

Patient Name : Mr.JUGAL KISHORE	Collected : 28/Sep/2024 11:40AM
Age/Gender : 59 Y 4 M 27 D/M	Received : 28/Sep/2024 01:00PM
UHID/MR No : CAOP.0000001920	Reported : 28/Sep/2024 02:14PM
Visit ID : CAOPOPV02434	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E33107	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.3	g/dL	13-17	Spectrophotometer
PCV	41.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.87	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	85	fL	83-101	Calculated
MCH	29.5	pg	27-32	Calculated
MCHC	34.7	g/dL	31.5-34.5	Calculated
R.D.W	14.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	50	%	40-80	Electrical impedance / Microscopic
LYMPHOCYTES	42	%	20-40	Electrical impedance / Microscopic
EOSINOPHILS	03	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical impedance / Microscopic
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3650	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	3066	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	219	Cells/cu.mm	20-500	Calculated
MONOCYTES	365	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.19		0.78- 3.53	Calculated
PLATELET COUNT	173000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				
RBCs	Predominantly Normocytic Normochromic			
WBCs	Are essentially unremarkable. No abnormal cells seen.			

Page 1 of 14



Dr. Shivangi Chauhan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: AOP240903958

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:

D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennai.600 102, Phone - 044-26224504 / 05



APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | 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) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | 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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Platelets	Adequate in number, verified on smear
	No Hemoparasites seen in smears examined.
Impression	Normal peripheral smear study
Advice	Clinical correlation



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M.B.B.S., M.D (Pathology)
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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Gel agglutination
Rh TYPE	POSITIVE			Gel agglutination



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Patient Name : Mr.JUGAL KISHORE	Collected : 28/Sep/2024 04:37PM
Age/Gender : 59 Y 4 M 27 D/M	Received : 28/Sep/2024 05:13PM
UHID/MR No : CAOP.0000001920	Reported : 28/Sep/2024 06:14PM
Visit ID : CAOPOPV02434	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	100	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia


Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
2. Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	177	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.



Dr. Shivangi Chauhan
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	6.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	146	mg/dL		Calculated


Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

- 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)



Dr. Shivangi Chauhan
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



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Patient Name : Mr.JUGAL KISHORE	Collected : 28/Sep/2024 11:40AM
Age/Gender : 59 Y 4 M 27 D/M	Received : 28/Sep/2024 06:14PM
UHID/MR No : CAOP.0000001920	Reported : 28/Sep/2024 06:51PM
Visit ID : CAOPOPV02434	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	160	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	157	mg/dL	<150	
HDL CHOLESTEROL	24	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	136	mg/dL	<130	Calculated
LDL CHOLESTEROL	104.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	31.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	6.67		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.46		<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

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



Dr. Shivangi Chauhan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.30	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.20	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	34	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	33.0	U/L	8-38	JSCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.0		<1.15	Calculated
ALKALINE PHOSPHATASE	161.00	U/L	32-111	IFCC
PROTEIN, TOTAL	8.30	g/dL	6.7-8.3	BIURET
ALBUMIN	4.30	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	4.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.07		0.9-2.0	Calculated

Comment:

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

1. Hepatocellular Injury:

*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
 *ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 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. ALP elevation also seen in pregnancy, impacted by age and sex.
 *Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.86	mg/dL	0.6-1.1	ENZYMATIC METHOD
UREA	31.90	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	14.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.90	mg/dL	4.0-7.0	URICASE
CALCIUM	9.00	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.10	mg/dL	2.6-4.4	PNP-XOD
SODIUM	138	mmol/L	135-145	Direct ISE
POTASSIUM	5.0	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	101	mmol/L	98-107	Direct ISE
PROTEIN, TOTAL	8.30	g/dL	6.7-8.3	BIURET
ALBUMIN	4.30	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	4.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.08		0.9-2.0	Calculated



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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	26.00	U/L	16-73	Glycylglycine Kinetic method



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SIN No: AOP240903959
Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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Address:
D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennai.600 102,
Phone - 044-26224504 / 05



APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | 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) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | 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)

Patient Name : Mr.JUGAL KISHORE	Collected : 28/Sep/2024 11:40AM
Age/Gender : 59 Y 4 M 27 D/M	Received : 28/Sep/2024 07:05PM
UHID/MR No : CAOP.0000001920	Reported : 28/Sep/2024 08:55PM
Visit ID : CAOPOPV02434	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E33107	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	0.63	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.85	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.181	µIU/mL	0.38-5.33	CLIA

Result is rechecked. Kindly correlate clinically.

