

Patient Name : Mr.ADITHYA BANNITHAYA	Collected : 28/Oct/2024 08:05AM
Age/Gender : 40 Y 5 M 22 D/M	Received : 28/Oct/2024 11:56AM
UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 12:57PM
Visit ID : CINDOPV243959	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36734	

DEPARTMENT OF HAEMATOLOGY

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

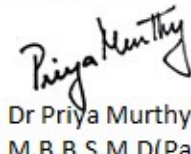
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.4	g/dL	13-17	Spectrophotometer
PCV	44.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.39	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	82	fL	83-101	Calculated
MCH	28.7	pg	27-32	Calculated
MCHC	34.9	g/dL	31.5-34.5	Calculated
R.D.W	13.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,940	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	57.7	%	40-80	Electrical Impedance
LYMPHOCYTES	29.7	%	20-40	Electrical Impedance
EOSINOPHILS	3.6	%	1-6	Electrical Impedance
MONOCYTES	8.4	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4004.38	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2061.18	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	249.84	Cells/cu.mm	20-500	Calculated
MONOCYTES	582.96	Cells/cu.mm	200-1000	Calculated
BASOPHILS	41.64	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.94		0.78- 3.53	Calculated
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	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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Consultant Pathologist



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Consultant Pathologist

AND LIFESTYLE LIMITED- RRL BANGALORE



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

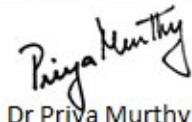
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE



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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination


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 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744
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Patient Name : Mr.ADITHYA BANNITHAYA	Collected : 28/Oct/2024 10:51AM
Age/Gender : 40 Y 5 M 22 D/M	Received : 28/Oct/2024 12:41PM
UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 02:04PM
Visit ID : CINDOPV243959	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	84	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:

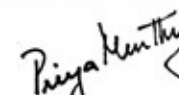
- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	89	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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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	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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.

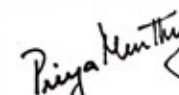
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

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: IRA241005542

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PH6115819)

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Age/Gender : 40 Y 5 M 22 D/M	Received : 28/Oct/2024 12:06PM
UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 01:08PM
Visit ID : CINDOPV243959	Status : Final Report
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

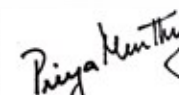
Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	171	mg/dL	<200	CHO-POD
TRIGLYCERIDES	41	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	45	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	126	mg/dL	<130	Calculated
LDL CHOLESTEROL	118.1	mg/dL	<100	Calculated
VLDL CHOLESTEROL	8.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.81		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: IRA241005537

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 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
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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	0.51	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.39	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	20.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.2		<1.15	Calculated
ALKALINE PHOSPHATASE	70.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.40	g/dL	6.6-8.3	Biuret
ALBUMIN	4.52	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	1.88	g/dL	2.0-3.5	Calculated
A/G RATIO	2.4		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, Wilsons’s diseases, Cirrhosis, but the increase is usually not >2.

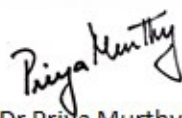
2. Cholestatic Patten:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

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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SIN No:IRA241005537

Apollo Health and Lifestyle Limited

(CIN - U06110TC2800PH6115849)
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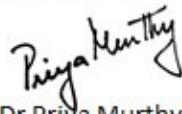
DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.95	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	27.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.11	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.30	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.86	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	101	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	6.40	g/dL	6.6-8.3	Biuret
ALBUMIN	4.52	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	1.88	g/dL	2.0-3.5	Calculated
A/G RATIO	2.4		0.9-2.0	Calculated



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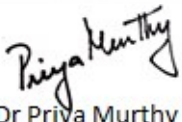
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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	16.00	U/L	<55	IFCC



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Patient Name : Mr.ADITHYA BANNITHAYA	Collected : 28/Oct/2024 08:05AM
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UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 01:32PM
Visit ID : CINDOPV243959	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36734	

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)	1.1	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.1	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.042	µIU/mL	0.34-5.60	CLIA

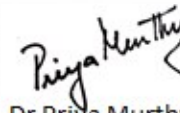
Comment:

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


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


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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: IRA241005541

