





: Mr.APURB JYOTI

Age/Gender

: 42 Y 0 M 22 D/M

UHID/MR No

: CHSR.0000158146

Visit ID

: CHSROPV304345

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: UBOIES3501/383627/671778

Collected

: 09/Mar/2024 10:48AM

Received

: 09/Mar/2024 03:15PM

: Final Report

Reported

: 09/Mar/2024 05:21PM

Status Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15.2	g/dL	13-17	Spectrophotometer
PCV	46.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.1	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	91.7	fL	83-101	Calculated
MCH	29.8	pg	27-32	Calculated
MCHC	32.5	g/dL	31.5-34.5	Calculated
R.D.W	15.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	10,050	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	69.3	%	40-80	Electrical Impedance
LYMPHOCYTES	20.4	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	8.6	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6964.65	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2050.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	160.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	864.3	Cells/cu.mm	200-1000	Calculated
BASOPHILS	10.05	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	3.4		0.78- 3.53	Calculated
PLATELET COUNT	183000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	6	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

Dr. Vidya Aniket Gore M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 1 of 14



SIN No:BED240063548

THE PRINCE HAS NOVE PROPERTIES AND APOSTO AND A PROPERTIES TEST HAS NOVE PROPERTIES AND A P









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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

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

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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACT	OR , WHOLE BLOOD EDTA	1		
BLOOD GROUP TYPE	0			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 3 of 14

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

Consultan

SIN No:BED240063548

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK









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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	87	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
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	91	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

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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , I	WHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.8	%		HPLC

Page 4 of 14

DR.SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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

SIN No:EDT240028975

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

			.,
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)

Page 5 of 14

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	176	mg/dL	<200	CHO-POD
TRIGLYCERIDES	137	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	36	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	140	mg/dL	<130	Calculated
LDL CHOLESTEROL	112.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	27.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.89		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

Page 6 of 14

DR.SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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



SIN No:SE04656150

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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.02	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.88	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	65	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	44.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	71.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.49	g/dL	6.6-8.3	Biuret
ALBUMIN	4.77	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.72	g/dL	2.0-3.5	Calculated
A/G RATIO	1.75		0.9-2.0	Calculated

Comment:

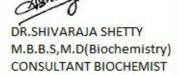
LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin)

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 > 1In 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 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.

Page 8 of 14



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



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT) , SEF	RUM		
CREATININE	0.82	mg/dL	0.67-1.17	Jaffe's, Method
UREA	27.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	12.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.87	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.82	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.6	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	102	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	7.49	g/dL	6.6-8.3	Biuret
ALBUMIN	4.77	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.72	g/dL	2.0-3.5	Calculated
A/G RATIO	1.75		0.9-2.0	Calculated

Page 9 of 14

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL	27.00	U/L	<55	IFCC
TRANSPEPTIDASE (GGT), SERUM				

Page 10 of 14

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M.B.B.S,M.D(Biochemistry)
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	0.6	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.7	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	5.906	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

- **1.** 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.
- **2.** 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.
- 3. 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.

4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	Т3	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	oclinical 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		

Page 11 of 14

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:SPL24042257

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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









: Mr.APURB JYOTI

Age/Gender

: 42 Y 0 M 22 D/M

UHID/MR No

: CHSR.0000158146

Visit ID

: CHSROPV304345

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : UBOIES3501/383627/671778

Collected

: 09/Mar/2024 10:48AM

Received

: 09/Mar/2024 03:24PM

Reported

: 09/Mar/2024 06:27PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 12 of 14



SIN No:SPL24042257

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APOLLO CLINICS NETWORK









: Mr.APURB JYOTI

Age/Gender

: 42 Y 0 M 22 D/M

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Visit ID Ref Doctor : CHSROPV304345

Toot Name

Emp/Auth/TPA ID

: Dr.SELF : UBOIES3501/383627/671778 Collected

: 09/Mar/2024 10:48AM

Received

: 09/Mar/2024 06:21PM : 09/Mar/2024 08:14PM

Reported Status

-- -- -

Pio Pof Pango

Sponsor Name

Hait

: Final Report

me

: ARCOFEMI HEALTHCARE LIMITED

Mothod

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

Pocult

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE			
PHYSICAL EXAMINATION			1	
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	8.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOP	Y		
PUS CELLS	2-3	/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

*** End Of Report ***

Result/s to Follow:

