

Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

Collected : 19/Oct/2024 10:04AM  
Received : 19/Oct/2024 11:04AM  
Reported : 19/Oct/2024 05:09PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

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Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:BED240239659



Patient Name : Mr.MEENA NAVEEN KUMAR  
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**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                    |
|---|-------------|-------------------------|--------------------|---------------------------|
| <b>HEMOGRAM , WHOLE BLOOD EDTA</b>          |             |                         |                    |                           |
| <b>HAEMOGLOBIN</b>                          | 15.6        | g/dL                    | 13-17              | CYANIDE FREE COLOUROMETER |
| PCV   | 46.00       | %                       | 40-50              | PULSE HEIGHT AVERAGE      |
| RBC COUNT                                   | 4.99        | Million/cu.mm           | 4.5-5.5            | Electrical Impedance      |
| MCV   | 92.3        | fL                      | 83-101             | Calculated                |
| MCH   | 31.2        | pg                      | 27-32              | Calculated                |
| MCHC  | 33.8        | g/dL                    | 31.5-34.5          | Calculated                |
| R.D.W                                       | 13.9        | %                       | 11.6-14            | Calculated                |
| TOTAL LEUCOCYTE COUNT (TLC)                 | 5,470       | cells/cu.mm             | 4000-10000         | Electrical Impedance      |
| <b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>  |             |                         |                    |                           |
| NEUTROPHILS                                 | 52.5        | %                       | 40-80              | Electrical Impedance      |
| LYMPHOCYTES                                 | <b>40.4</b> | %                       | 20-40              | Electrical Impedance      |
| EOSINOPHILS                                 | 1.7         | %                       | 1-6                | Electrical Impedance      |
| MONOCYTES                                   | 4.4         | %                       | 2-10               | Electrical Impedance      |
| BASOPHILS                                   | 1           | %                       | <1-2               | Electrical Impedance      |
| <b>ABSOLUTE LEUCOCYTE COUNT</b>             |             |                         |                    |                           |
| NEUTROPHILS                                 | 2871.75     | Cells/cu.mm             | 2000-7000          | Calculated                |
| LYMPHOCYTES                                 | 2209.88     | Cells/cu.mm             | 1000-3000          | Calculated                |
| EOSINOPHILS                                 | 92.99       | Cells/cu.mm             | 20-500             | Calculated                |
| MONOCYTES                                   | 240.68      | Cells/cu.mm             | 200-1000           | Calculated                |
| BASOPHILS                                   | 54.7        | Cells/cu.mm             | 0-100              | Calculated                |
| Neutrophil lymphocyte ratio (NLR)           | 1.3         |                         | 0.78- 3.53         | Calculated                |
| <b>PLATELET COUNT</b>                       | 163000      | cells/cu.mm             | 150000-410000      | IMPEDENCE/MICROSCOPY      |
| <b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b> | 07          | mm at the end of 1 hour | 0-15               | Modified Westergren       |
| <b>PERIPHERAL SMEAR</b>                     |             |                         |                    |                           |

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.  
PLATELETS ARE ADEQUATE.

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**DEPARTMENT OF HAEMATOLOGY**

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



Dr. SHWETA GUPTA  
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|                                      |  |
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| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:04AM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 05:45PM             |
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**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   |
|---|----------|------|--------------------|--|
| <b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b> |          |      |                    |  |
| BLOOD GROUP TYPE  | O        |      |                    | Forward & Reverse Grouping with Slide/Tube Aggluti       |
| Rh TYPE   | POSITIVE |      |                    | Forward & Reverse Grouping with Slide/Tube Agglutination |



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|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 01:33PM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 01:51PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:23PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 | 96     | mg/dL | 70-100             | GOD - POD |

**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) | 81     | mg/dL | 70-140             | GOD - POD |

**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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|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 02:06PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:42PM             |
| Visit ID : SCHIOPV38184              | 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     |
|---|--------|-------|--------------------|------------|
| <b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b> |        |       |                    |            |
| HBA1C, GLYCATED HEMOGLOBIN                            | 5.4    | %     |                    | HPLC       |
| ESTIMATED AVERAGE GLUCOSE (eAG)                       | 108    | 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)

*Nidhi*

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|                                      |  |
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| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:25AM             |
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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      |
|------------------------------|-------------|-------|--------------------|-------------|
| <b>LIPID PROFILE , SERUM</b> |             |       |                    |             |
| TOTAL CHOLESTEROL            | <b>206</b>  | mg/dL | <200               | CHE/CHO/POD |
| TRIGLYCERIDES                | 135         | mg/dL | <150               | Enzymatic   |
| HDL CHOLESTEROL              | 41          | mg/dL | >40                | CHE/CHO/POD |
| NON-HDL CHOLESTEROL          | <b>165</b>  | mg/dL | <130               | Calculated  |
| LDL CHOLESTEROL              | <b>138</b>  | mg/dL | <100               | Calculated  |
| VLDL CHOLESTEROL             | 27          | mg/dL | <30                | Calculated  |
| CHOL / HDL RATIO             | <b>5.02</b> |       | 0-4.97             | Calculated  |
| ATHEROGENIC INDEX (AIP)      | <b>0.16</b> |       | <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<br>Near Optimal 100-129  | 130 - 159       | 160 - 189 | ≥ 190     |
| HDL                 | ≥ 60                                   |                 |           |           |
| NON-HDL CHOLESTEROL | Optimal <130;<br>Above Optimal 130-159 | 160-189         | 190-219   | >220      |



