



बैंक ऑफ बरोडा
Bank of Baroda



नाम
Name के राम किशोर
Kishore Koli Rama

E.C. No. 167082



जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Ho

Fwd: Health Check up Booking Confirmed Request(bobE7696),Package Code-
PKG10000366, Beneficiary Code-300059

KOLLI RAMA KISHORE <KOLLI.KISHORE@bankofbaroda.com>

Sat 10 02-2024 09:59

To:Koramangala Apolloclinic <koramangala@apolloclinic.com>

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From: Mediwheel <wellness@mediwheel.in>

Sent: Monday, February 5, 2024 1:55:51 PM

To: KOLLI RAMA KISHORE <KOLLI.KISHORE@bankofbaroda.com>

Cc: customercare@mediwheel.in <customercare@mediwheel.in>

Subject: Health Check up Booking Confirmed Request(bobE7696),Package Code-PKG10000366,
Beneficiary Code-300059

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⚠: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक प
ON: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLIK

011-41195959

Dear **K Rama Kishore**,

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

Booking Date : 03-02-2024

Hospital Package Name : Mediwheel Full Body Annual Plus

Patient Package Name : Mediwheel Full Body Health Checkup Male Below 40

Name of Diagnostic/Hospital : Apollo Medical Centre

Address of Diagnostic/Hospital : Apollo Medical centre, Plot 51, 5th Block, Opp. Jyothi Nivas College, Koramangala - 560095

City : Bangalore

State :

Pincode : 560095

Appointment Date : 10-02-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
MR. KISHORE KOLLI RAMA	34 year	Male

Note - Please note to not pay any amount .

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.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.

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अस्वीकरण: ***** यह ईमेल (किसी भी संलग्नक सहित) केवल अपेक्षित प्राप्तकर्ता/ओं के उपयोग के लिए है और इसमें ऐसी सामग्री हो सकती है जो कंपनी की गोपनीय और निजी सूचना हो. दूसरों द्वारा इसमें कोई भी संशोधन या इसे आधार बनाना या इस संदेश की किसी भी या सभी सामग्री को कॉपी करना या वितरित करना या अप्रेषित करना पूरी तरह से वर्जित है. यदि आप

अपेक्षित प्राप्तकर्ता नहीं है, तो कृपया ईमेल द्वारा संबंधित प्रेषक से संपर्क करें और सभी प्रतियां हटा दें. इस संबंध में आपका सहयोग वांछनीय है.

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Name : Mr. KISHORE KOLLJ **Age:** 34 Y
Address : kml **Sex:** M
Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT

UHID: CKOR.0000250990

OP Number: CKOROPV398944
Bill No : CKOR-OCR-80760
Date : 10.02.2024 10:07

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
✓ 2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
✓ 2	2D ECHO - R no. 09	
✓ 3	LIVER FUNCTION TEST (LFT)	
✓ 4	GLUCOSE, FASTING	
✓ 5	HEMOGRAM + PERIPHERAL SMEAR	
6	DIET CONSULTATION	
✓ 7	COMPLETE URINE EXAMINATION	
✓ 8	URINE GLUCOSE (POST PRANDIAL)	
9	PERIPHERAL SMEAR	
10	EKG - R no. 14	
✓ 11	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
12	DENTAL CONSULTATION - RCT wt 15 & 24	15
✓ 13	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
✓ 14	URINE GLUCOSE (FASTING)	
✓ 15	HbA1c, GLYCATED HEMOGLOBIN	
✓ 16	X-RAY CHEST PA - R no. 11	
✓ 17	DENT CONSULTATION - Dr. Vijayalakshmi	
18	FITNESS BY GENERAL PHYSICIAN	
✓ 19	BLOOD GROUP ABO AND RH FACTOR	
✓ 20	LIPID PROFILE	
21	BODY MASS INDEX (BMI)	
✓ 22	OPHTHAL BY GENERAL PHYSICIAN - R no. 20 ✓	
✓ 23	ULTRASOUND - WHOLE ABDOMEN	
✓ 24	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

25) physio - R no. 24

12-115
2-15

Height - 173 cm
weight - 64.7 kg

Apollo Clinic

Consent Form

Patient Name: K. RAMA KISHORE Age: 34

UHID Number: Company Name:

Mr/Mrs/Miss: K. RAMA KISHORE Employee of Bank of Baroda

(Company) want to inform you that I am ~~not~~ getting the..... consultation.....