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



Dr Nidhi Sachdev
M.B.B.S,MD(Pathology)
Consultant Pathologist



SIN No:AOP240903963
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Visit ID	: CAOPOPV02434	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22E33107		

DEPARTMENT OF IMMUNOLOGY

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

N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



Dr Nidhi Sachdev
M.B.B.S,MD(Pathology)
Consultant Pathologist



SIN No:AOP240903963
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Patient Name : Mr.JUGAL KISHORE
Age/Gender : 59 Y 4 M 27 D/M
UHID/MR No : CAOP.0000001920
Visit ID : CAOPOPV02434
Ref Doctor : Self
Emp/Auth/TPA ID : 22E33107

Collected : 28/Sep/2024 11:40AM
Received : 29/Sep/2024 01:58PM
Reported : 29/Sep/2024 03:41PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.510	ng/mL	0-4	CLIA



Dr. Matta Sujana Reddy
M.B.B.S,M.D(Biochemistry)

This **Consultant Biochemist**

Lifestyle Ltd - RRL ASHOK NAGAR

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Patient Name : Mr.JUGAL KISHORE	Collected : 28/Sep/2024 11:40AM
Age/Gender : 59 Y 4 M 27 D/M	Received : 28/Sep/2024 12:41PM
UHID/MR No : CAOP.0000001920	Reported : 28/Sep/2024 01:48PM
Visit ID : CAOPOPV02434	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E33107	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	Protein Error Of Indicator
GLUCOSE	NEGATIVE		NEGATIVE	Glucose Oxidase
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Azo Coupling Reaction
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium Nitro Prusside
UROBILINOGEN	NORMAL		NORMAL	Modified Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-4	/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

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.



Dr. Shivangi Chauhan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



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SIN No: AOP240903961
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Emp/Auth/TPA ID : 22E33107	


DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***



Dr. Shivangi Chauhan
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

SIN No: AOP240903960

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Patient Name : Mr.JUGAL KISHORE
Age/Gender : 59 Y 4 M 27 D/M
UHID/MR No : CAOP.0000001920
Visit ID : CAOPPV02434
Ref Doctor : Self
Emp/Auth/TPA ID : 22E33107

Collected : 28/Sep/2024 11:40AM
Received : 28/Sep/2024 12:41PM
Reported : 28/Sep/2024 01:48PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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



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Patient Name	: Mr. JUGAL KISHORE	Age	: 59Yrs 5Mths
UHID	: CAOP.0000001920	OP Visit No.	: CAOPOPV02434
Printed On	: 30-09-2024 06:47 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E33107		

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

Liver is normal in size(14.4cm) and shows normal echotexture. No focal lesion seen in the liver. Intrahepatic bile ducts and portal radicals are normal in caliber.

Gall bladder is partially contracted, does not show any evidence of cholecystitis or cholelithiasis.

CBD is not dilated.

Portal vein is normal in caliber.

Both kidneys are of normal size (RK 9.8x 3.8 cm, LK 10.5x 4.9cm), shape and echo pattern. No growth or hydro nephrotic changes seen in either kidney. The parenchymal thickness is normal & cortico-medullary differentiation is well maintained.

Spleen is borderline enlarged in size (12.9cm) s/o splenomegaly

Pancreas visualized part appears normal.

No free fluid seen in the peritoneal cavity.

Urinary bladder is partially filled and shows no mural or intraluminal pathology.

Prostate is normal in Size(31x32x24mm), volume ~13cc and Shape. No focal lesion is seen.

IMPRESSION: -Borderline Splenomegaly

Please correlate clinically.

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

---End Of The Report---



Dr. SEEMA PRAJAPATI
MBBS MD Radio
DMC111002
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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GSTIN: 365AADCA0733E1Z8

Address:

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Patient Name	: Mr. JUGAL KISHORE	Age	: 59Yrs 5Mths
UHID	: CAOP.0000001920	OP Visit No.	: CAOPOPV02434
Printed On	: 30-09-2024 08:29 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E33107		

DEPARTMENT OF CARDIOLOGY

Echocardiography Report

Summary of 2D echo

Baseline echocardiography revealed:

No chamber enlargement seen.
No RWMA.
LVEF - 60%
Grade I diastolic Dysfunction. (E<A)
Good RV function
No MR
Trace TR, NORMAL RVSP
No thrombus detected.
No Pericardial effusion seen.
IVC shows normal inspiratory collapse.