Dr. Chinki Anupam Dr Pr

M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 13 of 14



SIN No:UR2301739

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mr.APURB JYOTI

Age/Gender UHID/MR No : 42 Y 0 M 22 D/M : CHSR.0000158146

Visit ID

: CHSROPV304345

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: UBOIES3501/383627/671778

Collected

: 09/Mar/2024 10:48AM

Received

: 09/Mar/2024 06:21PM : 09/Mar/2024 08:14PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA - FY2324

PERIPHERAL SMEAR

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

Page 14 of 14



SIN No:UR2301739

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE



Customer Pending Tests Repeat ECG Fitness By General Physician



Name : Mr. APURB JYOTI

Age: 42 Y

Sex: M

Address: HSR LAYOUT

Plan

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

UHID:CHSR.0000158146

OP Number: CHSROPV304345

Bill No :CHSR-OCR-66832

Date : 09,03.2024 09:05

Sno	Serive Type/ServiceName	Department
1	ABCOFEMI - MEDIWHEEL - FULL BODY STANDARD PLUS MALE - PAN INDIA -	FY2324
	GAMMA GLUTAMYL TRANFERASE (GGT)	
	LIVER FUNCTION TEST (LFT)	
	3 CLUCOSE, FASTING	
4	4 HEMOGRAM + PERIPHERAL SMEAR	
1	5 COMPLETE URINE EXAMINATION	
	PERIPHERAL SMEAR	
	750 Ron- > Relet ECC	
4	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
(POLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
5	THEAIC, GLYCATED HEMOGLOBIN	
4	TRAY CHEST PA ROOM - 19	
11	2 FITNESS BY GENERAL PHYSICIAN	
J	3 BLOOD GROUP ABO AND RH FACTOR	
ال	4 LIPID PROFILE	
1:	5 BODY MASS INDEX (BMI)	
1	6 OPTHAL BY GENERAL PHYSICIAN ROOM - A	
17	7 PHYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	





Date : 09-03-2024

Department

GENERAL

MR NO

: CHSR.0000158146

Doctor

(4)

Name

Mr. APURB JYOTI

Registration No

Qualification

Age/ Gender

: 42 Y / Male

Consultation Timing: 09:04

Height: 178	Weight: 82 0 For	ВМІ:	Waist Circum ;
Temp :	Pulse: Gy	Resp:	B.P: 122/82m

General Examination / Allergies

History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature





Date

: 09-03-2024

Department

: GENERAL

MR NO

: CHSR.0000158146

Doctor

Name

: Mr. APURB JYOTI

Registration No

Qualification

Age/ Gender

: 42 Y / Male

Consultation Timing: 09:04

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

General Examination / Allergies

History

Clinical Diagnosis & Management Plan

els vita els



Follow up date:

Doctor Signature

Favorites -

Main Menu +

> Employee Self Service + > Benefits + > Annual Health Checkup

Health checkup at tie-up Ctr

HealthChkup Authorisatn letter



Union Bank of India

RO - BANGALORE SOUTH Chandrakiran, 10-A, Kasturba Road, P.B. No. 5179, Bangalore, Kamataka, Bangalore-80

The Chief Medical Officer

M/S Mediwheel https://mediwheel.in/signup011-41195959(A brand name of Arcofemi Healthcare Ltd), Mumbai400021

Dear Sir,

Tie-up arrangement for Health Checkup under Health Checkup

40-50 Male

Shri/Smt./Kum. APURB JYOTI,.

P.F. No. 671778

Designation:

Senior Manager

Checkup for Financial Year

Approved Charges Rs. 2023-

3500.00

2024

The above mentioned staff member of our Branch/Office desires to undergo Health Checkup at your Hospital/Centre/Clinic, under the tie-up arrangement entered into with you, by our bank.

Please send the receipt of the above payment and the relevant reports to our above address.