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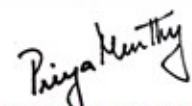
Patient Name : Mr.ADITHYA BANNITHAYA	Collected : 28/Oct/2024 08:05AM
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Emp/Auth/TPA ID : 22S36734	

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
------	------	------	------	--


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


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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
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 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


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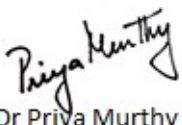
APOLLO CLINICS NETWORK
 Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie)
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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	0.540	ng/mL	0-4	CLIA



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



Patient Name : Mr.ADITHYA BANNITHAYA	Collected : 28/Oct/2024 08:05AM
Age/Gender : 40 Y 5 M 22 D/M	Received : 28/Oct/2024 12:14PM
UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 12:50PM
Visit ID : CINDOPV243959	Status : Final Report
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Emp/Auth/TPA ID : 22S36734	


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	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.005		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.


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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Age/Gender : 40 Y 5 M 22 D/M	Received : 28/Oct/2024 12:14PM
UHID/MR No : CIND.0000172857	Reported : 28/Oct/2024 12:50PM
Visit ID : CINDOPV243959	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36734	

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



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Karnataka - 560 034

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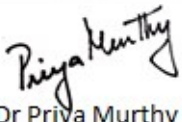
DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***



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

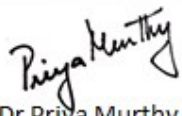


Patient Name : Mr.ADITHYA BANNITHAYA
Age/Gender : 40 Y 5 M 22 D/M
UHID/MR No : CIND.0000172857
Visit ID : CINDOPV243959
Ref Doctor : Self
Emp/Auth/TPA ID : 22S36734

Collected : 28/Oct/2024 08:05AM
Received : 28/Oct/2024 12:14PM
Reported : 28/Oct/2024 01:15PM
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 Priya Murthy
M.B.B.S, M.D (Pathology)
Consultant Pathologist



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SIN No: IRA24T005559

Apollo Health and Lifestyle Limited, Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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Karnataka- 560034

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Patient Name	: Mr. ADITHYA BANNITHAYA	Age	: 40Yrs 5Mths 23Days
UHID	: CIND.0000172857	OP Visit No.	: CINDOPV243959
Printed On	: 28-10-2024 10:13 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S36734		

DEPARTMENT OF RADIOLOGY

ULTRASOUND ABDOMEN AND PELVIS

LIVER: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measuring 9.2x4.6 cm.

Left kidney measuring 10.0x6.2 cm.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern.

No free fluid is seen.

IMPRESSION:

NO SIGNIFICANT SONOGRAPHIC ABNORMALITY DETECTED.

---End Of The Report---



Dr.RAMESH G
MBBS, DMRD
27462
Radiology

Patient Name	: Mr. ADITHYA BANNITHAYA	Age	: 40Yrs 5Mths 23Days
UHID	: CIND.0000172857	OP Visit No.	: CINDOPV243959
Printed On	: 28-10-2024 01:02 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36734		

DEPARTMENT OF CARDIOLOGY

M mode and doppler measurements:

CM CM M/sec

AO: 2.8 IVS(D): 0.8 MV: E Vel: 0.8 A Vel : 0.5

LA: 3.3 LVIDD(D): 4.9 AV Peak: 1.0

LVPW(D): 0.8 PV peak: 0.8

IVS(S): 1.1

LVID(S): 3.2

LVPW(S): 1.2

LVEF: 60%

Descriptive findings:

Left Ventricle Normal

Right Ventricle: Normal

Left Atrium: Normal

Right Atrium: Normal

Mitral Valve: Trivial MR

Aortic Valve: Normal

Tricuspid Valve: Normal

IAS: Normal

IVS:	Normal
Pericardium:	Normal
IVC:	Normal
Others	---

IMPRESSION :

Normal cardiac chambers
No Regional wall motion abnormality
Normal PA pressure
Trivial MR
No clot/vegetation/pericardial effusion
Normal LV systolic function - LVEF= 60%

**DR JAGADEESH H V MD,DM
CONSULTANT CARDIOLOGIST**

---End Of The Report---



Dr.JAGADEESH H V
MBBS, MD, DM
86848
Cardiology

Patient Name	: Mr. ADITHYA BANNITHAYA	Age	: 40Yrs 5Mths 23Days
UHID	: CIND.0000172857	OP Visit No.	: CINDOPV243959
Printed On	: 28-10-2024 09:55 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36734		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

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.

