

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 12:11PM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 02:51PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	14.8	g/dL	13-17	Spectrophotometer
PCV	42.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.76	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	90	fL	83-101	Calculated
MCH	31.2	pg	27-32	Calculated
MCHC	<b>34.6</b>	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,530	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	49.7	%	40-80	Electrical Impedance
LYMPHOCYTES	32.6	%	20-40	Electrical Impedance
EOSINOPHILS	<b>9.3</b>	%	1-6	Electrical Impedance
MONOCYTES	7.1	%	2-10	Electrical Impedance
BASOPHILS	1.3	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3742.41	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2454.78	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	<b>700.29</b>	Cells/cu.mm	20-500	Calculated
MONOCYTES	534.63	Cells/cu.mm	200-1000	Calculated
BASOPHILS	97.89	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.52		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	150000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	2	mm at the end of 1 hour	0-15	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

**RBC's are Normocytic Normochromic**  
**WBC's Mild Eosinophilia**  
**Platelets are Adequate**  
**No hemoparasite seen.**

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist  
SIN No:BED240087178



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.MAHESH VIJAY NAZARE  
Age/Gender : 50 Y 3 M 18 D/M  
UHID/MR No : SPUN.0000047073  
Visit ID : SPUNOPV62532  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 85678

Collected : 29/Mar/2024 09:54AM  
Received : 29/Mar/2024 12:11PM  
Reported : 29/Mar/2024 02:51PM  
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 Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:BED240087178



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 12:11PM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 03:02PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF HAEMATOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist  
SIN No:BED240087178



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.NO.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 12:11PM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 02:02PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GLUCOSE, FASTING , NAF PLASMA</b>	<b>104</b>	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
<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b>	<b>85</b>	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
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	105	mg/dL		Calculated

**Comment:**

Page 4 of 14

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240040442



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.No.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE  
Age/Gender : 50 Y 3 M 18 D/M  
UHID/MR No : SPUN.0000047073  
Visit ID : SPUNOPV62532  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 85678

Collected : 29/Mar/2024 09:54AM  
Received : 29/Mar/2024 12:11PM  
Reported : 29/Mar/2024 02:02PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF BIOCHEMISTRY**

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

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)

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:EDT240040442



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.MAHESH VIJAY NAZARE  
Age/Gender : 50 Y 3 M 18 D/M  
UHID/MR No : SPUN.0000047073  
Visit ID : SPUNOPV62532  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 85678

Collected : 29/Mar/2024 09:54AM  
Received : 29/Mar/2024 10:58AM  
Reported : 29/Mar/2024 11:51AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	180	mg/dL	<200	CHO-POD
TRIGLYCERIDES	69	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	<b>39</b>	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	<b>140</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>126.61</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.78	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.59		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated

**Comment:**

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100; Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220
ATHEROGENIC INDEX(AIP)	<0.11	0.12 – 0.20	>0.21	

**Note:**

- 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.

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:SE04680578



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.No.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE  
Age/Gender : 50 Y 3 M 18 D/M  
UHID/MR No : SPUN.0000047073  
Visit ID : SPUNOPV62532  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 85678

Collected : 29/Mar/2024 09:54AM  
Received : 29/Mar/2024 10:58AM  
Reported : 29/Mar/2024 11:51AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF BIOCHEMISTRY**

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

- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dl. When Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:SE04680578



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.No.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 11:51AM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.64	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	20.96	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.1	U/L	<50	IFCC
ALKALINE PHOSPHATASE	40.42	U/L	30-120	IFCC
PROTEIN, TOTAL	<b>6.44</b>	g/dL	6.6-8.3	Biuret
ALBUMIN	3.79	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		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'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.

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:SE04680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.No.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.





Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 11:51AM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	1.01	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	17.84	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.90	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	<b>8.78</b>	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.72	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	143.15	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.5	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	108.79	mmol/L	101–109	ISE (Indirect)
PROTEIN, TOTAL	<b>6.44</b>	g/dL	6.6-8.3	Biuret
ALBUMIN	3.79	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		0.9-2.0	Calculated

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:SE04680578



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.No.284, Resale Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 11:51AM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	20.20	U/L	<55	IFCC

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:SE04680578



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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

Address:

P.No 9 & 10a, S.NO.284, Resale Chambers, Saras Baug Road, Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth, Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 12:24PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-iodothyronine (T3, TOTAL)	1.08	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.87	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	5.142	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



DR.Sanjay Ingle  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist



SIN No: SPL24059042

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as Apollo Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

P. No 9 & 10a, S.No.284, Reshmi Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 12:17PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b>	1.430	ng/mL	0-4	CLIA



DR.Sanjay Ingle  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist



SIN No:SPL24059042

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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

P.No 9 & 10a, S.NO.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 12:22PM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 12:43PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	<5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		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	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:UR2320029

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**  
(Formerly known as a Nova Speciality Hospitals Private Limited)  
CIN- U85100TG2009PTC099414  
Regd Off: 1-10-62/62, 5th Floor, Ashoka Raghupathi Chambers,  
Begumpet, Hyderabad, Telangana - 500016

Address:  
P.No 9 & 10a, S.NO.284, Resate Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.



Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 12:22PM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 12:44PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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

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

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

*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No:UF011551



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

**Apollo Speciality Hospitals Private Limited**

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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

Address:

P.No 9 & 10a, S.NO.284, Reside Chambers, Saras Baug Road,  
Vijayanagar Colony, Opp. Saras Play Ground, Sadashiv Peth,  
Pune, Maharashtra.

Customer Pending Tests  
Doctor Not available for dental Consultation.

Name : Mr. Mahesh Vijay Nazare

Age: 50 Y

UHID: SPUN.0000047073

Sex: M



Address : KEM Hospital Rasta PEth Pune 411011

OP Number: SPUNOPV62532

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN  
INDIA OP AGREEMENT

Bill No : SPUN-OCR-10604

Date : 29.03.2024 08:29

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
<del>1</del>	<del>GAMMA GLUTAMYL TRANSFERASE (GGT)</del>	
<del>2</del>	<del>PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)</del>	
<input checked="" type="checkbox"/>	2 D ECHO	
<del>4</del>	<del>LIVER FUNCTION TEST (LFT)</del>	
<del>5</del>	<del>GLUCOSE, FASTING</del>	
<del>6</del>	<del>HEMOGRAM + PERIPHERAL SMEAR</del>	
<input checked="" type="checkbox"/>	DIET CONSULTATION	
<input checked="" type="checkbox"/>	COMPLETE URINE EXAMINATION	
<del>9</del>	<del>URINE GLUCOSE (POST PRANDIAL) 11:15am</del>	
<input checked="" type="checkbox"/>	PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	ECG	
<del>12</del>	<del>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</del>	
<input checked="" type="checkbox"/>	DENTAL CONSULTATION	
<del>14</del>	<del>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 11:15am</del>	
<del>15</del>	<del>URINE GLUCOSE (FASTING)</del>	
<del>16</del>	<del>HbA1c, GLYCATED HEMOGLOBIN</del>	
<input checked="" type="checkbox"/>	X-RAY CHEST PA	
<input checked="" type="checkbox"/>	ENT CONSULTATION	
<input checked="" type="checkbox"/>	FITNESS BY GENERAL PHYSICIAN	
<del>20</del>	<del>BLOOD GROUP ABO AND RH FACTOR</del>	
<del>21</del>	<del>LIPID PROFILE</del>	
<input checked="" type="checkbox"/>	BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	OPHTHAL BY GENERAL PHYSICIAN	
<del>24</del>	<del>ULTRASOUND - WHOLE ABDOMEN</del>	
<del>25</del>	<del>THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)</del>	




## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mahesh Nazare on 29/03/2024

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>	<input type="checkbox"/>
<ul style="list-style-type: none"><li>• Currently Unfit. Review after _____ recommended</li></ul>	<input type="checkbox"/>
<ul style="list-style-type: none"><li>• Unfit</li></ul>	<input type="checkbox"/>

Dr. Samrat Shah   
General Physician  
Apollo Spectra Hospital Pune

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

**Dr. Samrat Shah**  
MBBS MD  
Reg No. 2021097302  
Consultant Internal Medicine  
Apollo Speciality Hospital

Date : 29/03/24  
MRNO :  
Name : Mahesh Nazare  
Age/Gender :  
Mobile No : 501m

Department : Gen Physician  
Consultant :  
Reg. No :  
Qualification : Dr. Samrat  
Consultation Timing : shah