Thanking you

(Signature of the Employee)

BRANCH MANAGER/SENIOR MANAGER

ours Faithfully

PS. : Status of the application- sanctioned

Apollo Clinic

CONSENT FORM

Patient Name: APURB JYOTS Age: 42
UHID Number:
(Company) Want to inform you that I am not interested in getting Tests done which is a part of my routine health check package. And I claim the above statement in my full consciousness. has not been arranged in the Cime fram.
Patient Signature: Date: 9746801451





भारत सरकार Government of India

भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 2016/01001/00063

To
प्रियंका अपूर्व ज्योति

Priyanka Apurb Jyoti

W/O: Apurb Jyoti

Road No- NA-5/1, New Alkapuri
Anisabad, Patna
Phulwari

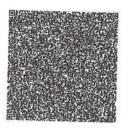
Anisabad

Patna Bihar - 800002

9546801451

issue Date: 03/03/2015

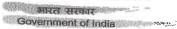




आपका आधार क्रमांक / Your Aadhaar No. : 4649 7346 5014 WD: 9105 8785 5044 8881

मेरा आधार, मेरी पहचान







Download Date: 04/12/2020

प्रियंका अपुर्व ज्योति Priyanka Apurb Jyoti जन्म तिथि/DOB: 01/02/1988 महिला/ FEMALE

ue Date: 03/03/20

4649 7346 5014

VID: 9105 8785 5044 8881

मेरा आधार, मेरी पहचान





भारत सरकार Government of India

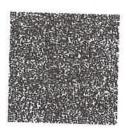
भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 2016/01001/00062

To अपुर्व ज्योति Apurb Jyoti S/O: Vijay Kumar Sinha Road No- NA-5/1, New Alkapuri Anisabad, Patna Phułwari Anisabad Patna Bihar - 800002 9546801451

Issue Date:





आपका आधार क्रमांक / Your Aadhaar No. :

7757 9837 0721 VID: 9188 6420 7568 7354

मेरा आधार, मेरी पहचान



Government of India



Download Date: 04/12/2020



अपूर्व ज्योति Apurb Jyoti जन्म तिथि/DOB: 15/02/1982 पुरुष/ MALE

ue Date: 03/03/201

7757 9837 0721

VID: 9188 6420 7568 7354

मेरा आधार, मेरी पहचान



apurb jyoti <apurbjyotimangalore@gmail.com>

Health Check up Booking Confirmed Request(UBOIES3501), Package Code-PKG10000361, Beneficiary Code-306430

Mediwheel <wellness@mediwheel.in>
To: apurbjyotimangalore@gmail.com
Cc: customercare@mediwheel.in

Wed, Mar 6, 2024 at 4:29 PM



011-41195959

Dear APURB JYOTI,

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

Hospital Package

Name

: Mediwheel Full Body Standard Plus

Patient Package Name:

MediWheel Full Body Health Checkup Male 40 To 50 For Self and

Spouse

Name of

Diagnostic/Hospital

: Apollo Clinic - HSR Layout

Address of

Diagnostic/Hospital-

Apollo Clinic, Ä #54, 1st floor, Above SBI Bank, Behind BDA Complex,

12th Main Road,Ā HSR Layout - 560102

City

: Bangalore

State

*

Pincode

: 560102

Appointment Date

: 09-03-2024

Confirmation Status

Booking Confirmed

Preferred Time

: 8:30am

Booking Status

Booking Confirmed

Member Information							
Booked Member Name Age Gender							
Priyankaapurbjyoti	36 year	Female					
APURB JYOTI 42 year Male							

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.



Patient Name : Mr. APURB JYOTI Age/Gender : 42 Y/M

UHID/MR No. : CHSR.0000158146 **OP Visit No** : CHSROPV304345

Sample Collected on : Reported on : 09-03-2024 14:56

LRN# : RAD2261422 Specimen

Ref Doctor : SELF

Emp/Auth/TPA ID : UBOIES3501/383627/671778

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Bilateral lung fields appear normal.

Cardiac size and shape are normal.

No mediastinal pathology is seen.

Both hila are normal in size and density.

Both CP angles are normal.

Both domes of diaphragm are normal.

IMPRESSION: NORMAL STUDY.

(The findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. M SONIA PAVANI
MBBS, M.D (Radio-Diagnosis)
Radiology







Patient Name : Mrs.PRIYANKA APURB JYOTI

Age/Gender : 36 Y 1 M 8 D/F
UHID/MR No : CHSR.0000158149
Visit ID : CHSROPV304348