CONCLUSION :

No obvious abnormality seen

For clinical correlation.

---End Of The Report---



Dr.DHANALAKSHMI B
MBBS, DMRD
29543
Radiology

Patient Name	: Mr. ADITHYA BANNITHAYA	Age	: 40Yrs 5Mths 24Days
UHID	: CIND.0000172857	OP Visit No.	: CINDOPV243959
Printed On	: 29-10-2024 07:35 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36734		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 70 beats per minutes.
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:

LAFB

---End Of The Report---



Dr.M SUDHAKAR RAO
MBBS, MD, DM (Cardio)
000018
Cardiology

Name : Mr. ADITHYA BANNITHAYA
Address : Indiranagar Bangalore Karnataka INDIA 560038
Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT
PAN INDIA OP AGREEMENT

Age : 40Y 5M 22D
sex : Male

UHID : CIND.0000172857



CIND.0000172857

OP No : CINDOPV243959
Bill No : CIND-OCR-103292
Date : Oct 28th, 2024, 7:50 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 - after 10am	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	Ultrasound Radiology	<input type="checkbox"/>
6	OPHTHAL BY GENERAL PHYSICIAN - after 10am	Consultation	<input type="checkbox"/>
7	ENT CONSULTATION	Consultation	<input type="checkbox"/>
8	DIET CONSULTATION	Consultation	<input type="checkbox"/>
9	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
10	2 D ECHO - Time 9:30	Cardiology	<input type="checkbox"/>
11	X-RAY CHEST PA - after 10am	X Ray Radiology	<input type="checkbox"/>
12	ECG - 6	Cardiology	<input type="checkbox"/>
13	BODY MASS INDEX (BMI) - 6	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) - at 11am	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"/>

172857

Adithya

Height : 176 cm	Weight : 82.2 kg	BMI : 26.5 kg/m ²	Waist Circum : 96 cm
Temp : 98.6 °F	Pulse : 79 bpm	Resp : 18 rpm	B.P : 122/72 mmHg

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

28-10-2024

Mr. Adithyan

40yrs / M

ENT consultation

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Acoustic Neuroma

Ears: MSD

Nose: MSD

Throat: MSD

Follow up date:



Dr. RAVINDRANATH KUDVA
M.B.B.S., D.L.O.

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ORAL EXAMINATION FORM



Mr. Aditya Bannithaya

28/10/2024

Patient ID: 172857

DATE: ___/___/___

CLINICAL/ RADIOGRAPHIC FINDING	TREATMENT ADVISED
Calculus: Stains: ++ +++)	<div style="text-align: center; font-size: 2em;"><i>Scaling</i></div> <div style="text-align: center;"><i>Dr. Suettha S.</i></div>
Dental Caries/Attrition :	
Pockets:	
Recession:	
Mobility:	
Root stumps/ Non-restorable teeth for extraction:	
Impacted Teeth:	
Missing Teeth:	
Cervical Abrasion:	
Malocclusion:	
Others:	

Date:

Time:

Sign:

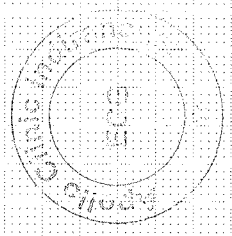
Mr aditya
ID: 172857

06.05.1984
40 Years

Male

QRS : 86 ms
QT / QTcBaz : 374 / 415 ms
PR : 118 ms
P : 56 ms
RR / PP : 808 / 810 ms
P / QRS / T : 57 / -21 / 71 degrees