SpO2 - 94%

Pulse: 50b/min	B.P: 138/68 mmHg	Resp: 20b/min	Temp: Afebrile
Weight: 80 Kg	Height: 172 cm	BMI: 27.1	Waist Circum:

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

Adh  
T-PSA

Adh  
tab Vasocel 200  
1-0-1 x 90

found fit to join duty

Follow up date: 3 month

**Dr. Samrat Shah**  
MBBS MD

Reg No. 2021097302  
Consultant Internal Medicine  
Apollo Speciality Hospital  
Doctor Signature

Date : 29/03/24  
 MRNO :  
 Name : Mahesh Nazare  
 Age/Gender :  
 Mobile No : 50 199

Department : ENT  
 Consultant :  
 Reg. No : Dr. Shivprakash  
 Qualification :  
 Consultation Timing : Mchta

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

General Examination / Allergies  
History

Clinical Diagnosis & Management Plan

ENT - NAD



Follow up date:

Doctor Signature

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:11PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 02:51PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	14.8	g/dL	13-17	Spectrophotometer
PCV	42.80	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.76	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	90	fL	83-101	Calculated
MCH	31.2	pg	27-32	Calculated
MCHC	34.6	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,530	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	49.7	%	40-80	Electrical Impedance
LYMPHOCYTES	32.6	%	20-40	Electrical Impedance
EOSINOPHILS	9.3	%	1-6	Electrical Impedance
MONOCYTES	7.1	%	2-10	Electrical Impedance
BASOPHILS	1.3	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3742.41	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2454.78	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	700.29	Cells/cu.mm	20-500	Calculated
MONOCYTES	534.63	Cells/cu.mm	200-1000	Calculated
BASOPHILS	97.89	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.52		0.78- 3.53	Calculated
PLATELET COUNT	150000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren

PERIPHERAL SMEAR

RBC's are Normocytic Normochromic  
WBC's Mild Eosinophilia  
Platelets are Adequate  
No hemoparasite seen.

Page 1 of 14



*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No: BED240087178

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:11PM
UHID/MR No	: SPUN 0000047073	Reported	: 29/Mar/2024 02:51PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF HAEMATOLOGY

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



  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SIN No: BED240087178

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VUJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:11PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 03:02PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



*Sneha Shah*  
  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist  
 SIN No:BED240087178

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 DM	Received	: 29/Mar/2024 12:11PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 02:02PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	104	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)	85	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	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	105	mg/dL		Calculated

**Comment:**

  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist  
 SIN No:EDT240040442



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:11PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 02:02PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85676		

DEPARTMENT OF BIOCHEMISTRY

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

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)



*Sneha Shah*  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist

SIN No: EDT240040442

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 10:58AM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 11:51AM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	180	mg/dL	<200	CHO-POD
TRIGLYCERIDES	69	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	140	mg/dL	<130	Calculated
LDL CHOLESTEROL	126.61	mg/dL	<100	Calculated
VLDL CHOLESTEROL	13.78	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.59		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated

**Comment:**

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100; Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220
ATHEROGENIC INDEX(AIP)	<0.11	0.12 - 0.20	>0.21	

**Note:**

- 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.

Page 6 of 14

*Sneha Shah*  
  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist

SIN No:SE04680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name : Mr.MAHESH VIJAY NAZARE  
Age/Gender : 50 Y 3 M 18 D/M  
UHID/MR No : SPUN.0000047073  
Visit ID : SPUNOPV62532  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 85678

Collected : 29/Mar/2024 09:54AM  
Received : 29/Mar/2024 10:58AM  
Reported : 29/Mar/2024 11:51AM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 400 mg/dl. When Triglycerides are more than 400 mg/dl LDL cholesterol is a direct measurement.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist  
SIN No: SED4680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 DIM	Received	: 29/Mar/2024 10:58AM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 11:51AM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/AUTH/TPA ID	: 85678		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.64	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.49	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	20.96	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.1	U/L	<50	IFCC
ALKALINE PHOSPHATASE	40.42	U/L	30-120	IFCC
PROTEIN, TOTAL	6.44	g/dL	6.6-8.3	Biuret
ALBUMIN	3.79	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		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.