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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                  |
|--|-------------|-------|--------------------|-------------------------|
| <b>LIVER FUNCTION TEST (LFT) , SERUM</b> |             |       |                    |                         |
| BILIRUBIN, TOTAL                         | 0.80        | mg/dL | 0.20-1.30          | DIAZO METHOD            |
| BILIRUBIN CONJUGATED (DIRECT)            | <b>0.40</b> | mg/dL | 0.0-0.3            | Calculated              |
| BILIRUBIN (INDIRECT)                     | 0.40        | mg/dL | 0.0-1.1            | Dual Wavelength         |
| ALANINE AMINOTRANSFERASE (ALT/SGPT)      | 31          | U/L   | <50                | Visible with P-5-P      |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT)    | 23.0        | U/L   | 17-59              | UV with P-5-P           |
| AST (SGOT) / ALT (SGPT) RATIO (DE RITIS) | 0.7         |       | <1.15              | Calculated              |
| ALKALINE PHOSPHATASE                     | 71.00       | U/L   | 38-126             | p-nitrophenyl phosphate |
| PROTEIN, TOTAL                           | 7.20        | g/dL  | 6.3-8.2            | Biuret                  |
| ALBUMIN                                  | 4.20        | g/dL  | 3.5 - 5            | Bromocresol Green       |
| GLOBULIN                                 | 3.00        | g/dL  | 2.0-3.5            | Calculated              |
| A/G RATIO                                | 1.4         |       | 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 > 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 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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| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 09:47PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 20/Oct/2024 09:40AM             |
| Visit ID : SCHIOPV38184              | 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                   |
|---|------------|--------|--------------------|--------------------------|
| <b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b> |            |        |                    |                          |
| CREATININE  | 0.90       | mg/dL  | 0.84 - 1.25        | Modified Jaffe, Kinetic  |
| UREA  | 24.70      | mg/dL  | 19-43              | Urease                   |
| BLOOD UREA NITROGEN   | 11.5       | mg/dL  | 8.0 - 23.0         | Calculated               |
| URIC ACID   | 5.00       | mg/dL  | 3.5-8.5            | Uricase                  |
| CALCIUM   | 9.20       | mg/dL  | 8.4 - 10.2         | Arsenazo-III             |
| PHOSPHORUS, INORGANIC                                       | 2.50       | mg/dL  | 2.5-4.5            | Phosphomolybdate Complex |
| SODIUM  | <b>135</b> | mmol/L | 136-146            | ISE (Indirect)           |
| POTASSIUM   | 4.5        | mmol/L | 3.5-5.1            | ISE (Indirect)           |
| CHLORIDE  | 102.4      | mmol/L | 101-109            | ISE (Indirect)           |
| PROTEIN, TOTAL  | 7.00       | g/dL   | 6.3-8.2            | Biuret                   |
| ALBUMIN   | 4.40       | g/dL   | 3.5 - 5            | Bromocresol Green        |
| GLOBULIN  | 2.60       | g/dL   | 2.0-3.5            | Calculated               |
| A/G RATIO   | 1.69       |        | 0.9-2.0            | Calculated               |



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SIN No:BI22306611



|                                      |  |
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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                     |
|--|--------|------|--------------------|----------------------------|
| <b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b> | 22.00  | U/L  | 15-73              | Glycylglycine Nitoranalide |



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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 |
|--|--------|--------|--------------------|--------|
| <b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b> |        |        |                    |        |
| TRI-IODOTHYRONINE (T3, TOTAL)                      | 1.05   | ng/mL  | 0.87-1.78          | CLIA   |
| THYROXINE (T4, TOTAL)                              | 8.38   | µg/dL  | 5.48-14.28         | CLIA   |
| THYROID STIMULATING HORMONE (TSH)                  | 1.364  | µIU/mL | 0.38-5.33          | CLIA   |

**Comment:**

|                             |  |
|-----------------------------|--|
| <b>For pregnant females</b> | <b>Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)</b> |
| 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   | 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 Treatment. |
| 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   |



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**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 |
|------|------|------|------|--|



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| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 |
|--|--------|-------|--------------------|--------|
| <b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b> | 0.290  | ng/mL | 0-4                | CLIA   |



Dr. Tanish Mandal  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist  
SIN No: SPL24144110



|                 |                         |              |                               |
|-----------------|-------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.MEENA NAVEEN KUMAR | Collected    | : 19/Oct/2024 10:04AM         |
| Age/Gender      | : 47 Y 1 M 11 D/M       | Received     | : 19/Oct/2024 01:35PM         |
| UHID/MR No      | : SCHI.0000024831       | Reported     | : 19/Oct/2024 03:27PM         |
| Visit ID        | : SCHIOPV38184          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF               | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 84935                 |              |                               |

**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                     |
|--|-------------|------|--------------------|----------------------------|
| <b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>      |             |      |                    |                            |
| <b>PHYSICAL EXAMINATION</b>                          |             |      |                    |                            |
| COLOUR   | PALE YELLOW |      | PALE YELLOW        | Visual                     |
| TRANSPARENCY   | CLEAR       |      | CLEAR              | Physical Measurement       |
| pH   | 6.0         |      | 5-7.5              | Double Indicator           |
| SP. GRAVITY  | 1.015       |      | 1.002-1.030        | Bromothymol Blue           |
| <b>BIOCHEMICAL EXAMINATION</b>                       |             |      |                    |                            |
| 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             | Modified Ehrlich Reaction  |
| NITRITE  | NEGATIVE    |      | NEGATIVE           | Diazotization              |
| LEUCOCYTE ESTERASE                                   | NEGATIVE    |      | NEGATIVE           | Leucocyte Esterase         |
| <b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b> |             |      |                    |                            |
| PUS CELLS  | 1-2         | /hpf | 0-5                | Microscopy                 |
| EPITHELIAL CELLS                                     | 1-2         | /hpf | <10                | Microscopy                 |
| RBC  | ABSENT      | /hpf | 0-2                | Microscopy                 |
| CASTS  | ABSENT      |      | 0-2 Hyaline Cast   | Microscopy                 |
| CRYSTALS   | ABSENT      |      | ABSENT             | 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.