28.10.2024 10:13:45
APOLLO CLINIC
INDIRANAGAR
BANGALORE



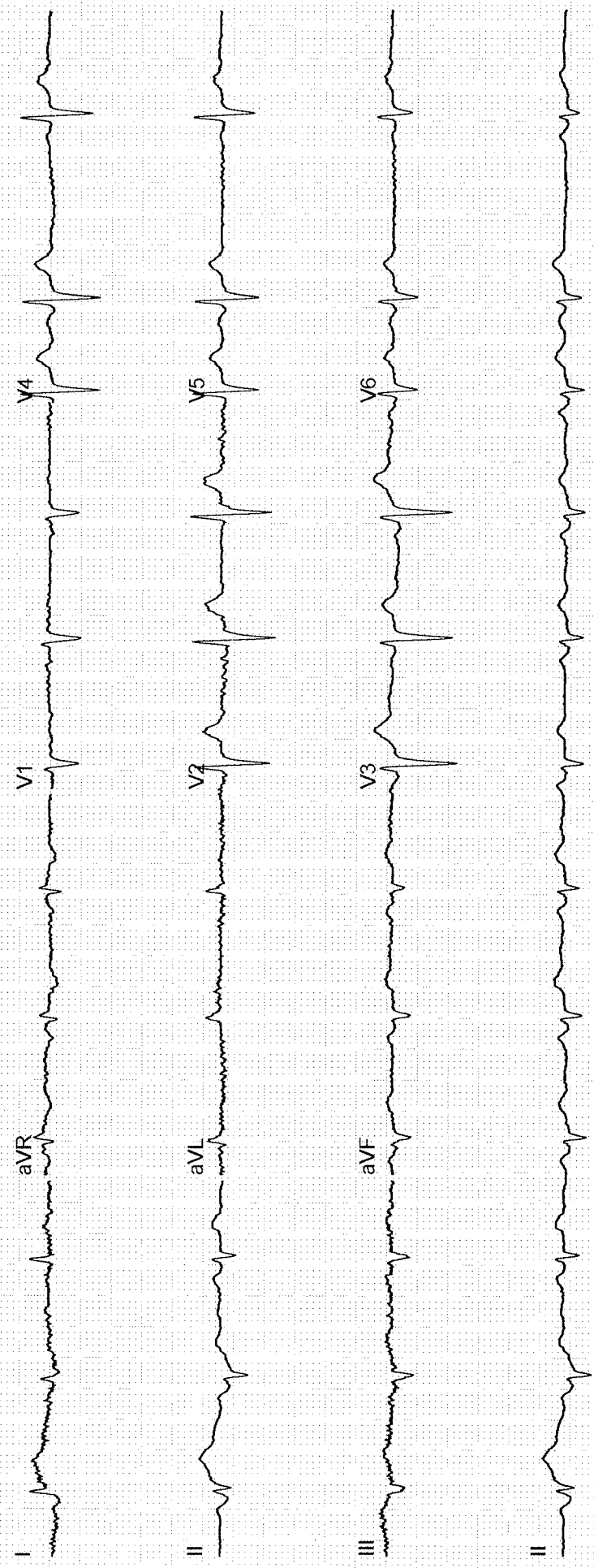
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

LAFB (T)

Dr. W. SUDHAKAR BAO
MD, PhD, FRCG, FRCR, FRCR (S), FRCR (C), FRCR (A), FRCR (P), FRCR (M), FRCR (N), FRCR (O), FRCR (E), FRCR (I), FRCR (S), FRCR (D), FRCR (G), FRCR (H), FRCR (J), FRCR (K), FRCR (L), FRCR (M), FRCR (N), FRCR (O), FRCR (P), FRCR (Q), FRCR (R), FRCR (S), FRCR (T), FRCR (U), FRCR (V), FRCR (W), FRCR (X), FRCR (Y), FRCR (Z)

74 bpm
-- / -- mmHg



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz

Unconfirmed
4x2.5x3_25_R1

1/1

NAME: Mr. ADITHYA BANNITHAYA	AGE/SEX: 40Y/M	OP NUMBER: 172857
Ref By : SELF	DATE: 28-10-2024	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.8	IVS(D): 0.8	MV: E Vel: 0.8	A Vel : 0.5
LA: 3.3	LVIDD(D): 4.9	AV Peak: 1.0	
	LVPW(D): 0.8	PV peak: 0.8	
	IVS(S): 1.1		
	LVID(S): 3.2		
	LVPW(S): 1.2		
	LVEF: 60%		

Descriptive findings:

Left Ventricle	Normal
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Trivial MR
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal
IVC:	Normal
Others	---

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: apollo@apollohospitals.com

IMPRESSION :