*Sneha Shah*  
  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist  
 SIN No:SE04680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 10:58AM
UHID/MR No	: SPUN 0000047073	Reported	: 29/Mar/2024 11:51AM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

**DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	1.01	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	17.84	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.90	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	<b>8.78</b>	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.72	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	143.15	mmol/L	136-146	ISE (Indirect)
POTASSIUM	3.5	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	108.79	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	<b>6.44</b>	g/dL	6.6-8.3	Biuret
ALBUMIN	3.79	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.65	g/dL	2.0-3.5	Calculated
A/G RATIO	1.43		0.9-2.0	Calculated



*Sneha Shah*  
Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist

SEN No:SE04680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name	: Mr MAHESH VJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 10:58AM
UHID/MR No	: SPUN 0000047073	Reported	: 29/Mar/2024 11:51AM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	20.20	U/L	<55	IFCC



*Sneha Shah*  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist

SIN No:SE04680578

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mr.MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN 0000047073	Reported : 29/Mar/2024 12:24PM
Visit ID : SPUNOPV62532	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85678	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.08	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.87	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	5.142	µIU/mL	0.34-5.60	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

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



DR. Sanjay Ingle  
M.B.B.S, M.D (Pathology)  
Consultant Pathologist

SIN No: SPL 24059042

This test has been performed at Apollo Health and Lifestyle India - Saradha - Path - Pune, Diagnostics Lab



Patient Name : Mr MAHESH VIJAY NAZARE	Collected : 29/Mar/2024 09:54AM
Age/Gender : 50 Y 3 M 18 D/M	Received : 29/Mar/2024 10:58AM
UHID/MR No : SPUN.0000047073	Reported : 29/Mar/2024 12:17PM
Visit ID : SPUNOPV52532	Status : Final Report
Ref Doctor : Dr SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 85676	

**DEPARTMENT OF IMMUNOLOGY**

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

Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	1.430	ng/mL	0-4	CLIA




DR. Sanjay Ingle  
M.B.B.S, M.D(Pathology)  
Consultant Pathologist

SIN No: SPI 24059042

This test has been performed at Apollo Health and Lifestyle Ltd - Specialty Pathology, Diagnostics Lab

Patient Name	: Mr.MAHESH VIJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:22PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 12:43PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	<5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		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	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 13 of 14



Dr Sneha Shah  
MBBS, MD (Pathology)  
Consultant Pathologist  
SIN No:UR2320029



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name	: Mr.MAHESH VJAY NAZARE	Collected	: 29/Mar/2024 09:54AM
Age/Gender	: 50 Y 3 M 18 D/M	Received	: 29/Mar/2024 12:22PM
UHID/MR No	: SPUN.0000047073	Reported	: 29/Mar/2024 12:44PM
Visit ID	: SPUNOPV62532	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 85678		

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

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



*Sneha Shah*  
 Dr Sneha Shah  
 MBBS, MD (Pathology)  
 Consultant Pathologist

SIN No:UF011551

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

# Apollo Clinic

## CONSENT FORM

Patient Name: maresh Nazare Age: 50  
 UHID Number: ..... Company Name: BOB.

✓ I Mr/Mrs/Ms maresh Nazare Employee of Arcofem

(Company) Want to inform you that I am not interested in getting Dental consultation

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: Mahaan

Date: 29/03/2024

**2D ECHO / COLOUR DOPPLER**

**Name : Mahesh Vijay Nazare**  
**Ref by : HEALTH CHECKUP**

**Age : 50YRS / M**  
**Date : 29/03/2024**

LA – 32      AO – 26      IVS – 10      PW – 10  
LVIDD – 37      LVIDS - 25  
EF 60 %

Normal LV size and systolic function.  
No diastolic dysfunction  
Normal LV systolic function, LVEF 60 %  
No regional wall motion abnormality  
Normal sized other cardiac chambers.  
Mitral valve has thin leaflets with normal flow.  
Aortic valve has three thin leaflets with normal structure and function. No aortic regurgitation.No LVOT gradient  
Normal Tricuspid & pulmonary valves.  
No tricuspid regurgitation.  
PA pressures Normal  
Intact IAS and IVS.  
No clots, vegetations, pericardial effusion noted.