Test which is a part of health check package.

on Monday
12/12/24

Reason if any:

And I claim the above statement in my full consciousness.

Patient Signature:  Date: 10/12/24

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115B19)

Regd. Office: 1-10-60/52, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohi.com | www.apollohi.com

APOLLO CLINICS NETWORK-KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT



DR. MAHABALESHWAR.M
MBBS.(MYS), MD(AIIMS DELHI)FICS
D.O (JIPMER)
REG.NO:KMC:9748

DATE: 10/7/24
OP NO:

THE APOLLO MEDICAL CENTER KORAMANGALA

NAME: *Kishore Kalli*
AGE : *36*
GENDER: *M*

OPHTHALMIC REPORT

RIGHT EYE

LEFT EYE

GENERAL APPEARANCE

VISION - DISTANCE

WITHOUT GLASS

6/6

6/6

WITH GLASS

GLASS POWER

NEAR

WITHOUT GLASS

NG

NG

WITH GLASS

GLASS POWER

COLOUR

normal

ANTERIOR SEGMENT:-

FUNDUS

ow

I.O.P: DIGITAL

DOCTOR SIGNATURE

10/02/24

Mr. Kishore Kallu

34 yr

S/B Dr. Vijayalakshmi

ENT consultant

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Free ENT checkup

Both T.M. intact

Heavy discharge, some

Nasal airway clear

Throat normal

Eyes normal



Follow up date:

Doctor Signature

Patient Name : Mr Kishore Kulli

Patient ID: 250990

Age : 34 Year(s)

Sex : Male

Referring Doctor : H/C

Date : 10.02.2024

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows normal echotexture. No biliary dilatation. There is a 1.3X1.1 cm hyperechoic lesion.

CBD is not dilated. **Portal vein** is normal in size, course and calibre.

Gall bladder 4mm sessile polyp noted.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

Right Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. 4mm calculus seen, no hydronephrosis.

Left Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Prostate: normal in size and echotexture.

There is no ascites.

IMPRESSION: FOCAL LESION RIGHT LOBE OF LIVER SUGGESTIVE OF A HEMANGIOMA.
GALL BLADDER POLYP.
NON OBSTRUCTIVE RIGHT RENAL CALCULUS.

DR VINOD JOSEPH DNB,DMRD
RADIOLOGIST

Apollo Health and Lifestyle Limited

(CIN - UBS110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

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Koramangala | Sarjapur Road | **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT



NAME: MR. KISHORE KOLLI

AGE: 34Y

SEX: MALE

DATE: 10/02/2024

ECHOCARDIOGRAPHY REPORT

MEASUREMENT

AO - 28 (20 – 35)mm	LIVD d - 39 (36-52)mm	IVS - 11 (06 - 11)mm
LA -29(19- 40)mm	LVID s -27(23- 39)mm	PWD - 11 (06- 11)mm
EF - 60 (>50%)	RVID-24	

VALVES

Mitral Valve : Normal .
 Aortic Valve : Normal .
 Tricuspid Valve : Normal, Trivial TR. RVSP – 20 mm
 Pulmonary Valve : Normal,

CHAMBERS

Left Atrium : Normal
 Right Atrium : Normal
 Left Ventricle : Normal .
 Right Ventricle : Normal

SEPTAE

IVS : Intact
 IAS : Intact

GREAT ARTERIES

Aorta : Normal
Pulmonary Artery : Normal

DOPPLER DATA

Mitral : E > A , 0.7 / 0.5
Aortic : Normal , 1.0 m/s
Tricuspid : Normal , 0.4 / 0.6
Pulmonary : Normal. 1.10

WALL MOTION ABNORMALITIES : No RWMA

Pericardium : Normal

FINAL DIAGNOSIS

**NORMAL LV SYSTOLIC FUNCTION
NO RWMA AT REST, LV EF - 60 %
NORMAL DIASTOLIC FUNCTION
NO OBVIOUS CLOTS/ EFFUSION/ VEGETATION**



**DR. MOHAN MURALI
DNB(MED), DNB(CARDIOLOGY)
CONSULTANT CARDIOLOGIST**

Patient Name	: Mr. KISHORE KOLLI	Age	: 34 Y.M
UHID	: CKOR.0000250990	OP Visit No	: CKOROPV398944
Reported on	: 10-02-2024 14:57	Printed on	: 10-02-2024 17:02
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.


