

OP CASE SHEET

MRNO : FGUN.0000021951
 Patient Name : Mr. Mannam Anudeep
 Sex / Age : Male / 26 Y
 Address :

Date : 12-07-2024
 Department : General
 Consultant :
 Mobile No : +918309886170

Pulse : 100 b/min	B.P : 120/70 mmHg	Resp : 21 b/min	Temp : 98.6 F
Weight : 77 kg	Height : 170 cm	BMI : 27.5 kg/m ²	Waist Circum : SPD : 97%

Chief Complaints :
 no complaints

Past History :
 nil

General and Systemic Examination :
 C/S (normal)

Diagnosis and Final Impression :

Treatment, Recommendation and Investigations :

Follow Up :

Dr. PUJA MADALA
 M.D. (General Medicine)
 General Physician and Diabetologist
 Regd.No: 83879

CERTIFICATE OF MEDICAL FITNESS

This is certify that I have conducted the clinical examination
of Mannam Anudeep on 12/7/24

After reviewing the medical history and on clinical examination it has been found that

✓ He /she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, there are not impediments to the job</p> <ol style="list-style-type: none"> 1. 2. 3. <p>However, the employee should follow the advice /medication that has been Communicated to him/her,</p> <p>Review after</p>	
<ul style="list-style-type: none"> • Currently Unfit <p>Review after..... recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. PUJA MADALA
MD., (General Medicine)
General Physician and Diabetologist
Regd.No: S3879
(Signature)
Medical Officer

This certificate is not meant for medico-legal purposes

Patient Name : Mr. MANNAM ANUDEEP	Reg.No : 100017930
Sex / Age : Male / 26Years	Client Code : Apollo Guntur
Ref. Doctor : Self	Reg. On : 12-07-2024 09:27:00 AM
Ref. Customer : APOLLO B1	Sample Received : 12-07-2024 09:28:00 AM
Test ID : 18948	Reported On : 12-07-2024 12:28:00 PM

DEPARTMENT OF HAEMATOLOGY AND CLINICAL PATHOLOGY

TEST NAME	RESULT	UNITS	BIO.REFERENCE INTERVAL
COMPLETE BLOOD COUNT:			
Haemoglobin	16.8	gms%	15-18
PCV	46.9	Vol %	39 - 54
RBC Count	5.20	M/cmm	4.2 - 6.5
MCV	90.2	f l	75 - 95
MCH	32.3	pg	26 - 32
MCHC	35.8	%	31 - 36
Total WBC Count	6,900	/cmm	4000 - 11000
Platelet Count	2.69	lakhs/cmm	1.4 - 4.4
DIFFERENTIAL COUNT:			
Neutrophils	65	%	45 - 75
Lymphocytes	28	%	20 - 45
Eosinophils	02	%	01 - 06
Monocytes	05	%	02 - 10
Basophils	00	%	00 - 01
ERYTHROCYTE SEDIMENTATION RATE (ESR):			
Erythrocyte Sedimentation Rate (ESR):	10	mm/ hr	00 - 10

Ch. Raju

CH Raju

Licensee, SRM HEALTH AND LIFESTYLE LLP

GST: 37AAMFH3723P1ZT

Address: 3-28-26/11, Kundala Road, Guntur,
Guntur, Andhra Pradesh 522006

Online appointments: www.apolloclinic.com

Email: guntur@apolloclinic.com



G. Suma Latha

Dr. G.Suma Latha MBBS, DCP.

Consultant Pathologist



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DEPARTMENT OF HAEMATOLOGY AND CLINICAL PATHOLOGY

<u>TEST NAME</u>	<u>RESULT</u>
Blood Grouping	" B "
Rh Typing	Negative



Ch. Raju

CH. Raju



Dr. G. Suma Latha

Dr. G. Suma Latha MBBS, DCP.