Page 14 of 15



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology

SIN No:UR2417022



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 01:34PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:27PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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           | Dipstick |

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

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



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:UF012135



Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

Collected : 19/Oct/2024 10:04AM  
Received : 19/Oct/2024 01:34PM  
Reported : 19/Oct/2024 03:27PM  
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. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:UF012135





|         |   |           |                  |  |
|---------|---|-----------|------------------|--|
| Name    | Mr. MEENA NAVEEN KUMAR                                    | Age       | 47 Y             | UHID: SCHL3060024831   |
| Address | B 169 DAYANAND COLONY                                     | Sex       | M                |  |
| Plan    | ARCOFEMI-MEDIWHEEL-MALE-ABC-CREDIT-PAN-INDIA-OP-AGREEMENT | OP Number | SCHOPV38184      | Bill No : SCH/OCR-12725  |
|         |   | Date      | 19.10.2024 09:48 |  |

| Sno | Service Type/ServiceName   | Department |
|-----|--|------------|
| 1   | ARCOFEMI-MEDIWHEEL-FULL BODY ANNUAL PLUS ABOVE 50Y MALE-2D ECHO-PAN INDIA-FY2024 |            |
| 1   | ALANINE GLUTAMYL TRANSFERASE (GGT)   |            |
| 2   | PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)   |            |
| 3   | D ECHO ✓ 1 PM ✓  |            |
| 4   | RENAL FUNCTION TEST (RFT)  |            |
| 5   | GLUCOSE-FASTING  |            |
| 6   | HEMOGRAM - PERIPHERAL SMEAR  |            |
| 7   | DIET CONSULTATION  |            |
| 8   | COMPLETE URINE EXAMINATION   |            |
| 9   | URINE GLUCOSE (POST PRANDIAL) ←  |            |
| 10  | PERIPHERAL SMEAR   |            |
| 11  | ECG ✓  |            |
| 12  | RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)                                      |            |
| 13  | DENTAL CONSULTATION ✓  |            |
| 14  | GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) ← 1.15 PM ✓                     |            |
| 15  | URINE GLUCOSE (FASTING)  |            |
| 16  | HbA1c, GLYCATED HEMOGLOBIN   |            |
| 17  | X RAY CHEST PA ✓   |            |
| 18  | DENT CONSULTATION ✓ BY NAYAN   |            |
| 19  | FITNESS BY GENERAL PHYSICIAN   |            |
| 20  | BLOOD GROUP ABO AND RH FACTOR  |            |
| 21  | ECG PROFILE  |            |
| 22  | BODY MASS INDEX (BMI)  |            |
| 23  | OPHTHAL BY GENERAL PHYSICIAN ✓   |            |
| 24  | ULTRASOUND- WHOLE ABDOMEN ✓  |            |
| 25  | THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)  |            |

|         |           |
|---------|-----------|
| Height: | 179cm     |
| Weight: | 86.9kg    |
| B.P.:   | 130/70 mm |
| Pulse:  | 62/mnt    |
| SpO2:   | 98%       |



सर्वोच्च  
Government of India



मासिक 107 (2012)

Musreen Kumar Musre  
DOB: 06/09/1977  
Male



सर्वोच्च 107 (2012) में प्रकाशित  
केन्द्रित रूप से प्रकाशित, 107 (2012) में प्रकाशित

**3368 7984 0113**

मेरा आधार, मेरी पहचान

Diagnosis

Procedure

Present Name

Encl

Agreement Name

Package Name

ACCIDENT HEALTHCARE UNIT

S.M.A.S.  
MR. MICHAEL MARLIN

Reverse Item  
3 months  
at 100% add.

ADJUSTMENT

ACCIDENT RETIREMENT - POLICE AND CREDIT AND UNEMP. COV.

ACCIDENT MEDICAL - FULL YEAR ANNUAL FEE ABOVE \$50,000 - 70  
E.C. 40 - PAID DENTAL - 192524

## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Meena Meena on 19/10

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

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

Dr. Meena  
 Medical Officer  
 The Apollo Clinic, Uppal



*This certificate is not meant for medico-legal purposes*

PREVENTIVE HEALTH CARE SUMMARY

|                 |           |                |       |
|-----------------|-----------|----------------|-------|
| NAME :-         | Meene     | PHID No. :-    | 24837 |
| AGE / GENDER :- | 47y M     | RECEIPT No. :- |       |
| PANEL :-        | Arcofe my | EXAMINED ON :- | 19/10 |

Chief Complaints:

Chronic mildness in throat

Appendicectomy

Past History:

|              |     |        |     |
|--------------|-----|--------|-----|
| DM           | Nil | CVA    | Nil |
| Hypertension | Nil | Cancer | Nil |
| CAD          | Nil | Other  | Nil |

Personal History:

|         |     |           |        |
|---------|-----|-----------|--------|
| Alcohol | Nil | Activity  | Active |
| Smoking | Nil | Allergies | Nil    |

Family History:

CAD Bylan

General Physical Examination:

|        |      |     |       |        |      |
|--------|------|-----|-------|--------|------|
| Height | 179  | cms | Pulse | 62/m   | bpm  |
| Weight | 76.9 | Kgs | BP    | 130/70 | mmHg |

Rest of examination was within normal limits

Systemic Examination:

|                    |        |
|--------------------|--------|
| CVS                | Normal |
| Respiratory system | Normal |
| Abdominal system   | Normal |
| CNS                | Normal |
| Others             | Normal |

PREVENTIVE HEALTH CARE SUMMARY

|                      |                |               |
|----------------------|----------------|---------------|
| NAME :- <i>Meenu</i> | UHID No :-     |               |
| AGE :-               | SEX :-         | RECEIPT No :- |
| PANEL :-             | EXAMINED ON :- |               |

Investigations:

- All the reports of tests and investigations are attached here with

*Dyslipidemia*

Recommendation:

- low fat diet  
Cap Mucal DSR 102x 2 weeks  
Cap @ Achivee 102x 2 months  
My vite 1/3 60 once a week  
2 months

Dr. Navneet Kaur  
Consultant Physician



Mr. Meetha Naveen Kumar 19/10/24  
47/M

Eye checkup

H/o using glasses

no H/o systemic disease

V  $\left\{ \begin{array}{l} 6/9^{\oplus} \\ 6/9^{\oplus} \end{array} \right.$       NLT  $\left\{ \begin{array}{l} 16 \\ 16 \end{array} \right.$  minitly down Normal B/A

Box  $\left\{ \begin{array}{l} -1.00DC \times 40^{\circ} \text{ G/G} \\ -1.00DC \times 150^{\circ} \text{ G/G} \\ \text{Add } +1.75DS \text{ N6 B/A} \end{array} \right.$

Slit lamp exam

HS Normal B/A

pupil reaction Normal B/A

Fundus  $\left\{ \begin{array}{l} \text{w/nc} \\ \text{B/A} \end{array} \right.$

Add  
Glasses

Dhanu  
19/10/24

19/10/24

Pt Name - MR. Marna Pawan Kumar

Age - 47 / Male


Co - Routine dental checkup.