**IMPRESSION :**  
**NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.**  
**NO RWMA. NO PULMONARY HTN**  
**NO CLOTS/VEGETATIONS**

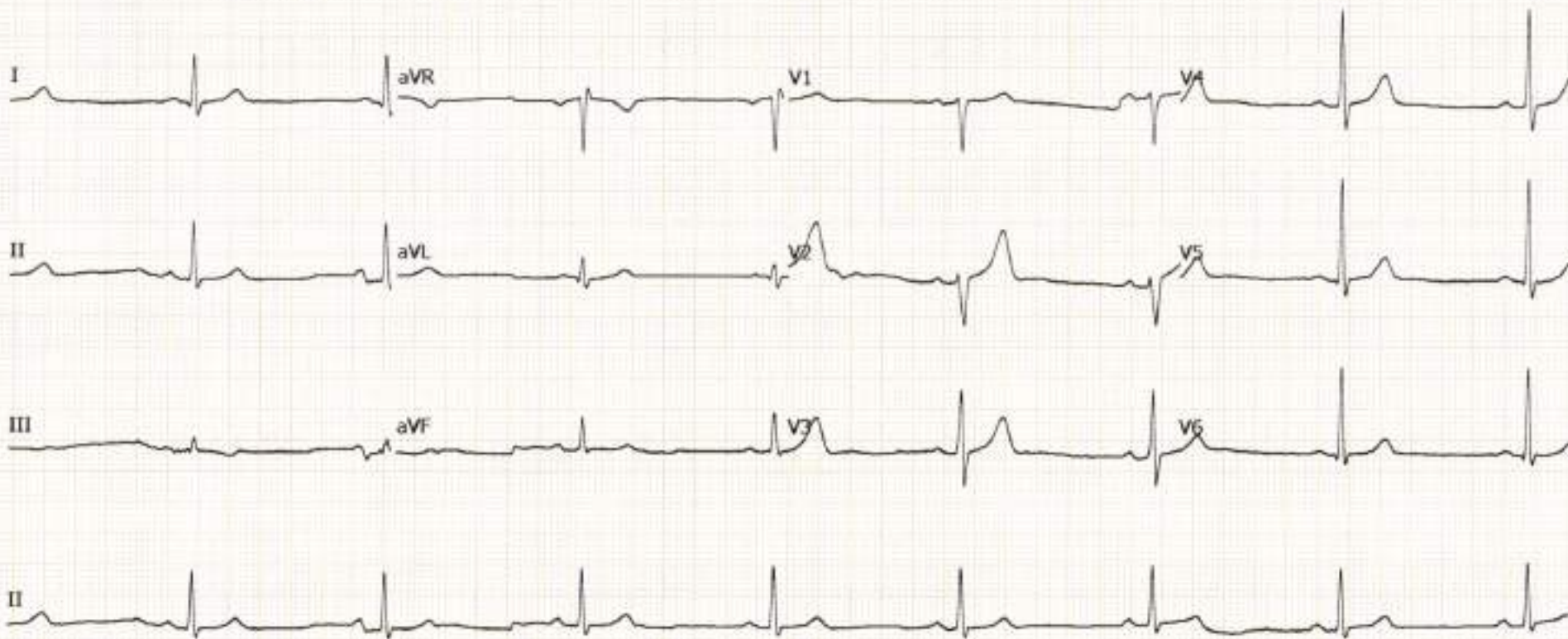
  
**DR.SAMRAT SHAH**  
**MD, CONSULTANT PHYSICIAN**

Male

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 88 ms  
QT / QTcBaz : 410 / 370 ms  
PR : 156 ms  
P : 106 ms  
RR / PP : 1220 / 1224 ms  
P / QRS / T : 38 / 48 / 21 degrees

Sinus bradycardia  
Otherwise normal ECG





Name	Mr Mahesh Vijay Nazare	Age	50 Years
Patient ID	DD/293/2023-2024/1646	Gender	MALE
Ref By	Dr. Apollo Spectra Hospital	Date	29/03/2024

### SONOGRAPHY OF ABDOMEN AND PELVIS

**The liver** appears normal in size, shape and echotexture. No focal lesion is seen. The hepatic venous radicals and intrahepatic biliary tree appear normal. The portal vein and CBD appears normal.

**The gall bladder** is normal in size with a normal wall thickness. Multiple 6 -7 mm calculi are noted. No signs of cholecystitis.