Normal cardiac chambers

No Regional wall motion abnormality

Normal PA pressure

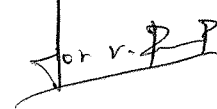
Trivial MR

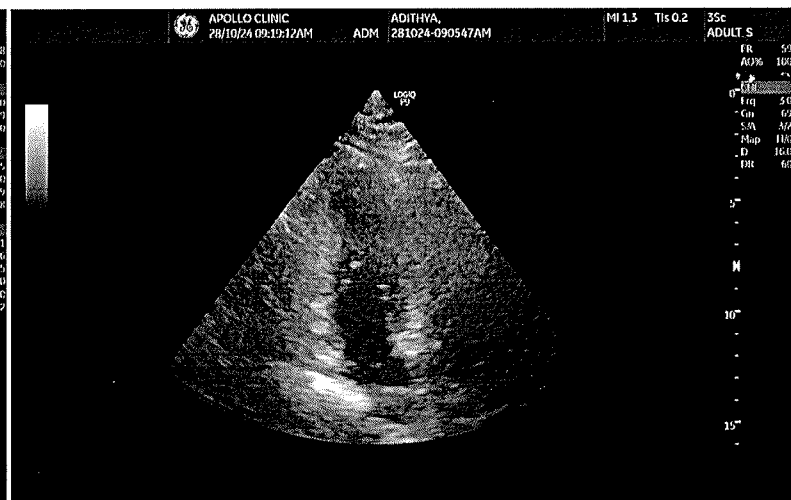
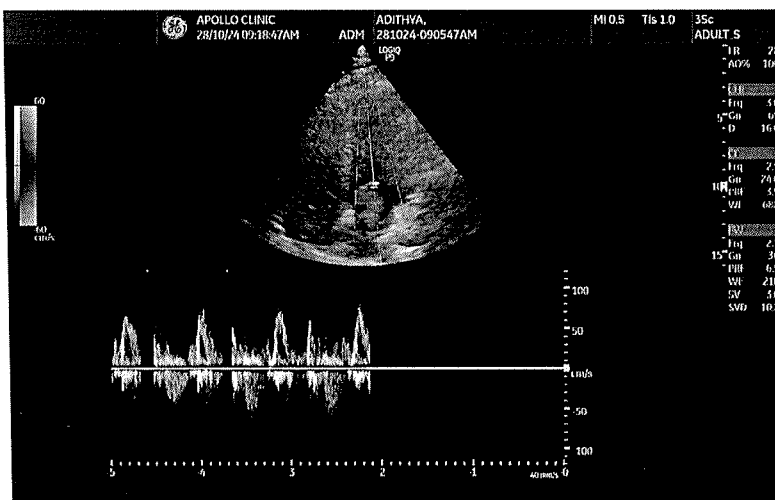
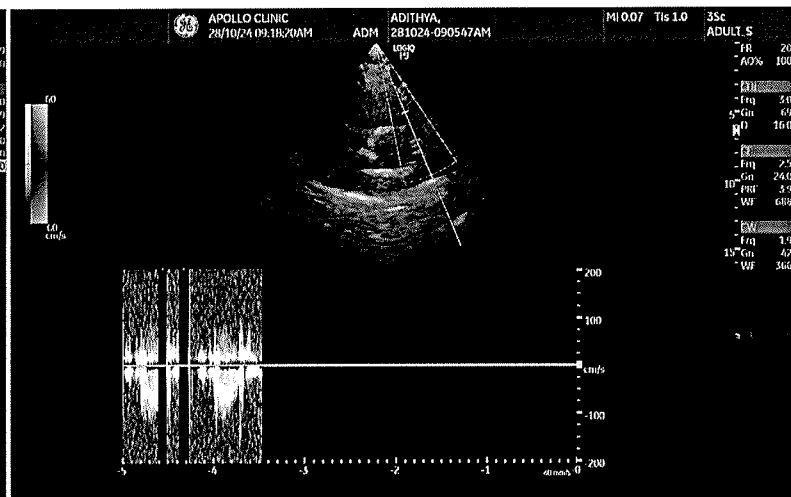