M/H - N.R.M

D/H - N.R.M

O/c - stain ++  
calculus ++

Advice - complete oral prophylaxis  
scaling & polishing.

  
Apollo Dental  
9800252265



**Dr. Nayeem Ahmad**

MBBS (Patna), DLOMS (Patna)

DNB (I) New Delhi

Consultant ENT Surgeon



Specialists in Surgery

For Appointment: +91 11 40465555

Mob: +91 9910995018

9891740801

Mr. Meena Naveen Kumar  
47y/M

9E

B/L ITH TM

Throat - normal

Ears - B/L TM intact

? Allergic Rhinitis

✓ NCCET PNS (Axial + Cervical)

9555454433 (Retail)

Rx

Fluticasone FT NS 2puff BID  
in both nostrils

✓

✓

Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048

Ph: 011-40465555, 9910995018 | www.apollospectra.com

**Apollo Specialty Hospital Pvt. Ltd.**

CIN - U85100TG2009PTC099414

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038

Ph No: 040-4904 7777 | www.apollohl.com

|          |                    |          |            |
|----------|--------------------|----------|------------|
| Name :   | MEENA NAVEEN KUMAR | Age/Sex: | 47 Yrs./M  |
| UHID :   | 24831              |          |            |
| Ref By : | APOLLO SPECTRA     | Date:-   | 19.10.2024 |

### ULTRASOUND WHOLE ABDOMEN

**Liver:** Appears normal in size, and shows increased parenchymal echogenicity which is most likely due to fatty changes. Intrahepatic biliary radicles are not dilated. CBD and portal vein are normal in calibre.

**Gall Bladder:** normally distended with clear lumen and normal wall thickness. No calculus or sludge is seen.

**Pancreas and Spleen:** Appears normal in size and echotexture.

**Both Kidneys:** are normal in size, shape, and echopattern. The parenchymal thickness is normal and cortico-medullary differentiation is well maintained. Pelvicalyceal systems are not dilated. No calculus or mass lesion is seen. Ureter is not dilated.

**Urinary Bladder:** is moderately distended and shows no obvious calculus or sediments. Bladder wall thickness is normal.

**Prostate:** normal in size, weight 11 Gms. It is normal in echotexture with no breach in the capsule.

No free fluid seen.

### **IMPRESSION: FATTY CHANGES IN LIVER GRADE I**

**Please correlate clinically and with lab. Investigations.**



DR. DEEPIKA AGARWAL  
Consultant Radiologist

Dr. DEEPIKA AGARWAL  
Consultant Radiologist  
DMC No. 58777  
Apollo Speciality Hospitals (P) Ltd.  
A-2, Chirag Enclave, Greater Kailash-1  
New Delhi-110043

Patient Name : Mr. MEENA NAVEEN KUMAR      Age : 47 Y/M  
 UHID : SCH100004831      CIP Visit No : SCH10PV38184  
 Conducted By : Dr. MUKESH K.GUPTA      Conducted Date : 20.10.2024 15:07  
 Referred By : SELF

### MITRAL VALVE

Morphology AML-**Normal**/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming,  
 PML-**Normal**/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed,  
 Subvalvular deformity Present/**Absent**.      Score : \_\_\_\_\_

Doppler Normal/Abnormal      E>A      E>A  
 Mitral Stenosis Present/**Absent**      RR Interval \_\_\_\_\_ msec  
 EDG \_\_\_\_\_ mmHg      MDG \_\_\_\_\_ mmHg      MVA \_\_\_\_\_ cm<sup>2</sup>  
 Mitral Regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

### TRICUSPID VALVE

Morphology **Normal**/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.  
 Duppler **Normal**/Abnormal  
 Tricuspid stenosis Present/**Absent**      RR interval \_\_\_\_\_ msec  
 EDG \_\_\_\_\_ mmHg      MDG \_\_\_\_\_ mmHg  
 Tricuspid regurgitation : **Absent**/Trivial/Mild/Moderate/Severe Fragmented signals  
 Velocity \_\_\_\_\_ msec.      Pred. RVSP=RAP+ \_\_\_\_\_ mmHg

### PULMONARY VALVE

Morphology **Normal**/Atresia/Thickening/Doming/Vegetation.  
 Doppler **Normal**/Abnormal.  
 Pulmonary stenosis Present/**Absent**      Level \_\_\_\_\_  
 PSG \_\_\_\_\_ mmHg      Pulmonary annulus \_\_\_\_\_ mm  
 Pulmonary regurgitation **Absent**/Trivial/Mild/Moderate/Severe  
 Early diastolic gradient \_\_\_\_\_ mmHg.      End diastolic gradient \_\_\_\_\_ mmHg

### AORTIC VALVE

Morphology **Normal**/Thickening/Calcification/Restricted opening/Flutter/Vegetation  
 No. of cusps 1/2/**3**/4  
 Doppler **Normal**/Abnormal  
 Aortic stenosis Present/**Absent**      Level \_\_\_\_\_  
 PSG \_\_\_\_\_ mmHg      Aortic annulus \_\_\_\_\_ mm  
 Aortic regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

| Measurements | Normal Values     | Measurements     | Normal values                   |
|--------------|-------------------|------------------|---------------------------------|
| Aorta        | 2.8 (2.0 – 3.7cm) | LA es            | 3.2 (1.9 – 4.0cm)               |
| LV es        | 2.5 (2.2 – 4.0cm) | LV ed            | 4.5 (3.7 – 5.6cm)               |
| IVS ed       | 1.0 (0.6 – 1.1cm) | PW (LV)          | 0.9 (0.6 – 1.1cm)               |
| RV ed        | (0.7 – 2.6cm)     | RV Anterior wall | (upto 5 mm)                     |
| LVVd (ml)    |                   | LVVs (ml)        |                                 |
| EF           | 65% (54%-76%)     | IVS motion       | <b>Normal</b> /Flat/Paradoxical |

