

Patient Name : Mr. Deepak C Gupta Age/Gender : 42 Y/M

UHID/MR No.: STAR.0000065293OP Visit No: STAROPV73211Sample Collected on: 14-09-2024 14:17

Ref Doctor : SELF

Emp/Auth/TPA ID : A-706752009610

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

Dr. VINOD SHETTY

Radiology



: Mr.DEEPAK C GUPTA

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Collected

: 14/Sep/2024 08:30AM

Received

: 14/Sep/2024 09:52AM

Reported

: 14/Sep/2024 11:11AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

: Dr.SELF

Methodology: Microscopic

RBC : Normocytic normochromic

WBC: Normal in number, morphology and distribution. No abnormal cells seen

Platelets: Adequate on smear.

Parasites: No Haemoparasites seen

IMPRESSION: Normocytic normochromic blood picture

Note/Comment : Please Correlate clinically

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 1 of 9



SIN No:BED240227613

Apollo Speciality Hospitals Private Limited

(Formely known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

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DEPARTMENT OF HAEMATOLOGY ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM, WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.2	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	45.50	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	5.27	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	86.4	fL	83-101	Calculated
MCH	27	pg	27-32	Calculated
MCHC	31.2	g/dL	31.5-34.5	Calculated
R.D.W	13.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,490	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUN	IT (DLC)			
NEUTROPHILS	59	%	40-80	Electrical Impedance
LYMPHOCYTES	32	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	07	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3829.1	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2076.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	129.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	454.3	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.84		0.78- 3.53	Calculated
PLATELET COUNT	276000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				
Mothodology Microscopio				

Methodology: Microscopic

RBC: Normocytic normochromic

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DR. APEKSHA MADAN MBBS, DPB PATHOLOGY

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ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

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DR. APEKSHA MADAN MBBS, DPB

PATHOLOGY SIN No:BED240227613

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Sponsor Name : A

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTO	OR , WHOLE BLOOD EDT	A		
BLOOD GROUP TYPE	В			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 4 of 9



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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - 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.

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 5 of 9



SIN No:PLF02207021

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Ref Doctor

Visit ID

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Emp/Auth/TPA ID

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Collected

: 14/Sep/2024 11:21AM

Received

: 14/Sep/2024 11:32AM

Reported

: 14/Sep/2024 12:08PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	101	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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SIN No:PLP1485579

Apollo Speciality Hospitals Private Limited

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Sponsor Name

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	18	U/L	4-44	JSCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL , SERUM	0.30	mg/dL	0.1-1.2	Azobilirubin
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN/CREATININE RATIO, SERUM				
BLOOD UREA NITROGEN	7.9	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.84	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	9.40			Calculated
Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.84	mg/dL	0.6-1.1	ENZYMATIC METHOD



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SIN No:SE04824632

Apollo Speciality Hospitals Private Limited

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE), URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Physical Measuremen
рН	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	TRACE		NEGATIVE	Protein Error Of Indicator
GLUCOSE	NEGATIVE		NEGATIVE	Glucose Oxidase
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Azo Coupling Reactio
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium Nitro Prusside
UROBILINOGEN	NORMAL		NORMAL	Modifed Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET N	MOUNT AND MICROSCOPY			
PUS CELLS	20-25 with clumps	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	Microscopy
RBC	Occasional	/hpf	0-2	Microscopy
CASTS	, NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy

Kindly correlate clinically.

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. APEKSHA MADAN MBBS, DPB PATHOLOGY

SIN No:UR2412016

Apollo Speciality Hospitals Private Limited

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CIN- U85100TG2009PTC099414

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

*** End Of Report ***

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY Page 9 of 9



CINI No:LID2412016

Apollo Speciality Hospitals Private Limited

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CIN- U85100TG2009PTC099414

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TERMS AND CONDITIONS GOVERNING THIS REPORT

The reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitations of technologies.

Laboratories not be responsible for any interpretation whatsoever.

It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of the particulars have been cleared out by the patient or his / her representative at the point of generation of said specimen.

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.

Assays are performed in accordance with standard procedures, The reported results are dependent on individual assay methods / equipment used and quality of specimen received.

This report is not valid for medico legal purposes.

DR. APEKSHA MADAN MBBS, DPB PATHOLOGY SIN No:UR2412016





Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd) F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that Mr. Deepak Gupta aged, 42yr. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: Mumbai

Date: 14/09/2024

Name & Signature of

Medical officer