Observations:-Dimensions

LVID d= 41.3 (34-47 mm)
LV IVS= 11.1 (8-11mm)
Pw d = 11.7 (8-11mm)
Ao = 25.2 (18-36mm)
LA = 31.9 (26-37mm)
LVEF = 60% (55 +6.2%)

Mitral Valve - Normal

No MR

Aortic valve- SCLEROTIC

No AR

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 **1860 500 7788**

Tricuspid Valve -Normal

Trace TR

Pulmonary Valve-Normal

No PR

Impression:

NORMAL VALVE AND CHAMBERS

No RWMA

Normal LV systolic function (EF= 60%)

Grade I diastolic Dysfunction

No PAH

---End Of The Report---



Dr.RAJNI SHARMA
MBBS MD DM Cardiologist
DMC 22672
Cardiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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1860 500 7788

Patient Name	: Mr. JUGAL KISHORE	Age	: 59Yrs 5Mths
UHID	: CAOP.0000001920	OP Visit No.	: CAOPOPV02434
Printed On	: 30-09-2024 11:51 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E33107		

DEPARTMENT OF RADIOLOGY

Prominent of horizontal fissure of right lung.

Rest of the both lung fields and hila are normal.

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

Please correlate clinically and with lab. Investigations

---End Of The Report---



Dr. SEEMA PRAJAPATI
MBBS MD Radio
DMC111002
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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

APOLLO CLINICS NETWORK

Telangana: **Hyderabad** (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: **Vizag** (Seethamma Peta) | Karnataka: **Bangalore** (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: **Chennai** (Annanagar | Kotturpuram | T Nagar | Valasaravakkam | Velachery) | Maharashtra: **Pune** (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie | Kharadi) | Uttar Pradesh: **Ghaziabad** (Indrapuram)

GSTIN: 365AADCA0733E1Z8

Address:

#7-1-617/A, 615 & 616, Imperial Towers,
7th Floor; Ameerpet, Hyderabad, Telangana.



1860 500 7788

Patient Name	: Mr. JUGAL KISHORE	Age	: 59Yrs 5Mths
UHID	: CAOP.0000001920	OP Visit No.	: CAOPOPV02434
Printed On	: 30-09-2024 04:38 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E33107		

DEPARTMENT OF CARDIOLOGY

ECG

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 80 beats per minutes.
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

---End Of The Report---



Dr.RAJNI SHARMA
MBBS MD DM Cardiologist
DMC 22672
Cardiology

प्रति,

समन्वयक,
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. KISHORE JUGAL
क.कू.संख्या	48586
पदनाम	SENIOR OFFICE ASSISTANT
कार्य का स्थान	DELHI,MODEL TOWN
जन्म की तारीख	01-05-1965
स्वास्थ्य जांच की प्रस्तावित तारीख	20-09-2024
बुकिंग संदर्भ सं.	24S48586100114364E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 18-09-2024 से 31-03-2025 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-
(मुख्य महाप्रबंधक)
मा.सं.प्र. एवं विपणन
बैंक ऑफ़ बड़ौदा



(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.) से संपर्क करें।)



List of tests & consultations to be covered as part of Annual Health Check-up

S.No.	For Male	For Female
1	CBC	CBC
2	ESR	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	Lipid Profile	Lipid Profile
7	Total Cholesterol	Total Cholesterol
8	HDL	HDL
9	LDL	LDL
10	VLDL	VLDL
11	Triglycerides	Triglycerides
12	HDL/ LDL ratio	HDL/ LDL ratio
	Liver Profile	Liver Profile
13	AST	AST
14	ALT	ALT
15	GGT	GGT
16	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
17	ALP	ALP
18	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
	Kidney Profile	Kidney Profile
19	Serum Creatinine	Serum Creatinine
20	Blood Urea Nitrogen	Blood Urea Nitrogen
21	Uric Acid	Uric Acid
22	HBA1C	HBA1C
23	Routine Urine Analysis	Routine Urine Analysis
24	USG Whole Abdomen	USG Whole Abdomen
	General Tests	General Tests
25	X Ray Chest	X Ray Chest
26	ECG	ECG
27	2D/3D ECHO / TMT	2D/3D ECHO / TMT
28	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation



भारत सरकार
Government of India



जुगल किशोर
Jugal Kishore
जन्म तिथि/DOB: 01/05/1965
पुरुष/ MALE



6814 1763 5662

VID: 9185 9382 3004 0890

मेरा आधार, मेरी पहचान

Mr. Jyoti Bishnoi / 5948/M



Advanced Diagnostics Powered by AI

Height : 156 cm	Weight : 64 kg	BMI : 26.3	Waist Circum :
Temp : 98.1°F	Pulse : 84/mf	Resp : 20/mf	B.P : 150/100

General Examination / Allergies

History :-

Past His :- N/A
Surgical His :- N/A
Allergy :- Oflox 02
Family His :- F - HTN
M - HTN
Covid Vaccines :- 2 doses
Diet :- Mixed
Physical Activity :- Moderate
Menstruation His :-
Marital His :- Married, 2 kids
Addictions :- NO

Central health checkup
No Indigestion or Abdominal pain on/off
Abd pain on/off
CVS → S/S → ? gastritis
RS B/c AB →
CNS → conscious & alert
P/A → S/N/A →

ADVICE :-

① S. vit B₁₂, S. vit D.

APOLLO HEALTH AND LIFESTYLE LTD.
APOLLO ONE
Plot No. 3, Block No. 34, Metro Pillar No. 77
Pusa Road, WEA Karol Bagh
New Delhi-110005

Apollo One (Unit of Apollo Health and Lifestyle Ltd)
Plot no. 3, Block no. 34, Pusa Road, WEA, opposite metro pillar no. 77, Karol Bagh,
New Delhi - 110005. Contact Number 011- 40393610 / Helpline No: 1860 500 7788
Emergency: 1066 / Email: ApolloOnePusaRoad@apolloclinic.com

Registered Office: Apollo Health and Lifestyle Limited
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Ameerpet, Hyderabad-500038, U85110TG2000PLC115819

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MR. JUGAL KISHOR

Male 59Years

Req. No. :