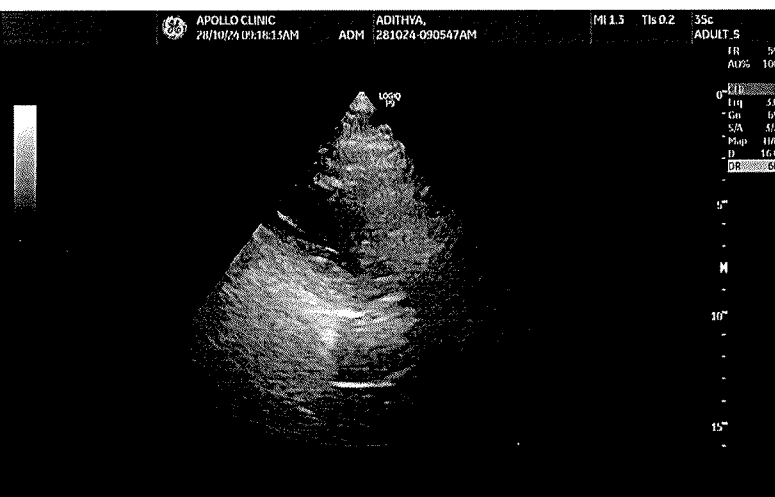
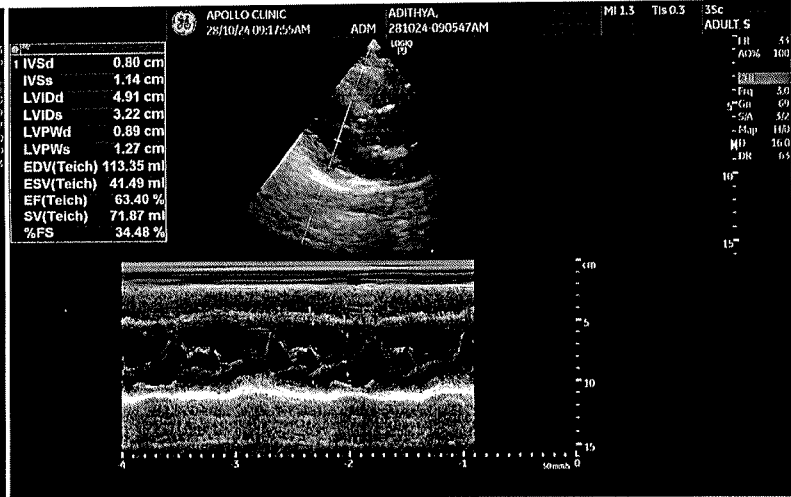
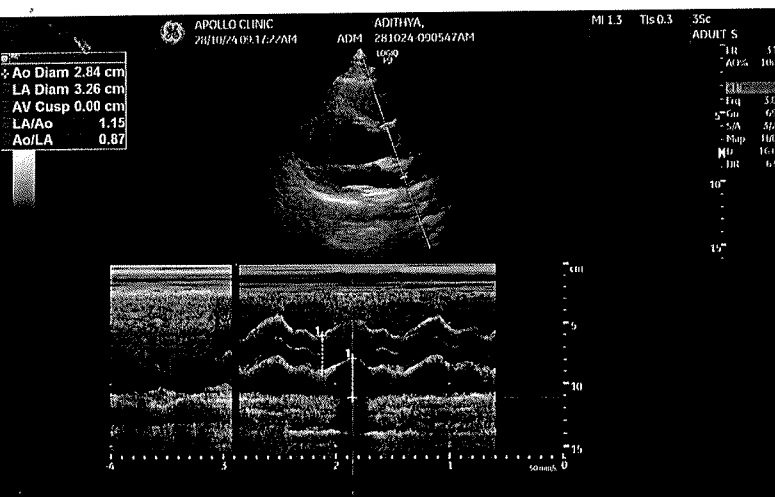
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 60%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