### CHAMBERS :

LV **Normal**/Enlarged/Clear/Thrombus/Hypertrophy

|                                  |             |                                       |
|----------------------------------|-------------|---------------------------------------|
|                                  | Contraction | <u>Normal/Reduced</u>                 |
| Regional wall motion abnormality |             | <b>Absent</b>                         |
| LA                               |             | <u>Normal/Enlarged/Clear/Thrombus</u> |
| RA                               |             | <u>Normal/Enlarged/Clear/Thrombus</u> |
| RV                               |             | <u>Normal/Enlarged/Clear/Thrombus</u> |

#### PERICARDIUM

#### COMMENTS & SUMMARY

- v Normal LV systolic function
- v No RWMA, LVEF=65%
- v No AR,PR,MR & TR
- v No I/C clot or mass
- v Good RV function
- v Normal pericardium
- v No pericardial effusion



*Dr. M K Gupta*  
*M.B.B.S, MD,FIACM*  
*Senior Consultant Cardiologist*

ID: 24831

MEHENA NAVEEN KUMAR

Male 47Years

Req. No. :

19-10-2024 11:44:48

HR : 60 bpm

P : 102 ms

PR : 141 ms

QRS : 103 ms

QT/QTcBz : 397/400 ms

PQRS/T : 57/49/13 ms

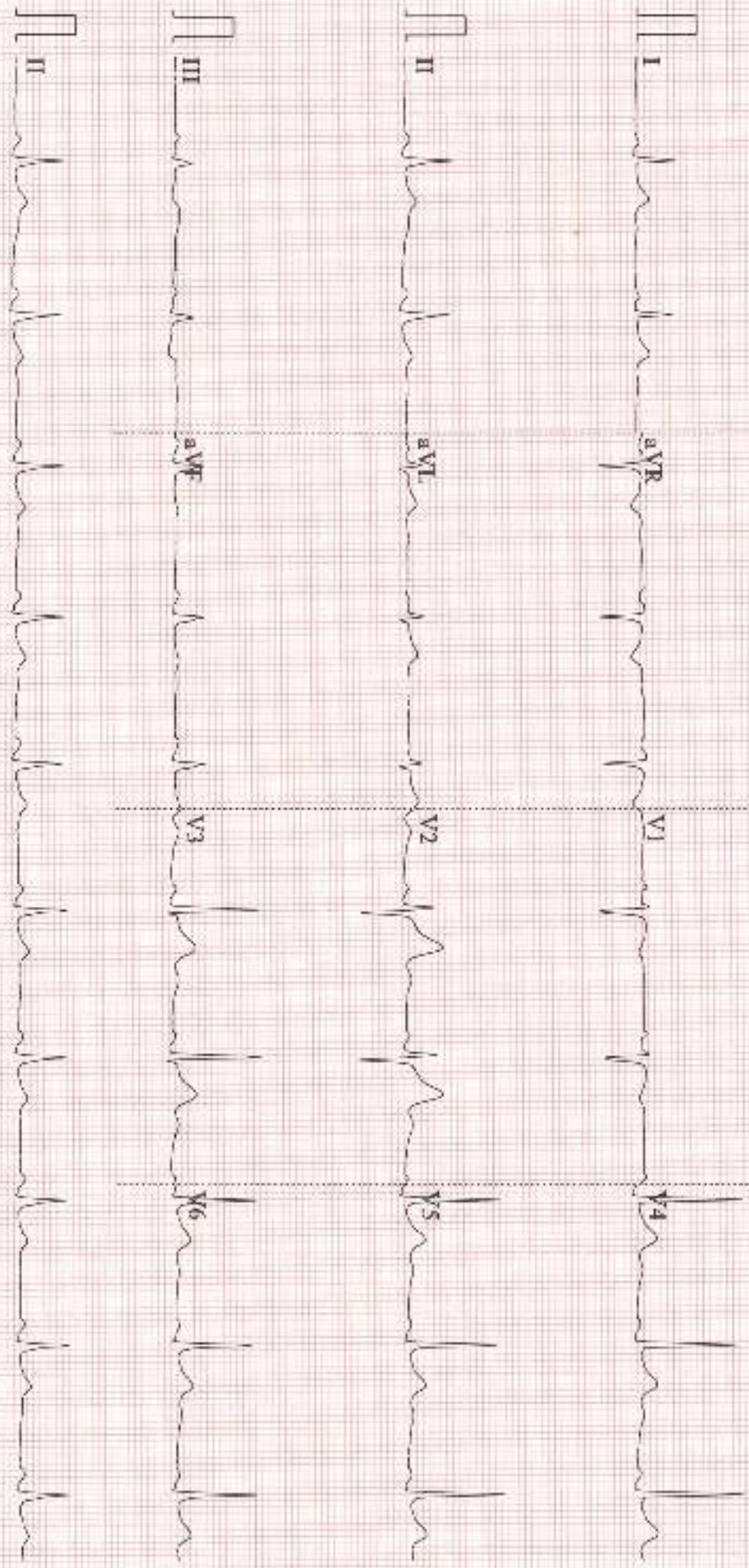
RV5/SV1 : 1.566/0.642 mV

Diagnosis Information:

Sinus Rhythm

\*\*\*Normal ECG\*\*\*

Report Confirmed by:



## DIGITAL X-RAY REPORT

|                 |                    |
|-----------------|--------------------|
| NAME: MEENA     | DATE: 19.10.2024   |
| LHID NO : 24831 | AGE: 47YRS/ SEX: F |

### X-RAY CHEST PA VIEW

Both the lung fields show no active parenchymal pathology.

Both the costophrenic angles are clear.

Heart size is normal.

Both the domes of diaphragm are normal.

Bony thorax appears normal.