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : UBOIES3501/383626

Collected : 09/Mar/2024 10:50AM Received : 09/Mar/2024 03:15PM

Reported : 09/Mar/2024 07:00PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.3	g/dL	12-15	Spectrophotometer
PCV	44.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.73	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	93	fL	83-101	Calculated
MCH	30.2	pg	27-32	Calculated
MCHC	32.5	g/dL	31.5-34.5	Calculated
R.D.W	14.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,770	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			
NEUTROPHILS	59.2	%	40-80	Electrical Impedance
LYMPHOCYTES	33.9	%	20-40	Electrical Impedance
EOSINOPHILS	1.2	%	1-6	Electrical Impedance
MONOCYTES	5.5	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5191.84	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2973.03	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	105.24	Cells/cu.mm	20-500	Calculated
MONOCYTES	482.35	Cells/cu.mm	200-1000	Calculated
BASOPHILS	17.54	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.75		0.78- 3.53	Calculated
PLATELET COUNT	162000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	51	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

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

Page 1 of 15

SIN No:BED240063554

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 03:15PM

Reported

: 09/Mar/2024 07:00PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Page 2 of 15

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



SIN No:BED240063554

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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 03:15PM

Reported

: 09/Mar/2024 07:19PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACT	TOR , WHOLE BLOOD EDTA	4		
BLOOD GROUP TYPE	0			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 3 of 15

Dr. Chinki Anupam M.B.B.S,M.D(Pathology) Consultant Pathologist

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

SIN No:BED240063554

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 06:03PM

Reported

: 09/Mar/2024 08:07PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	108	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

P,		
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
- 2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , W	HOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	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	

Page 4 of 15

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:EDT240028981

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 06:03PM

Reported

: 09/Mar/2024 08:07PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

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)

Page 5 of 15

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:EDT240028981

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 03:22PM

Reported

: 09/Mar/2024 06:48PM

Status : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method			
LIPID PROFILE, SERUM							
TOTAL CHOLESTEROL	258	mg/dL	<200	CHO-POD			
TRIGLYCERIDES	206	mg/dL	<150	GPO-POD			
HDL CHOLESTEROL	65	mg/dL	40-60	Enzymatic Immunoinhibition			
NON-HDL CHOLESTEROL	193	mg/dL	<130	Calculated			
LDL CHOLESTEROL	151.9	mg/dL	<100	Calculated			
VLDL CHOLESTEROL	41.2	mg/dL	<30	Calculated			
CHOL / HDL RATIO	3.97		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 400 mg/dL. When Triglycerides are more than 400 mg/dL LDL cholesterol is a direct measurement.

Page 6 of 15

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



SIN No:SE04656157

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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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APOLLO CLINICS NETWORK









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

: CHSROPV304348

: UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

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: 09/Mar/2024 03:22PM

Reported

: 09/Mar/2024 06:48PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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

Page 7 of 15



SIN No:SE04656157

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Patient Name : Mrs.PRIYANKA APURB JYOTI

Age/Gender : 36 Y 1 M 8 D/F
UHID/MR No : CHSR.0000158149
Visit ID : CHSROPV304348

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : UBOIES3501/383626

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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.70	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.61	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	12	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	31.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	92.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.71	g/dL	6.6-8.3	Biuret
ALBUMIN	4.38	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.33	g/dL	2.0-3.5	Calculated
A/G RATIO	1.32		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 > 1In 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 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.

Page 8 of 15

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method			
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM							
CREATININE	0.68	mg/dL	0.51-0.95	Jaffe's, Method			
UREA	29.60	mg/dL	17-43	GLDH, Kinetic Assay			
BLOOD UREA NITROGEN	13.8	mg/dL	8.0 - 23.0	Calculated			
URIC ACID	5.18	mg/dL	2.6-6.0	Uricase PAP			
CALCIUM	10.10	mg/dL	8.8-10.6	Arsenazo III			
PHOSPHORUS, INORGANIC	3.04	mg/dL	2.5-4.5	Phosphomolybdate Complex			
SODIUM	137	mmol/L	136–146	ISE (Indirect)			
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)			
CHLORIDE	103	mmol/L	101–109	ISE (Indirect)			
PROTEIN, TOTAL	7.71	g/dL	6.6-8.3	Biuret			
ALBUMIN	4.38	g/dL	3.5-5.2	BROMO CRESOL GREEN			
GLOBULIN	3.33	g/dL	2.0-3.5	Calculated			
A/G RATIO	1.32		0.9-2.0	Calculated			

Page 9 of 15

DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

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



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL	16.00	U/L	<38	IFCC
TRANSPEPTIDASE (GGT), SERUM				

Page 10 of 15

DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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