Consultant Pathologist

License: SUPRAHUMAN HEALTH AND LIFESTYLE LLP

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DEPARTMENT OF CLINICAL BIOCHEMISTRY

<u>TEST NAME</u>	<u>RESULTS</u>	<u>UNITS</u>	<u>BIO.REFERENCE INTERVAL</u>
Fasting Blood Sugar (Hexokinase)	87	mg/dl	70 - 110
Post Prandial Blood Sugar (Hexokinase)	92	mg/dl	80-170
Creatinine	1.0	mg/dl	Adults 0.6 -1.5 child(0 - 2yrs) 0.2 - 0.6 (3 -8 yrs) 0.3 - 0.8
Blood Urea Nitrogen	9	mg/dl	Healthy Adults: 7 – 18 Pediatric Reference Interval: Age Boys Girls 0-4 d: 3 – 19 3 – 19 5 d-2 yrs: 6 – 17 6 – 17 3-12 yrs: 8 – 18 8 – 18 13-18 yrs: 9 – 21 9 – 21
Total Bilurubin (Jendrassik & Grof)	0.7	mg/dl	0.0 - 1.0
AST (SGPT) (UV, Using Pyridoxal Phosphate:IFCC)	30	u/l	15 - 37

CH Raju

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Dr. G. Suma Latha

Dr. G.Suma Latha MBBS, DCP.

Consultant Pathologist

Licensed to Practice in HUMAN HEALTH AND LIFESTYLE LL

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Guntur, Andhra Pradesh 522006

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DEPARTMENT OF HAEMATOLOGY AND CLINICAL PATHOLOGY

TEST NAME	RESULT
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COMPLETE URINE EXAMINATION:

Physical Examination :

Colour	Pale Yellow
Clarity	Clear

Chemical Examination:

Specific Gravity	1.015
Protein	Nil
Sugar	Nil
Ketone Bodies	Absent
Bile salts & Bile Pigments	Absent

Microscopic Examination:

Pus cells	2 - 3
RBC's	Nil
Epithelial cells	1 - 2
Casts	Nil
Crystals	Nil
Bacteria	Nil
Others	PH - 6.0

Ch. Raju

CH Raju



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Consultant Pathologist

Licensed to **REBHU MAN HEALTH AND LIFESTYLE LLP**

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Address: 3-28-26/11, Kundala Road, Guntur,
Guntur, Andhra Pradesh 522006

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Email: guntur@apolloclinic.com



Dr. P. Swarna Latha

M.B.B.S., MS (Gold Medalist), FACS, FMR,
Consultant Ophthalmologist, Retina Specialist.
Regd.No.: APMC 75549



Dr. SWARNA
EYE CARE

OP TIMINGS Morning : 10-00 a.m. to 2-00 p.m.
Mon to Sat Evening : 5-00 p.m. to 9-00 p.m.

APC 020

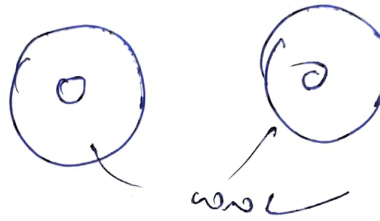
Name : M. Anudeep Age / Sex : 25/M MR No. : _____ Date : 12/7/24
Address : Chenakurthi Contact No. : 8309886170

Came for routine check up

Vn $\left\{ \begin{array}{l} 6/6 \\ 6/8 \end{array} \right.$

NVn $\left\{ \begin{array}{l} 20 \\ 26 \end{array} \right.$

color Vn $\left\{ \begin{array}{l} 21/21 \text{ (21/21 chart)} \\ 21/20 \end{array} \right.$



Adv

RE Norml optikularis exantia

LE ? Anislyque partially

Need detailed fundus exantia.

12/7/2024

Dr. POLURI SWARNA LATHA
M.B.B.S., M.S., FMR
CONSULTANT-OPHTHALMOLOGIST
RETINA SPECIALIST
C/o. RAGHURAM CHILDREN HOSPITAL
GUNTUR - 522 006.

Dr. Swarna Eye Care, C/o. Raghuram Children Hospital

2nd Ln, East Krishna Nagar, Krishna Nagar, Guntur, Andhra Pradesh - 522 006.