Apollo Clinic

CONSENT FORM

Patient Name: Adithya Bannithaya Age: 40
UHID Number: 172857 Company Name: Bank of Baroda (Spouse)

I Mr/Mrs/Ms Adithya Bannithaya Employee of BOB
(Company) Want to inform you that I am ~~am~~ interested in getting the consultation on
Tests done which is a part of my routine health check package. topmet. 28/10/24
And I claim the above statement in my full consciousness.

Patient Signature: Adithya Date: 28/10/24

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)

TO BOOK AN APPOINTMENT

 **1860 500 7888**



प्रति,

सम्बन्धक,

MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

पत्नी/पति/पति,

विशेष: बैंक ऑफ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	ADITHYA BANNINTHAYA K
जन्म की तारीख	06-06-1984
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	26-10-2024
बुकिंग संदर्भ सं.	24D160153100119308S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MS. B SMITHA
कर्मचारी की क.संख्या	160153
कर्मचारी का पद	E- CHANNEL MANAGER
कर्मचारी के कार्य का स्थान	BENGALURU/RO BENGALURU SOUTH
कर्मचारी के जन्म की तारीख	19-02-1986

यह अनुमोदन/ संज्ञा पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 23-10-2024 से 31-03-2025 तक मान्य है। इस पत्र के साथ किए जाने वाले डिजिटल जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। इस अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उल्लेख शर्तों में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य प्रशासक)

भा.सं.म. एवं विपणन

बैंक ऑफ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)से संपर्क करें।)



List of tests & consultations to be covered as part of Annual Health Check-up

S.No.	For Male	For Female
1	CBC	CBC
2	ESR	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	Lipid Profile	Lipid Profile
7	Total Cholesterol	Total Cholesterol
8	HDL	HDL
9	LDL	LDL
10	VLDL	VLDL
11	Triglycerides	Triglycerides
12	HDL/ LDL ratio	HDL/ LDL ratio
	Liver Profile	Liver Profile
13	AST	AST
14	ALT	ALT
15	GGT	GGT
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
17	ALP	ALP
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
	Kidney Profile	Kidney Profile
19	Serum Creatinine	Serum Creatinine
20	Blood Urea Nitrogen	Blood Urea Nitrogen
21	Uric Acid	Uric Acid
22	HBA1C	HBA1C
23	Routine Urine Analysis	Routine Urine Analysis
24	USG Whole Abdomen	USG Whole Abdomen
	General Tests	General Tests
25	X Ray Chest	X Ray Chest
26	ECG	ECG
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT
28	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation



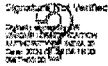
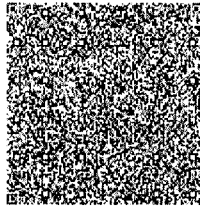
ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ Enrolment No.: 0000/00225/37106

To
ಅಧಿಕ ಕೋದ್ರಿಮುಖ ಬನಿಹಾಯ
Aadhika Kobrinudi Baninithaya

303 Hibiscus Block Oceanus Greendale Phase 2,
16 Cross 3rd Main Hoysala Nagar,
Narayana E Techno School,
Hosuravu,
VTC, Bangalore North,
PO: Doorvaninagar,
District: Bengaluru,
State: Karnataka,
PIN Code: 560016,
Mobile: 9900100189



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

XXXX XXXX 8424

VID : 9122 3948 1735 5354

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ
Government of India



ಅಧಿಕ ಕೋದ್ರಿಮುಖ ಬನಿಹಾಯ
Aadhika Kobrinudi Baninithaya
ಜನ್ಮ ದಿನಾಂಕ DOB: 06/05/1984
ಪ್ರಕಾರವು MALE

ಅಧಿಕಾರವಿಲ್ಲದಂತಹವರಿಗೆ, ವಿಶಿಷ್ಟ ಗುರುತು (ಬಿಹಿಎಚ್) ಅಥವಾ
ಅದರ ವಿವರಗಳನ್ನು ಪರಿಶೀಲಿಸಲು ಅನುಮತಿಯನ್ನು ನೀಡುವುದಿಲ್ಲ. ಈ
ಸಂಖ್ಯೆ ವಿಶಿಷ್ಟ ಗುರುತು ಸಂಖ್ಯೆಯಾಗಿದೆ.

Aadhaar is proof of identity, not of citizenship or date of
birth. It should be used only with verification (online
or through the scanning of QR code or Offline XML)