The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION : NORMAL STUDY.

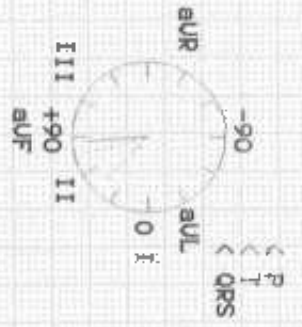
Printed on:10-02-2024 14:57

---End of the Report---


For **Dr. VINOD P JOSEPH**
MBBS, DNB, DMRD
Radiology

AGE: 34

Measurement	Result
QT/QTcB	360 / 420 ms
PR	132 ms
P	100 ms
RR/PP	734 / 730 ms
P/QRS/T	75 / 85 / 45 degrees
QTd/QTcBd	36 / 42 ms
Sokolow	2.0 mV
RK	12

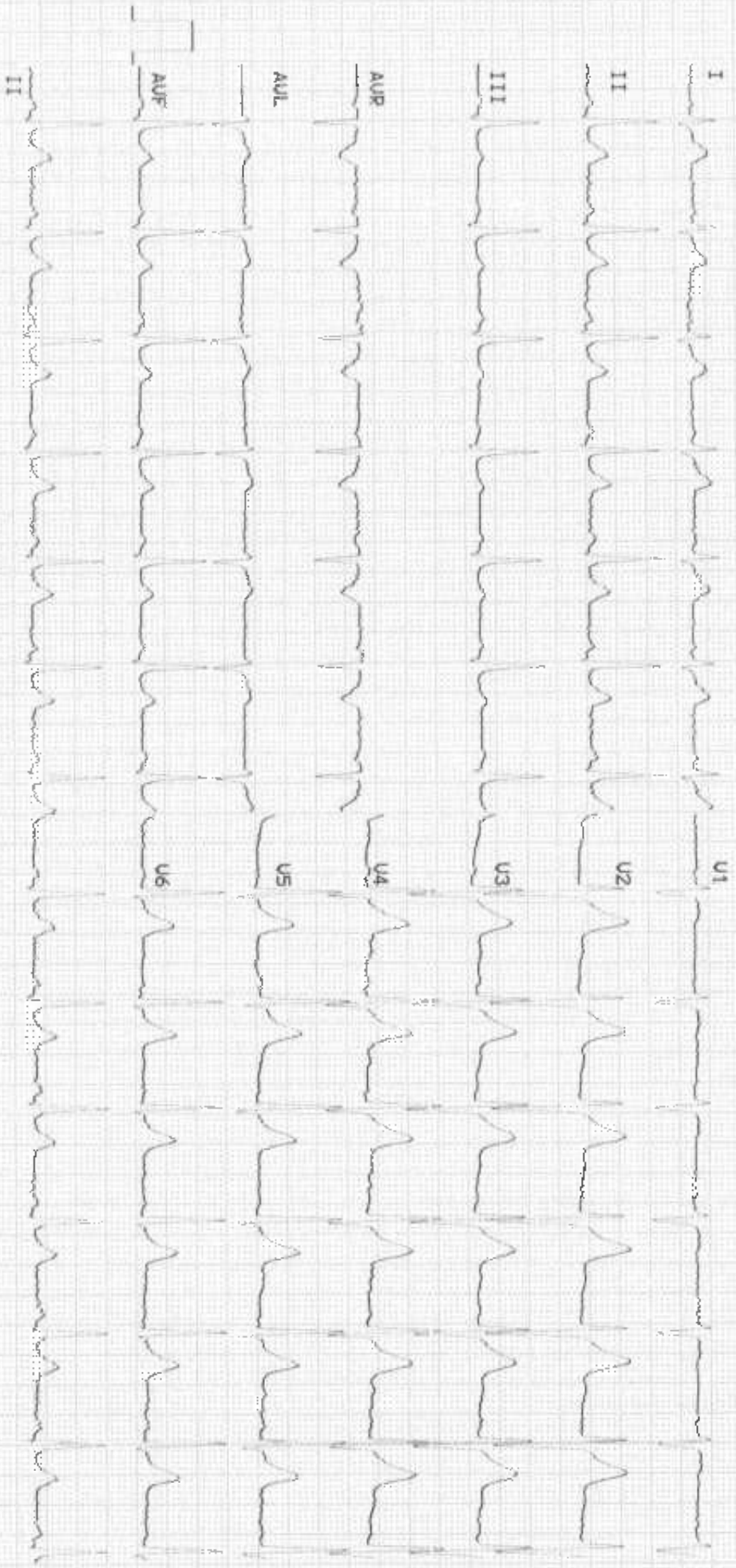


Interpretation:

Normal sinus rhythm

[Handwritten signature]

Unconfirmed report.