Mail: drswarnaeyecare@gmail.com, Call: 8639921655

102 bpm

-- / -- mmHg

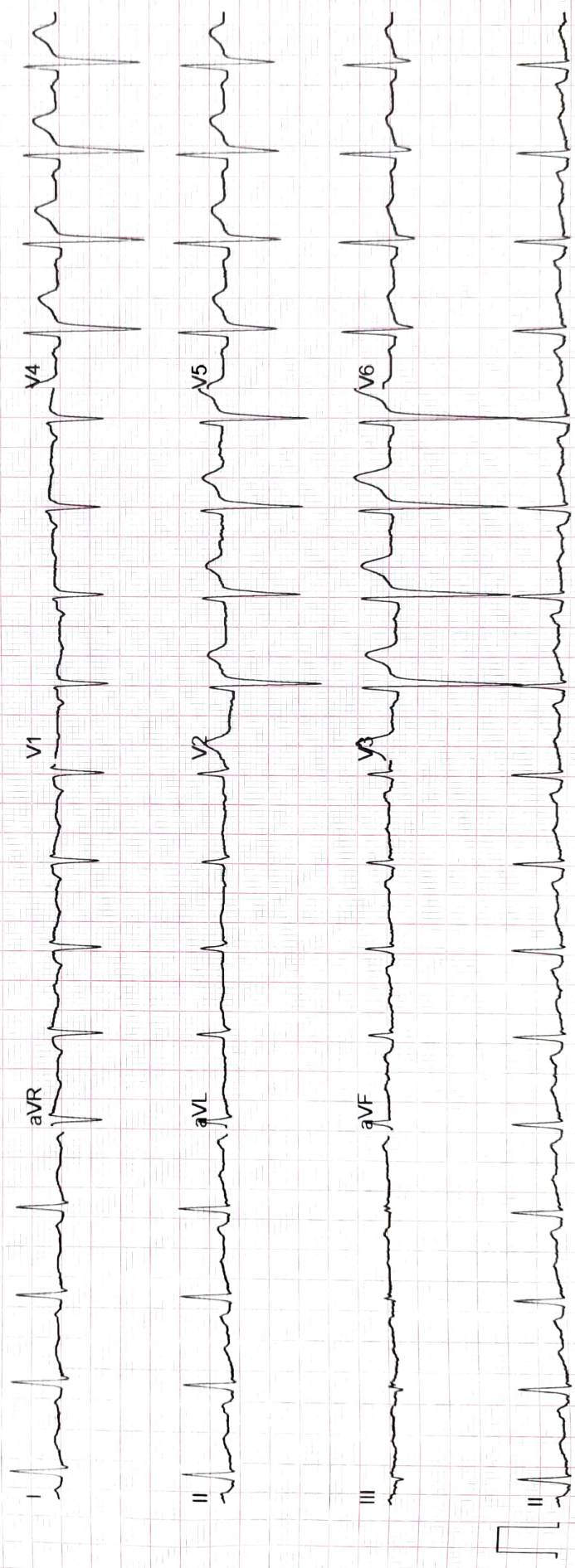
Location: Room: Order Number: Indication: Medication 1: Medication 2: Medication 3:

Technician: Ordering Ph: Referring Ph: Attending Ph:

12.07.2024 9:46:46 Appolo clinic Kundulia Road Guntur

Male
QRS: 100 ms
QT/QTc/Baz: 352 / 458 ms
PR: 144 ms
P: 96 ms
RR/PP: 590 / 588 ms
P / QRS / T: 55 / 33 / 45 degrees

M anudeep





MANNAM AUDEEP 26Y/M

Chest PA

12-Jul-24 9:56:22 AM

FGUN 0000021951

APOLLO CLINIC , KUNDULA ROAD , GUNTUR ,

AGFA



Dear Mannam Anudeep Mannam,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **GUNTUR** clinic on **2024-07-12** at **08:00-08:30**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

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 be followed for a 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 alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: KUNDULA ROAD, KRISHNA NAGAR MAIN RD, GUNTUR, ANDHRA PRADESH 522006.

Contact No: 8632222933.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the



భారత ప్రభుత్వం
Government of India



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

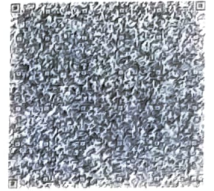


Issue Date: 03/04/2012



మన్నం అనుదీప్
Mannam Anudeep
పుట్టిన తేదీ/DOB: 28/12/1998
పురుషుడు/ MALE

చిరునామా:
పంపొందిన చిరునామా: మన్నం సింగిలూ, 11-128/ఎమ్, రెడ్డి గారి
బజార్, చిమకుర్తి ప్రకాశం,
ఆంధ్ర ప్రదేశ్ - 523226
Address:
C/O: Mannam Singaloh, 11-128/M, REDDY
GARI BAZAR, Chimakurthi, Prakasam,
Andhra Pradesh - 523226



5415 0969 7972

VID : 9105 1166 6246 2484

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1847 | help@uidai.gov.in

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M. Anudeep