HR : 80 bpm

P : 114 ms

PR : 175 ms

QRS : 104 ms

QT/QTcBz : 364/422 ms

P/QRST : 7/55/36 °

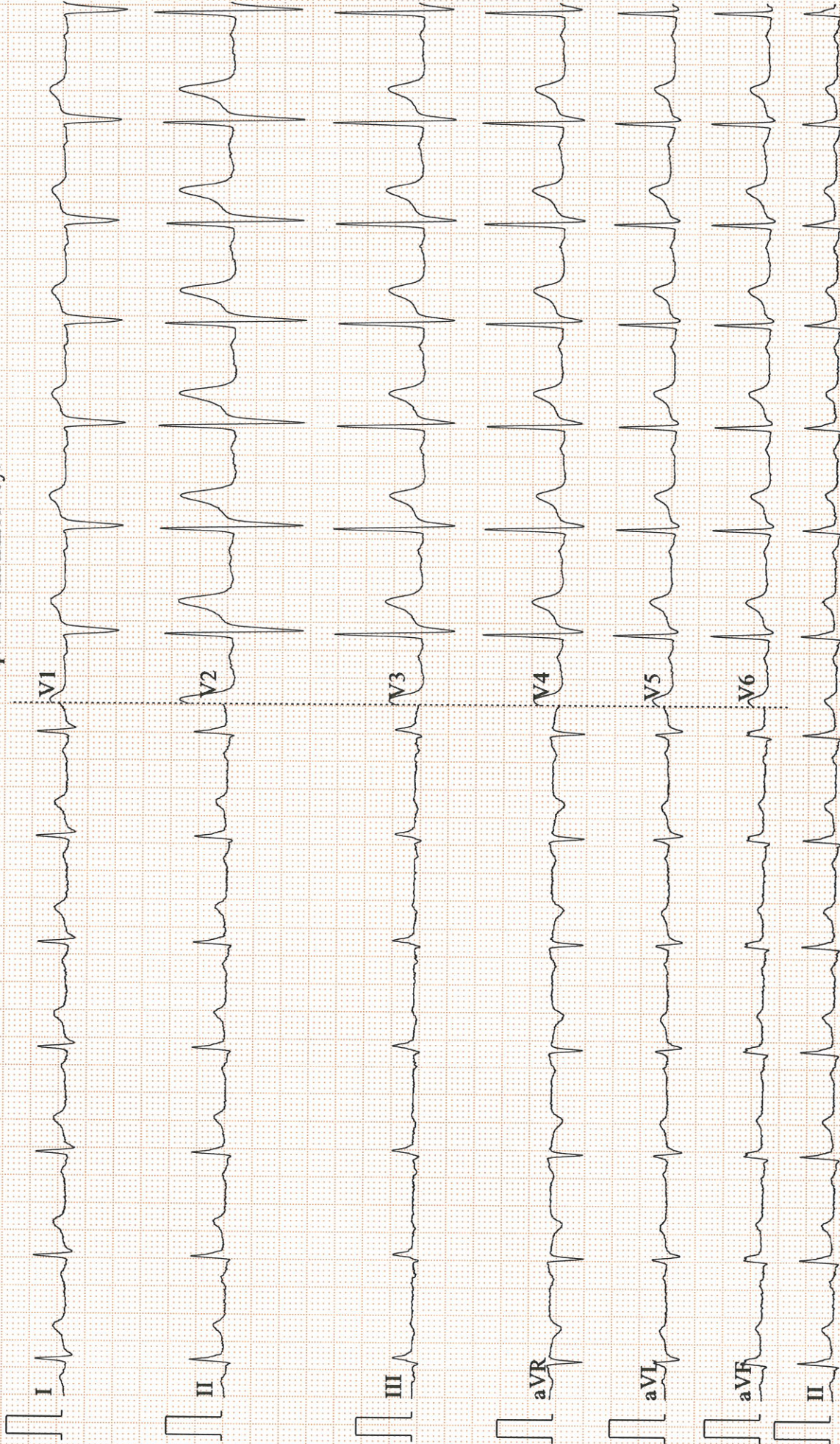
RV5SV1 : 1.033/0.998 mV

Diagnosis Information:

Sinus Rhythm

Normal ECG

Report Confirmed by:

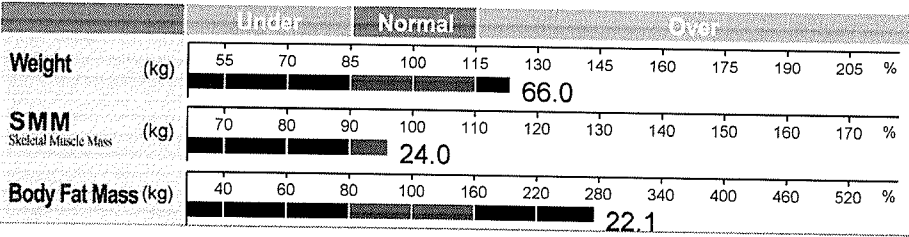


ID	Height	Age	Gender	Test Date / Time
caop0000001920	156cm	59	Male	28.09.2024. 14:26

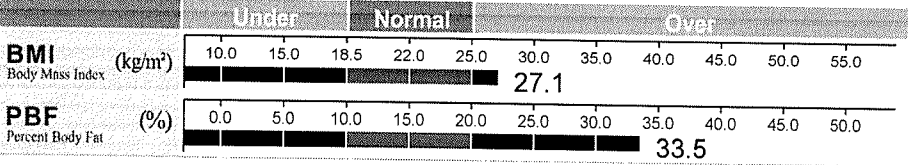
Body Composition Analysis

	Values	Total Body Water	Soft Lean Mass	Fat Free Mass	Weight
Total Body Water (L)	32.4 (30.1~36.7)	32.4	41.6 (38.7~47.3)	43.9 (41.0~50.1)	66.0 (45.5~61.5)
Protein (kg)	8.6 (8.1~9.9)				
Minerals (kg)	2.93 (2.78~3.40)	non-osseous			
Body Fat Mass (kg)	22.1 (6.4~12.9)				

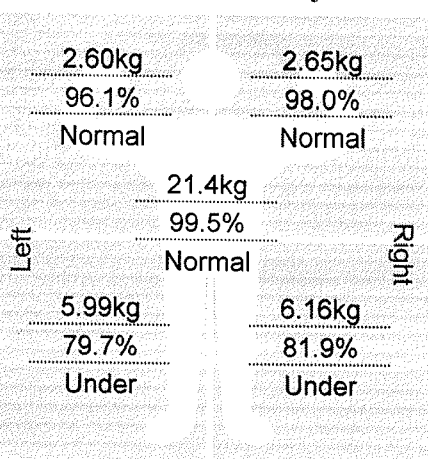
Muscle-Fat Analysis



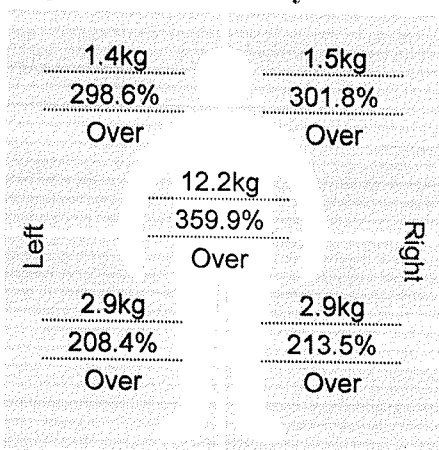
Obesity Analysis



Segmental Lean Analysis



Segmental Fat Analysis



* Segmental fat is estimated.