Patient Name : Mr. KISHORE KOLLI
UHID : CKOR.0000250990
Reported By : Dr. TOBY ABRAHAM THOMAS
Referred By : SELF

Age : 34 Y/M
OP Visit No : CKOROPV398944
Conducted Date : 11-02-2024 10:51

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 81 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

Dr. TOBY ABRAHAM THOMAS
CONSULTANT

NOTE:KINDLY TAKE A PHOTOCOPY OF THE GRAPH
FOR FUTURE REFERENCE IF NEEDED.

----- END OF THE REPORT -----



Patient Name	: Mr. KISHORE KOLLI	Age/Gender	: 34 Y/M
UHID/MR No.	: CKOR.0000250990	OP Visit No	: CKOROPV398944
Sample Collected on	:	Reported on	: 10-02-2024 14:57
LRN#	: RAD2232424	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobE7696		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION : NORMAL STUDY.

Dr. VINOD P JOSEPH
MBBS, DNB, DMRD
Radiology

Patient Name	: Mr. KISHORE KOLLI	Age/Gender	: 34 Y/M
UHID/MR No.	: CKOR.0000250990	OP Visit No	: CKOROPV398944
Sample Collected on	:	Reported on	: 10-02-2024 16:48
LRN#	: RAD2232424	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobE7696		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver is normal in size and shows normal echotexture. No biliary dilatation. There is a 1.3X1.1 cm hyperechoic lesion.

CBD is not dilated. **Portal vein** is normal in size, course and calibre.

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IMPRESSION: FOCAL LESION RIGHT LOBE OF LIVER SUGGESTIVE OF A HEMANGIOMA.

GALL BLADDER POLYP.

NON OBSTRUCTIVE RIGHT RENAL CALCULUS.



Patient Name : Mr. KISHORE KOLLI

Age/Gender : 34 Y/M

DR VINOD JOSEPH DNB,DMRD
RADIOLOGIST

Dr. VINOD P JOSEPH
MBBS, DNB, DMRD
Radiology

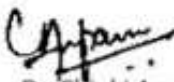
Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 10:21AM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 01:10PM
UHID/MR No : CKOR.000250990	Reported : 10/Feb/2024 04:02PM
Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

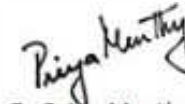
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	10.5	g/dL	13-17	Spectrophotometer
PCV	32.30	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.09	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	63.6	fL	83-101	Calculated
MCH	20.7	pg	27-32	Calculated
MCHC	32.6	g/dL	31.5-34.5	Calculated
R.D.W	17	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,480	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	61.9	%	40-80	Electrical Impedance
LYMPHOCYTES	30.3	%	20-40	Electrical Impedance
EOSINOPHILS	1.7	%	1-6	Electrical Impedance
MONOCYTES	5.9	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3392.12	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1660.44	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	93.16	Cells/cu.mm	20-500	Calculated
MONOCYTES	323.32	Cells/cu.mm	200-1000	Calculated
BASOPHILS	10.96	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	392000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: Show mild to moderate anisocytosis with microcytic hypochromic RBCs. Pencil, tear drop cells seen.


 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:BED240033888

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115B19)
 Regd. Office: 1-10-60/52, 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

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Address:
 123/100/123, Doddathurage Village, Neelabhi Main Road,
 Neelabhi Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


 1860 500 7788
 www.apolloclinic.com

Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 10:21AM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 01:10PM
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Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

DEPARTMENT OF HAEMATOLOGY

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

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

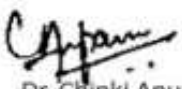
PLATELETS: appear adequate.

HEMOPARASITES: negative

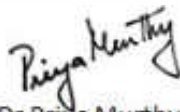
IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA

Note: Kindly evaluate for iron deficiency status.