XXXX XXXX 8424

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಮಾಹಿತಿ / INFORMATION

- ಆಧಾರ್ ಗುರುತಿನ ಪ್ರಾಧಿಕಾರವು ಹೆಚ್ಚಿನ ಅಧಿಕಾರವನ್ನು ನೀಡುವುದಿಲ್ಲ. ಅದು ಉಪಯುಕ್ತ ವ್ಯಾಪಕವಾಗಿ ವಿವರಿಸಲಾಗಿದೆ ಮತ್ತು ನಿರೀಕ್ಷಿಸಲಾಗುವಂತೆ ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ. ಆಧಾರ್ ಸಂಖ್ಯೆ ಅಧಿಕಾರವನ್ನು ನೀಡುವುದಿಲ್ಲ.
- ಈ ಆಧಾರ್ ಪತ್ರದ ಪರಿಶೀಲನೆಯನ್ನು ಆನ್‌ಲೈನ್‌ನಲ್ಲಿ ಮಾಡುವುದು ನಿರೀಕ್ಷಿಸಿದ ವ್ಯಕ್ತಿಯು ಸಂಖ್ಯೆ ಮತ್ತು ಅಧಿಕಾರದ ವಿವರಗಳನ್ನು ಸಂಪೂರ್ಣವಾಗಿ ಪರಿಶೀಲಿಸಲು ಸಾಧ್ಯವಾಗುತ್ತದೆ. ಆಧಾರ್ ಅಥವಾ ಅದರ ವಿವರಗಳನ್ನು ಅಧಿಕಾರವು ನೀಡುವುದಿಲ್ಲ.
- ಆಧಾರ್ ವಿಶಿಷ್ಟ ಗುರುತಿನ ಸಂಖ್ಯೆಯಾಗಿದೆ.
- ಆಧಾರ್ ಗುರುತಿನ ದಿನಾಂಕದಿಂದ ಮೊದಲಿಗೆ ಅಧಿಕಾರವನ್ನು ನೀಡುವುದು ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ ಮತ್ತು ಅಧಿಕಾರವನ್ನು ನೀಡುವುದು ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ.
- ವಿವಿಧ ಸರ್ಕಾರಿ ಮತ್ತು ಸರ್ಕಾರೀತರ ವ್ಯವಹಾರಗಳನ್ನು / ಸೇವೆಗಳನ್ನು ಪಡೆಯಲು ಆಧಾರ್ ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ.
- ನಿಮ್ಮ ಮೊಬೈಲ್ ಸಂಖ್ಯೆ ಮತ್ತು ಇಮೇಲ್ ವಿಳಾಸವನ್ನು ಆಧಾರ್‌ನಲ್ಲಿ ನವೀಕರಿಸಿ.
- ಆಧಾರ್ ಸೇವೆಗಳನ್ನು ಪಡೆಯಲು ಅನುಮತಿಯನ್ನು ನೀಡುವುದು ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ.
- ಆಧಾರ್/ಬಯೋಮೆಟ್ರಿಕ್‌ಗಳನ್ನು ಬಳಸದೇ ಇರಬಹುದಾದ ಭದ್ರತೆಯನ್ನು ಖಚಿತಪಡಿಸಿ. ಬಯೋಮೆಟ್ರಿಕ್/ಆಧಾರ್/ಬಯೋಮೆಟ್ರಿಕ್ ಸಾಫ್ಟ್‌ವೇರ್ ಅನ್ನು ಬಳಸಿ.
- ಆಧಾರ್ ಗುರುತಿನ ಸಂಖ್ಯೆಗಳನ್ನು ಬಳಸಿ ಅಧಿಕಾರವನ್ನು ಪಡೆಯುವುದು ನಿರೀಕ್ಷಿಸಲಾಗಿದೆ.
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI approved authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
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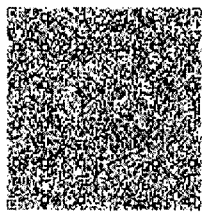


ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India



ವಿಳವು
C/O, 303 ಹಿಬಿಸ್ಕುಸ್ ಬ್ಲಾಕ್ ಓಸಿಯನ್ ಗ್ರೇಂಡಲ್ ಫೇಸ್ 2,
ಕ್ರಾಸ್ 16 ಆರ್ಟ್ ಮೈನ್ ಹೊಯಸಾಲ ನಗರ, ಸಾರಾಯಣ ಈ
ನರಾಯಣ ಟೆಕ್ನೊ ಸ್ಕೂಲ್, ಬೆಂಗಳೂರು ನಗರ,
ಬೆಂಗಳೂರು ನಗರ, ಕರ್ನಾಟಕ,
ಪಿನ್ ಕೋಡ್ - 560016

Address:
C/O., 303 Hibiscus Block Oceanus Greendale
Phase 2, 16 Cross 3rd Main Hoysala Nagar,
Narayana E Techno School, Hosuravu,
Bangalore North, PO: Doorvaninagar, DIST:
Bengaluru,
Karnataka - 560016



XXXX XXXX 8424

VID : 9122 3948 1735 5354