**IMPRESSION: NO SIGNIFICANT ABNORMALITY**

Please correlate clinically and with lab investigations



**DR. DEEPIKA AGARWAL**  
Consultant Radiologist

Dr. DEEPIKA AGARWAL  
Consultant Radiologist  
DMC No. 56777  
Apollo Speciality Hospitals (P) Ltd.  
A-2, Chirag Enclave, Greater Kailash-1  
New Delhi-110048

Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

Collected : 19/Oct/2024 10:04AM  
Received : 19/Oct/2024 11:04AM  
Reported : 19/Oct/2024 05:09PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

-----



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:BED240239659



Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

Collected : 19/Oct/2024 10:04AM  
Received : 19/Oct/2024 11:04AM  
Reported : 19/Oct/2024 05:09PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**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                    |
|---|-------------|-------------------------|--------------------|---------------------------|
| <b>HEMOGRAM , WHOLE BLOOD EDTA</b>          |             |                         |                    |                           |
| <b>HAEMOGLOBIN</b>                          | 15.6        | g/dL                    | 13-17              | CYANIDE FREE COLOUROMETER |
| PCV   | 46.00       | %                       | 40-50              | PULSE HEIGHT AVERAGE      |
| RBC COUNT                                   | 4.99        | Million/cu.mm           | 4.5-5.5            | Electrical Impedance      |
| MCV   | 92.3        | fL                      | 83-101             | Calculated                |
| MCH   | 31.2        | pg                      | 27-32              | Calculated                |
| MCHC  | 33.8        | g/dL                    | 31.5-34.5          | Calculated                |
| R.D.W                                       | 13.9        | %                       | 11.6-14            | Calculated                |
| TOTAL LEUCOCYTE COUNT (TLC)                 | 5,470       | cells/cu.mm             | 4000-10000         | Electrical Impedance      |
| <b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>  |             |                         |                    |                           |
| NEUTROPHILS                                 | 52.5        | %                       | 40-80              | Electrical Impedance      |
| LYMPHOCYTES                                 | <b>40.4</b> | %                       | 20-40              | Electrical Impedance      |
| EOSINOPHILS                                 | 1.7         | %                       | 1-6                | Electrical Impedance      |
| MONOCYTES                                   | 4.4         | %                       | 2-10               | Electrical Impedance      |
| BASOPHILS                                   | 1           | %                       | <1-2               | Electrical Impedance      |
| <b>ABSOLUTE LEUCOCYTE COUNT</b>             |             |                         |                    |                           |
| NEUTROPHILS                                 | 2871.75     | Cells/cu.mm             | 2000-7000          | Calculated                |
| LYMPHOCYTES                                 | 2209.88     | Cells/cu.mm             | 1000-3000          | Calculated                |
| EOSINOPHILS                                 | 92.99       | Cells/cu.mm             | 20-500             | Calculated                |
| MONOCYTES                                   | 240.68      | Cells/cu.mm             | 200-1000           | Calculated                |
| BASOPHILS                                   | 54.7        | Cells/cu.mm             | 0-100              | Calculated                |
| Neutrophil lymphocyte ratio (NLR)           | 1.3         |                         | 0.78- 3.53         | Calculated                |
| <b>PLATELET COUNT</b>                       | 163000      | cells/cu.mm             | 150000-410000      | IMPEDENCE/MICROSCOPY      |
| <b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b> | 07          | mm at the end of 1 hour | 0-15               | Modified Westergren       |
| <b>PERIPHERAL SMEAR</b>                     |             |                         |                    |                           |

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.  
PLATELETS ARE ADEQUATE.

Page 2 of 15



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:BED240239659





Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

Collected : 19/Oct/2024 10:04AM  
Received : 19/Oct/2024 11:04AM  
Reported : 19/Oct/2024 05:09PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF HAEMATOLOGY**

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



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:BED240239659



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:04AM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 05:45PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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   |
|---|----------|------|--------------------|--|
| <b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b> |          |      |                    |  |
| BLOOD GROUP TYPE  | O        |      |                    | Forward & Reverse Grouping with Slide/Tube Aggluti       |
| Rh TYPE   | POSITIVE |      |                    | Forward & Reverse Grouping with Slide/Tube Agglutination |



Dr. SHWETA GUPTA  
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SIN No:BED240239659



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 01:33PM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 01:51PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:23PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 | 96     | mg/dL | 70-100             | GOD - POD |

**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) | 81     | mg/dL | 70-140             | GOD - POD |

**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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|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 02:06PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:42PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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     |
|---|--------|-------|--------------------|------------|
| <b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b> |        |       |                    |            |
| HBA1C, GLYCATED HEMOGLOBIN                            | 5.4    | %     |                    | HPLC       |
| ESTIMATED AVERAGE GLUCOSE (eAG)                       | 108    | 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)

*Nidhi*

Dr Nidhi Sachdev  
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Consultant Pathologist

SIN No:EDT240093051



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:25AM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:21PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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      |
|------------------------------|-------------|-------|--------------------|-------------|
| <b>LIPID PROFILE , SERUM</b> |             |       |                    |             |
| TOTAL CHOLESTEROL            | <b>206</b>  | mg/dL | <200               | CHE/CHO/POD |
| TRIGLYCERIDES                | 135         | mg/dL | <150               | Enzymatic   |
| HDL CHOLESTEROL              | 41          | mg/dL | >40                | CHE/CHO/POD |
| NON-HDL CHOLESTEROL          | <b>165</b>  | mg/dL | <130               | Calculated  |
| LDL CHOLESTEROL              | <b>138</b>  | mg/dL | <100               | Calculated  |
| VLDL CHOLESTEROL             | 27          | mg/dL | <30                | Calculated  |
| CHOL / HDL RATIO             | <b>5.02</b> |       | 0-4.97             | Calculated  |
| ATHEROGENIC INDEX (AIP)      | <b>0.16</b> |       | <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<br>Near Optimal 100-129  | 130 - 159       | 160 - 189 | ≥ 190     |
| HDL                 | ≥ 60                                   |                 |           |           |
| NON-HDL CHOLESTEROL | Optimal <130;<br>Above Optimal 130-159 | 160-189         | 190-219   | >220      |