Kindly correlate clinically.



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:BED240033888

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
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Address:
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Karnataka- 560034

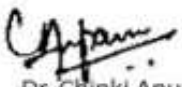
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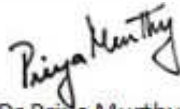
DEPARTMENT OF HAEMATOLOGY

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

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



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



Dr Priya Murthy
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Consultant Pathologist



SIN No:BED240033888

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Karnataka- 560034

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Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 10:21AM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 03:24PM
UHID/MR No : CKOR.0000250990	Reported : 10/Feb/2024 04:17PM
Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	91	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:

- 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.
- 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)	97	mg/dL	70-140	HEXOKINASE

Comment:

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

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.2	%		HPLC



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CONSULTANT BIOCHEMIST

SIN No:EDT240014995



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

ESTIMATED AVERAGE GLUCOSE (eAG)	131	mg/dL	Calculated
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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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)




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DEPARTMENT OF BIOCHEMISTRY

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


Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	191	mg/dL	<200	CHO-POD
TRIGLYCERIDES	71	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	152	mg/dL	<130	Calculated
LDL CHOLESTEROL	137.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	14.2	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 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.65	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.24	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	1.41	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	74.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.03	g/dL	6.6-8.3	Biuret
ALBUMIN	4.79	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.24	g/dL	2.0-3.5	Calculated
A/G RATIO	2.14		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:

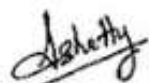
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.
- Disproportionate increase in AST, ALT compared with ALP.
- Bilirubin may be elevated.
- AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson'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.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.80	mg/dL	0.67-1.17	Jaffe's, Method
UREA	17.90	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.08	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.90	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.61	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.8	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	109	mmol/L	101-109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	20.00	U/L	<55	IFCC



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DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.41	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.91	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.530	µIU/mL	0.34-5.60	CLIA

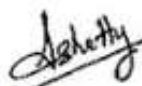
Comment:

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	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma




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DEPARTMENT OF IMMUNOLOGY

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M.B.B.S,M.D(Biochemistry)
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SIN No:SPL24022339



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APOLLO CLINICS NETWORK

Telangana: **Hyderabad** (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakurta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** **Vizag** (Seethamma Peta) | **Karnataka:** **Bangalore** (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamil Nadu:** **Chennai** (Annamalai | Kotturpuram | Moggappair | T.Nagar) | **Volasarakkam** | **Velachery** | **Maharashtra:** **Pune** (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** **Ghaziabad** (Indrapuram) | **Gujarat:** **Ahmedabad** (Satellite) | **Punjab:** **Amritsar** (Court Road) | **Haryana:** **Faridabad** (Railway Station Road)

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Neelabari Nagar, Electronic city, Bengaluru,
Karnataka- 560034

 **1860 500 7788**
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Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 10:12AM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 02:49PM
UHID/MR No : CKOR.0000250990	Reported : 10/Feb/2024 04:44PM
Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

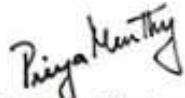
DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		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	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
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



Dr. Shobha Emmanuel
M.B.B.S., M.D (Pathology)
Consultant Pathologist



Dr. Priya Murthy
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Consultant Pathologist



SIN No: UR2279834

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APOLLO CLINICS NETWORK

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Karnataka - 560034

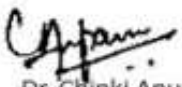
 **1860 500 7788**
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Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 02:49PM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 05:36PM
UHID/MR No : CKOR.0000250990	Reported : 10/Feb/2024 08:50PM
Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

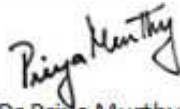
DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick



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



Dr. Priya Murthy
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Consultant Pathologist



SIN No:UPP016558

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Patient Name : Mr.KISHORE KOLLI	Collected : 10/Feb/2024 10:12AM
Age/Gender : 34 Y 7 M 10 D/M	Received : 10/Feb/2024 02:49PM
UHID/MR No : CKOR.0000250990	Reported : 10/Feb/2024 04:36PM
Visit ID : CKOROPV398944	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobE7696	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

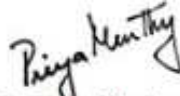
*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR

Page 14 of 14



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



SIN No: UF010548

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