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: CHSR.0000158149

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Collected Received

: 09/Mar/2024 10:50AM

: 09/Mar/2024 03:24PM

Reported

: 09/Mar/2024 09:18PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method	
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.35	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	7.15	μg/dL	5.48-14.28	CLIA	
THYROID STIMULATING HORMONE (TSH)	3.806	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

- 1. 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.
- 2. 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.
- 3. 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.
- 4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	Т3	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

Page 11 of 15



DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

SIN No:SPL24042261

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

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Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No

: CHSR.0000158149

Visit ID

: CHSROPV304348

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

A ID : UBOIES3501/383626

Collected

: 09/Mar/2024 10:50AM

Received

: 09/Mar/2024 03:24PM

Reported

: 09/Mar/2024 09:18PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324

Page 12 of 15



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24042261

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Patient Name : Mrs.PRIYANKA APURB JYOTI

Age/Gender : 36 Y 1 M 8 D/F
UHID/MR No : CHSR.0000158149
Visit ID : CHSROPV304348

Ref Doctor : Dr.SELF

Emp/Auth/TPA ID : UBOIES3501/383626

Collected : 09/Mar/2024 10:50AM Received : 09/Mar/2024 05:09PM

Reported : 09/Mar/2024 08:14PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - 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	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	'		
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 13 of 15

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



SIN No:UR2301745

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mrs.PRIYANKA APURB JYOTI

Age/Gender

: 36 Y 1 M 8 D/F

UHID/MR No Visit ID

: CHSR.0000158149 : CHSROPV304348

Ref Doctor

Emp/Auth/TPA ID

: Dr.SELF

: UBOIES3501/383626

Collected

: 09/Mar/2024 02:55PM

Received

: 10/Mar/2024 07:00PM

Reported

: 13/Mar/2024 05:49PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

CYTOLOGY NO. 5438/24 I SPECIMEN a SPECIMEN ADEQUACY ADEQUATE	
a SPECIMEN ADEQUACY ADEQUATE	
b SPECIMEN TYPE LIQUID-BASED PREPARATION (LBC)	
SPECIMEN NATURE/SOURCE CERVICAL SMEAR	
c ENDOCERVICAL-TRANSFORMATION ABSENT ZONE	
d COMMENTS SATISFACTORY FOR EVALUATION	
Superficial and intermediate squamous of morphology. Inflammatory cells, predominantly neutron Negative for intraepithelial lesion/ maligroups.	ophils.
III RESULT	
III RESULT a EPITHEIAL CELL	
a EPITHEIAL CELL	
a EPITHEIAL CELL SQUAMOUS CELL ABNORMALITIES NOT SEEN	

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

*** End Of Report ***

Result/s to Follow:

Dr.Reshma Stanly M.B.B.S, DNB (Pathology) Consultant Pathologist

COLLEGE of AMERICAN PATHOLOGISTS



SIN No:CS076143

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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Reported Status : 13/Mar/2024 05:49PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

PERIPHERAL SMEAR



ACCREDITED

COLLEGE of AMERICAN PATHOLOGISTS



SIN No:CS076143

Dr. Reshma Stanly

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

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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APOLLO CLINICS NETWORK



Your appointment is confirmed

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

Fri 2/23/2024 3:44 PM

To:p.ak.gupta@accenture.com < p.ak.gupta@accenture.com >

Cc:Hsr Apolloclinic <hsr@apolloclinic.com>;Anusha SIRIPURAPU <anusha.s@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>

Dear Priyanka,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **HSR LAYOUT clinic** on **2024-03-02** at **08:45-09:00**.

Payment Mode	
Corporate Name	ACCENTURE SOLUTIONS PRIVATE LIMITED
Agreement Name	[ACCENTURE SOLUTIONS AHC PACK 1 TO 9 CASH PAN INDIA OP AGREEMENT]
Package Name	[ACEN - AHC PACK 6 FEMALE - 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.
- 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: 54, FIRST FLOOR, 12TH MAIN ROAD, HSR LAYOUT.

Contact No: (080) 2572 4235 -36.

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 Reports are ready.