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|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:25AM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:21PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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                  |
|--|-------------|-------|--------------------|-------------------------|
| <b>LIVER FUNCTION TEST (LFT) , SERUM</b> |             |       |                    |                         |
| BILIRUBIN, TOTAL                         | 0.80        | mg/dL | 0.20-1.30          | DIAZO METHOD            |
| BILIRUBIN CONJUGATED (DIRECT)            | <b>0.40</b> | mg/dL | 0.0-0.3            | Calculated              |
| BILIRUBIN (INDIRECT)                     | 0.40        | mg/dL | 0.0-1.1            | Dual Wavelength         |
| ALANINE AMINOTRANSFERASE (ALT/SGPT)      | 31          | U/L   | <50                | Visible with P-5-P      |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT)    | 23.0        | U/L   | 17-59              | UV with P-5-P           |
| AST (SGOT) / ALT (SGPT) RATIO (DE RITIS) | 0.7         |       | <1.15              | Calculated              |
| ALKALINE PHOSPHATASE                     | 71.00       | U/L   | 38-126             | p-nitrophenyl phosphate |
| PROTEIN, TOTAL                           | 7.20        | g/dL  | 6.3-8.2            | Biuret                  |
| ALBUMIN                                  | 4.20        | g/dL  | 3.5 - 5            | Bromocresol Green       |
| GLOBULIN                                 | 3.00        | g/dL  | 2.0-3.5            | Calculated              |
| A/G RATIO                                | 1.4         |       | 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 > 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 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:SE04837098



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 09:47PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 20/Oct/2024 09:40AM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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                   |
|---|------------|--------|--------------------|--------------------------|
| <b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b> |            |        |                    |                          |
| CREATININE  | 0.90       | mg/dL  | 0.84 - 1.25        | Modified Jaffe, Kinetic  |
| UREA  | 24.70      | mg/dL  | 19-43              | Urease                   |
| BLOOD UREA NITROGEN   | 11.5       | mg/dL  | 8.0 - 23.0         | Calculated               |
| URIC ACID   | 5.00       | mg/dL  | 3.5-8.5            | Uricase                  |
| CALCIUM   | 9.20       | mg/dL  | 8.4 - 10.2         | Arsenazo-III             |
| PHOSPHORUS, INORGANIC                                       | 2.50       | mg/dL  | 2.5-4.5            | Phosphomolybdate Complex |
| SODIUM  | <b>135</b> | mmol/L | 136-146            | ISE (Indirect)           |
| POTASSIUM   | 4.5        | mmol/L | 3.5-5.1            | ISE (Indirect)           |
| CHLORIDE  | 102.4      | mmol/L | 101-109            | ISE (Indirect)           |
| PROTEIN, TOTAL  | 7.00       | g/dL   | 6.3-8.2            | Biuret                   |
| ALBUMIN   | 4.40       | g/dL   | 3.5 - 5            | Bromocresol Green        |
| GLOBULIN  | 2.60       | g/dL   | 2.0-3.5            | Calculated               |
| A/G RATIO   | 1.69       |        | 0.9-2.0            | Calculated               |



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SIN No:BI22306611



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 11:25AM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 12:25PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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                     |
|--|--------|------|--------------------|----------------------------|
| <b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b> | 22.00  | U/L  | 15-73              | Glycylglycine Nitoranalide |



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SIN No:SE04837098





|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 02:15PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:06PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 |
|--|--------|--------|--------------------|--------|
| <b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b> |        |        |                    |        |
| TRI-IODOTHYRONINE (T3, TOTAL)                      | 1.05   | ng/mL  | 0.87-1.78          | CLIA   |
| THYROXINE (T4, TOTAL)                              | 8.38   | µg/dL  | 5.48-14.28         | CLIA   |
| THYROID STIMULATING HORMONE (TSH)                  | 1.364  | µIU/mL | 0.38-5.33          | CLIA   |

**Comment:**

|                             |  |
|-----------------------------|--|
| <b>For pregnant females</b> | <b>Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)</b> |
| 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   | 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 Treatment. |
| 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 Nidhi Sachdev  
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Consultant Pathologist

SIN No:SPL24144110



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 02:15PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:06PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 |
|------|------|------|------|--|



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SIN No:SPL24144110



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 02:15PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:04PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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 |
|--|--------|-------|--------------------|--------|
| <b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b> | 0.290  | ng/mL | 0-4                | CLIA   |



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M.B.B.S, M.D (Pathology)  
Consultant Pathologist  
SIN No: SPL24144110



|                 |                         |              |                               |
|-----------------|-------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.MEENA NAVEEN KUMAR | Collected    | : 19/Oct/2024 10:04AM         |
| Age/Gender      | : 47 Y 1 M 11 D/M       | Received     | : 19/Oct/2024 01:35PM         |
| UHID/MR No      | : SCHI.0000024831       | Reported     | : 19/Oct/2024 03:27PM         |
| Visit ID        | : SCHIOPV38184          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF               | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 84935                 |              |                               |

**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                     |
|--|-------------|------|--------------------|----------------------------|
| <b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>      |             |      |                    |                            |
| <b>PHYSICAL EXAMINATION</b>                          |             |      |                    |                            |
| COLOUR   | PALE YELLOW |      | PALE YELLOW        | Visual                     |
| TRANSPARENCY   | CLEAR       |      | CLEAR              | Physical Measurement       |
| pH   | 6.0         |      | 5-7.5              | Double Indicator           |
| SP. GRAVITY  | 1.015       |      | 1.002-1.030        | Bromothymol Blue           |
| <b>BIOCHEMICAL EXAMINATION</b>                       |             |      |                    |                            |
| 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             | Modified Ehrlich Reaction  |
| NITRITE  | NEGATIVE    |      | NEGATIVE           | Diazotization              |
| LEUCOCYTE ESTERASE                                   | NEGATIVE    |      | NEGATIVE           | Leucocyte Esterase         |
| <b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b> |             |      |                    |                            |
| PUS CELLS  | 1-2         | /hpf | 0-5                | Microscopy                 |
| EPITHELIAL CELLS                                     | 1-2         | /hpf | <10                | Microscopy                 |
| RBC  | ABSENT      | /hpf | 0-2                | Microscopy                 |
| CASTS  | ABSENT      |      | 0-2 Hyaline Cast   | Microscopy                 |
| CRYSTALS   | ABSENT      |      | ABSENT             | 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.

