm with parenchymal thickness of 15 mm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No e/o calculi.

**<u>COSTATE:</u>** It measures 36x31x36 mm with a volume of 21cc. It is normal in size, tline and echotexture. The vascularity of prostate is normal.

RIF: No evidence of focal collection or mass lesion seen. Appendix is not visualized.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

## **IMPRESSION:** GRADE I FATTY LIVER.

Dr. Pradeep Kumar C N, DNB nsultant Radiologist.

Brady :

Dr. PRADEEP KUMAR C N MBBS DNB( RADIOLOGY) Radiology

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		-	В	ill Of Su	pply			T			
Name	Mr. THATTAN	DA A BABY				Bill No		: CMYS-	OCR-20744		
Age/Gender	: 59 Y M					Bill/Reg I	Date	: 22.07.2	023 08:20		
Contact No	+919964904892					Referred	by	: SELF			
Address	: MYSORE					Center		: Mysore			
UHID	CMYS.0000057	255				Emp No/	Auth Code	: 639842			
Corporate Name Plan	ARCOFEMI H ARCOFEMI M				FPAN IND	A OP AGR	EEMENT				
# Department	Description Of Service	SAC Code	Qty	Rate	Gross Value	Discount	CGST Rate	CGST Amt	SGST/UTGST Rate	SGST/UTG	Net Value
1 Package Charges	ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - 2D ECH - PAN INDIA - FY2324		1	2.500 00	2,500.00	0.00	0.00	0.00	0.00	U	00 2,500 00
									Bill	Amount:	2.500 00

Received with thanks: Zero Rupces only

Authorized Signature (Veda Shree S)

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2.500 00

Patient Payment:

Corporate Due:

Patient Due:

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You can download your report from "www.apolloclinic.com" Enter user name as CMYSOPV115655 and password as 244333

Please log on to AskApollo.com for booking Appointments

Apollo Health and Lifestyle Limited (CIN: U851107C2000FC2115819) Regit Office #7.1.6137A-615.6.016 Imperial Inversity /Infloor - American Historialisat Stratos & Languesc)

GSTIN: 29AADCA0713F171

Address

चरि किसी को यह पहचान पत्र निते तो कृत्या जिञ्जतिखित पत्ने पर भंज दें यूनियन चैंक ऑफ इंडिया क्षेत्रीय कार्यातय - मैस् 1254, कांसल्या, तीसग तल विलोमा रोड, मैस्र - 570005 फोन : 0821-1526501

If found, please return to Union Bank of India Regional Office-Mysuru

Regional Office-Mysuru No. 2254, Kousalya, 3<sup>rd</sup> Floor, Vinobha Road, Mysuru-570005 Vphone : 0821-2526501

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नाम : तठंउ ए. वेदी Name : THATTANDA A BABY कर्मचारी क्र /Employee No :639842 जन्म तिथि /Date of Birth :10-02-1964 ज्लड यूए /Blood Group : Bwe

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हत्ताहार /Signature जारी करने का स्टान / Place of Issue: RO Mysunu 'जारी करने की तारीब Date of Issue: 09/06/2020

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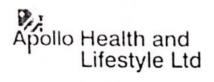
/		
Health checkup at tie-up Ctr	HealthChkup Authorisatn letter	
S.,	Alater An O Union Path	
	Union Bank of India	
To, The Chief Medical Officer	RO - MYSORE NO.2254, KAUSALYA, THIRD FLOOR, SOUTH WING, VINOBHA ROAD, , = 0	
M/S Mediwheel https://mediwheel.in/signup011- 41195959(A brand name of Arcolemi Healthcare Ltd), Mumbai400021 Dear Sir,		
Tie-up arrangement for He	ealth Checkup under Health Checkup 50-60 Male	
Shri/Smt/Kum. THATTAN	NDA A BABY,.	
P.F. No. 639842	Designation : HEAD CASHIER II CUM CLERK	
Checkup for Financial Year	2023 Approved Charges Rs.	
. The above mentioned sta Hospital/Centre/Clinic, under	2023 aff member of our Branch/Office desires to undergo Health Checkup at your the tie-up arrangement entered into with you, by our bank,	
. Please send the receipt c	of the above payment and the relevant reports to our above address.	
		-
Thanking you.	Yours Faithfully, कृते यूनियन बैंक ऑफ तेंडेया/For HION BAN OF HOMA	- and
W.	alty sires of the Branch Managart St	COULS I
(Signature of the Employee)	BRANCH MANAGER/SENIOR MANAGER ביין לא לא לא שליין BRANCH MANAGER/SENIOR MANAGER ביין אין אין אין אין אין אין אין אין אין	
PS. : Status of the application	ION- Senctioned	* UN:0

## Your Apollo order has been confirmed

## noreply@apolloclinics.info <noreply@apolloclinics.info>

Tue 18-07-2023 1921

To:babythimmayya@gmail.com <babythimmayya@gmail.com> Cc:Mysore Apolloclinic <mysore@apolloclinic.com>;Yogeesh KV <mkt.mysore@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>



## Dear THATTANDA A BABY,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at KALIDASA RAOD clinic on 2023-07-22 at 08:25-08:30.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement	ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP
Name	AGREEMENT
Package	[ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK
Name	ADVANCED HC MALE - 2D ECHO - PAN INDIA - FY2324]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

#### Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check Centre).
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.