Warm Regards, Apollo Clinic Customer Pending Tests GYNAECOLOGY CONSULTION



Name : Mrs. PRIYANKA APURB JYOTI

Age: 36 Y

Sex: F

Address: HSR LAYOUT

Plan

INDIA OP AGREEMENT

: ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN

Date + 00 03 2024 00:1

OP Number:CHSROPV304348 Bill No :CHSR-OCR-66835

UHID;CHSR,0000158149

	Date : 09.03.	2024 09:12
Sno	Serive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HC STARTER FEMALE - PAN INDIA - FY2324	n •
	I GAMMA GLUTAMYL TRANFERASE (GGT)	
	2 LIVER FUNCTION TEST (LFT)	
	3 GLUGOSE, FASTING	
	4 HEMOGRAM + PERIPHERAL SMEAR	-
6	GYNAECOLOGY CONSULTATION ——	
X	DIET CONSULTATION	
(TOMPLETE URINE EXAMINATION	
	S PERIPHERAL SMEAR	
	Room 1	
	OLBC PAP TEST- PAPSURE ROUN - S PARSON -	
1	PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
	DENTAL CONSULTATION	
1	HIBAIC, GLYCATED HEMOGLOBIN	
Ti.	ENT CONSULTATION ' 93	
(1	FITNESS BY GENERAL PHYSICIAN	
IJ	SELOOD GROUP ABO AND RH FACTOR	
	PIPID PROFILE	
11	BODY MASS INDEX (BMI)	
	OPTHAL BY GENERAL PHYSICIAN - Room - 7.	
	DULTRASOUND - WHOLE ABDOMEN - Pending	
	PHYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
1	(1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	





Mer Paryanka 36/p

9/3/24

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

General Examination / Allergies History

Clinical Diagnosis & Management Plan

ble: RS t 46 De t 24, 36

R: Advertion v 46 restoration v 27, 36.

Follow up date:

Da · Aishwaya

Doctor Signature





Date : 09-03-2024

Department

GENERAL

MR NO

CHSR.0000158149

Doctor

Name

Mrs. PRIYANKA APURB JYOTI

Registration No

Qualification

Age/ Gender

: 36 Y / Female

Consultation Timing: 09:11

			A - 1 A	1	
Height:	166	Weight:	42.7 Kg	вмі ;	Waist Circum :
Temp:		Pulse :	86	Resp:	B.P: 124/96m

General Examination / Allergies

History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature





HOSPITALS: 09-03-2024

Department

GENERAL

MR NO

CHSR.0000158149

Doctor

4

Name

Mrs. PRIYANKA APURB JYOTI

Registration No

Qualification

Age/ Gender

36 Y / Female

Consultation Timing:

09:11

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

General Examination / Allergies

History

Clinical Diagnosis & Management Plan

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Adv ?

Con Laure

Same gla

Follow up date:

Doctor Signature

Apollo Clinic

CONSENT FORM

Patient Name: Priyanta Apustyoli Age: 36
UHID Number: Company Name:
Wa Mount Purt 5 Tel 2122
Mr/Mrs/Ms Priyanle a Apust Jyol : Employee of E. Cool)
(Company) Want to inform you that I am not interested in getting well for Consulfalur. Tests done which is a part of my routine health check package.
Tests done which is a part of my routine health check package. Welle for Consulfalue
And I claim the above statement in my full consciousness.
9546801451



Patient Name : Mrs. PRIYANKA APURB JYOTI Age/Gender : 36 Y/F

 UHID/MR No.
 : CHSR.0000158149
 OP Visit No
 : CHSROPV304348

 Sample Collected on
 : 09-03-2024 15:18

Ref Doctor : SELF

Emp/Auth/TPA ID : UBOIES3501/383626

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Normal in size and raised echotexture. No intra hepatic biliary / venous radicular dilation. No focal lesion seen. CBD and Main Portal vein appear normal.

GALL BLADDER: Well distended. Normal in internal contents. Wall Thickness is normal.

SPLEEN: Normal in size and echotexture. No focal lesion is seen. No evidence of splenic hilar varices/collaterals.

PANCREAS: Only head and body visualized, appear normal.

KIDNEYS: Both kidneys are normal in size, shape and outlines Cortico medullary delineation is normal. No Hydronephrosis / No calculi.

URINARY BLADDER: Well distended. Normal in internal contents. Wall thickness is normal.

UTERUS: Normal in size and echotexture. Uniform myometrial echoes are normal. Endometrial thickness is normal and measures 6 mm.

OVARIES: Both ovaries are normal in size and echotexture.

No free fluid is seen in the peritoneum.

IMPRESSION:

• Grade I fatty liver

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

Dr. M SONIA PAVANI MBBS, M.D (Radio-Diagnosis)