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Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology

SIN No:UR2417022



|                                      |  |
|--------------------------------------|--|
| Patient Name : Mr.MEENA NAVEEN KUMAR | Collected : 19/Oct/2024 10:04AM            |
| Age/Gender : 47 Y 1 M 11 D/M         | Received : 19/Oct/2024 01:34PM             |
| UHID/MR No : SCHI.0000024831         | Reported : 19/Oct/2024 03:27PM             |
| Visit ID : SCHIOPV38184              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                 | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 84935              |  |

**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           | Dipstick |

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

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



Dr. SHWETA GUPTA  
MBBS,MD (Pathology)  
Consultant Pathology  
SIN No:UF012135



Patient Name : Mr.MEENA NAVEEN KUMAR  
Age/Gender : 47 Y 1 M 11 D/M  
UHID/MR No : SCHI.0000024831  
Visit ID : SCHIOPV38184  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 84935

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#### 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. SHWETA GUPTA  
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Consultant Pathology  
SIN No:UF012135



Patient Name : Mr. MEENA NAVEEN KUMAR Age : 47 Y/M  
 UHID : SCHI.0000024831 OP Visit No : SCHIOPV38184  
 Conducted By: : Dr. MUKESH K GUPTA Conducted Date : 20-10-2024 15:09  
 Referred By : SELF

**MITRAL VALVE**

Morphology AML-**Normal**/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming.  
 PML-**Normal**/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.  
 Subvalvular deformity Present/**Absent**. Score : \_\_\_\_\_

Doppler Normal/Abnormal E>A **E>A**  
 Mitral Stenosis Present/**Absent** RR Interval \_\_\_\_\_ msec  
 EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg MVA \_\_\_\_\_ cm<sup>2</sup>  
 Mitral Regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

**TRICUSPID VALVE**

Morphology **Normal**/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.  
 Doppler **Normal**/Abnormal  
 Tricuspid stenosis Present/**Absent** RR interval \_\_\_\_\_ msec.  
 EDG \_\_\_\_\_ mmHg MDG \_\_\_\_\_ mmHg  
 Tricuspid regurgitation : **Absent**/Trivial/Mild/Moderate/Severe Fragmented signals  
 Velocity \_\_\_\_\_ msec. Pred. RVSP=RAP+ \_\_\_\_\_ mmHg

**PULMONARY VALVE**

Morphology **Normal**/Atresia/Thickening/Doming/Vegetation.  
 Doppler **Normal**/Abnormal.  
 Pulmonary stenosis Present/**Absent** Level  
 PSG \_\_\_\_\_ mmHg Pulmonary annulus \_\_\_\_\_ mm  
 Pulmonary regurgitation **Absent**/Trivial/Mild/Moderate/Severe  
 Early diastolic gradient \_\_\_\_\_ mmHg. End diastolic gradient \_\_\_\_\_ mmHg

**AORTIC VALVE**

Morphology **Normal**/Thickening/Calcification/Restricted opening/Flutter/Vegetation  
 No. of cusps 1/2/**3**/4  
 Doppler **Normal**/Abnormal  
 Aortic stenosis Present/**Absent** Level  
 PSG \_\_\_\_\_ mmHg Aortic annulus \_\_\_\_\_ mm  
 Aortic regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

**Measurements**      **Normal Values**                      **Measurements**                      **Normal values**

Patient Name : Mr. MEENA NAVEEN KUMAR Age : 47 Y/M  
 UHID : SCHI.0000024831 OP Visit No : SCHIOPV38184  
 Conducted By: : Dr. MUKESH K GUPTA Conducted Date : 20-10-2024 15:09  
 Referred By : SELF

|           |     |               |                  |     |  |
|-----------|-----|---------------|------------------|-----|--|
| Aorta     | 2.8 | (2.0 – 3.7cm) | LA es            | 3.2 | (1.9 – 4.0cm)                          |
| LV es     | 2.5 | (2.2 – 4.0cm) | LV ed            | 4.5 | (3.7 – 5.6cm)                          |
| IVS ed    | 1.0 | (0.6 – 1.1cm) | PW (LV)          | 0.9 | (0.6 – 1.1cm)                          |
| RV ed     |     | (0.7 – 2.6cm) | RV Anterior wall |     | (upto 5 mm)                            |
| LVVd (ml) |     |               | LVVs (ml)        |     |  |
| EF        | 65% | (54%-76%)     | IVS motion       |     | <b><u>Normal</u></b> /Flat/Paradoxical |

**CHAMBERS :**

LV **Normal**/Enlarged/**Clear**/Thrombus/Hypertrophy  
 Contraction **Normal**/Reduced

Regional wall motion abnormality **Absent**

LA **Normal**/Enlarged/**Clear**/Thrombus

RA **Normal**/Enlarged/**Clear**/Thrombus

RV **Normal**/Enlarged/**Clear**/Thrombus

**PERICARDIUM**

**COMMENTS & SUMMARY**

- v Normal LV systolic function
- v No RWMA, LVEF=65%
- v No AR,PR,MR & TR
- v No I/C clot or mass
- v Good RV function
- v Normal pericardium
- v No pericardial effusion



Patient Name : Mr. MEENA NAVEEN KUMAR Age : 47 Y/M  
UHID : SCHI.0000024831 OP Visit No : SCHIOPV38184  
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Referred By : SELF

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***Dr. M K Gupta***  
***M.B.B.S, MD,FIACM***  
***Senior Consultant Cardiologist***

Patient Name : Mr. MEENA NAVEEN KUMAR

UHID : SCHI.0000024831

Conducted By: :

Referred By : SELF

Age : 47 Y/M

OP Visit No : SCHIOPV38184

Conducted Date :

Patient Name : Mr. MEENA NAVEEN KUMAR

UHID : SCHI.0000024831

Conducted By :

Referred By : SELF

Age : 47 Y/M

OP Visit No : SCHIOPV38184

Conducted Date :

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