**The pancreas** appear normal in size and echotexture.

**The spleen** appears normal in size and echotexture.

**The right kidney** measures 10.7x5.4cms and **the left kidney** measures 9.7x4.2 cms. Both kidneys appear normal in size, shape & echotexture. There is no hydronephrosis or calculus seen on either side.

**The urinary bladder** distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is of normal thickness.  
Pre-void bladder volume : 130cc Post-void bladder volume :Insignificant

**The prostate** is enlarged and measures 3.8x3.8x3.3 cms (volume - 27cc) .No focal lesion is seen.

There is no free fluid or paraaortic lymphadenopathy seen.

#### IMPRESSION:

**Cholelithiasis without signs of choelcystitis.**  
**Prostatomegaly with insignificant post void.**

  
**Dr. Lalit Kumar S Deore**  
 MD(Radiology) (2001/04/1871)

# EYE REPORT



ASH/PUN/OPHTH/06/02-0216

Name: Mr. Mahesh Nazare

Date: 29/03/24

Age / Sex: 50 y / M

Ref No.:

Complaint: No complaints

**Examination**

No DM  
No HTN

aided Vision   
 R 6/6 N60   
 L 6/6 N60

**Spectacle Rx**

Add

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	-1.50	-0.25	90°	6/6	-1.00	-0.50	80°
Read	+2.00	—	—	N6	+2.00	—	—	N6
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

**Remarks:**

WNL

PGP   
 R -1.50 | -0.25 x 100°   
 L -1.00 | -0.50 x 60°

Add +1.75 (BE)

Medications: BE colour vision Normal.

Trade Name	Frequency	Duration

Follow up: 1 yrs

Consultant:

**Apollo Spectra Hospitals**

Opp. Saras Sports Ground, Saras Baug, Sadashiv Peth, Pune, Maharashtra- 411030  
Ph : 020 67206500 | Fax: 020 67206523 | www.apollospectra.com

Patient Name:	MR. MAHESH NAZARE 50Y	MR No:	SPUN.DD-17473
Age:	50 Years	Location:	Apollo Spectra Hospital, Pune (Swargate)
Gender:	M	Physician:	SELF
Image Count:	1	Date of Exam:	29-Mar-2024
Arrival Time:	29-Mar-2024 09:48	Date of Report:	29-Mar-2024 10:06

### X-RAY CHEST PA VIEW

#### FINDINGS

Normal heart and mediastinum.

There is no focal pulmonary mass lesion is seen.

No collapse or consolidation is evident.

The apices, costo and cardiophrenic angles are free.

No hilar or mediastinal lymphadenopathy is demonstrated.

There is no pleural or pericardial effusion.

No destructive osseous pathology is evident.

**IMPRESSION:** No significant abnormality is seen.



Dr. Santhosh Kumar DMRD, DNB  
Consultant Radiologist  
Reg.No: 59248

#### CONFIDENTIALITY:

This transmission is confidential. If you are not the intended recipient, please notify us immediately. Any disclosure, distribution or other action based on the contents of this report may be unlawful.

#### PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

Appointment Id	Corporate Name	Name	Email Id	Mobile	Agreement
121058	ARCOFEMI HEALTHCARE LIMITED	MS NAZARE DEEPAI	maheshdeepali1998@gmail.com	7040548039	ARCOFEMI MEDIWHEEL FEMALE AHC
120891	ARCOFEMI HEALTHCARE LIMITED	mahesh nazare	maheshdeepali1998@gmail.com	7040548039	ARCOFEMI MEDIWHEEL MALE AHC CR



भारत सरकार  
Government of India

महेश विजय नाडरे  
Mahesh Vijay Nazare  
जन्म तारीख / DOB: 11/12/1973  
पुरुष / MALE

5289 3911 1350

मेरा आधार, मेरी पहचान



भारतीय एकिकृत पहचान प्राधिकरण  
Unique Identification Authority of India

पिन कोड: 5289 3911 1350

जन्म, ११/१२/७३ को नजदीक को हावेली पुणे  
पि. पुं. सिटी, पुणे, महाराष्ट्र, ४११०११

Address: S/O Vijay Nazare, near  
K.T. M Hospital, 154 maha path mahadi,  
shree hoo soc pune 11, Pune City, Pune,  
Maharashtra, 411011

5289 3911 1350

1347 help@uidai.gov.in www.uidai.gov.in