Body Composition History

	28.09.24 14:26			
Weight (kg)	66.0			
SMM (kg)	24.0			
PBF (%)	33.5			

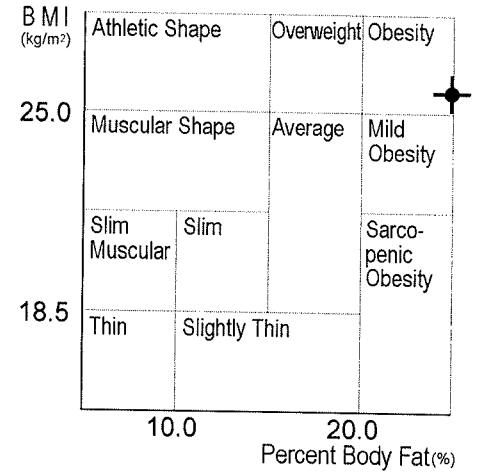
Recent Total

InBody Score

64/100 Points

* Total score that reflects the evaluation of body composition. A muscular person may score over 100 points.

Body Type



Weight Control

Target Weight	53.5 kg
Weight Control	- 12.5 kg
Fat Control	- 14.1 kg
Muscle Control	+ 1.6 kg

Obesity Evaluation

- BMI Normal Under Slightly Over Over
- PBF Normal Slightly Over Over

Body Balance Evaluation

- Upper Balanced Slightly Unbalanced Extremely Unbalanced
- Lower Balanced Slightly Unbalanced Extremely Unbalanced
- Upper-Lower Balanced Slightly Unbalanced Extremely Unbalanced

Research Parameters

Basal Metabolic Rate	1318 kcal	(1461~1703)
Waist-Hip Ratio	0.98	(0.80~0.90)
Visceral Fat Level	11	(1~9)
Obesity Degree	123 %	(90~110)
Bone Mineral Content	2.35 kg	(2.30~2.81)
SMI	7.1 kg/m²	
Recommended calorie intake	1700 kcal	

Impedance

	RA	LA	TR	RL	LL
Z _(Ω) 5 kHz	312.2	323.2	24.2	276.8	285.0
50 kHz	274.5	283.1	21.0	244.0	256.0
250 kHz	246.3	251.8	17.5	221.7	234.1

Dr. Rajeev Nangia

MBBS, MS (ENT)

Experience : 31 Years

JUGAL KISHORE

59x M

c/o Kod Heg
L & R

0/01
Gorb - Nand 5m's
Nand - N
Jho + Pharynx
Jy - Round SMT
Granular

R_s

- PTA / Injection
Aiduly

- Tab LC2 M

0 > 7pm


28/9/24

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Senior Consultant - Dental
BDS, MIDA, REG NO- A-12249
Specialized in Surgical, & Cosmetic procedures & Trauma
For Booking Call on - 9817966537
Days: - Mon to Sat
10AM to 5PM

Mr. Jugal Kishore .
59/M

ofc:- Gen. deposits ++
Stains ++
Calculus ++ .

R Adv.
→ Deep oral prophylaxis

Dr. Alveen
Signature:
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Eye Checkup

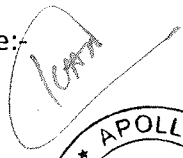
NAME: - Mr. Jugal Kishore

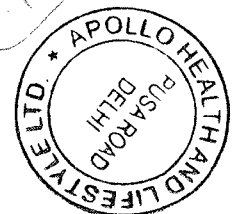
Age: - 59

Date: - 21/9/24

SELF / CORPORATE: -

	Right Eye	Left Eye
Distant Vision	+0.75/-0.75 x 3i	+0.75/+1.00 x 2i
Near vision	Add +1.50	Add +1.50
Color vision	OK	OK
Fundus examination		
Intraocular pressure		
Slit lamp exam		

Signature: 



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CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of

Mr. Jugal Kishore on 30/9/24.

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

	Tick
Medically Fit	<input checked="" type="checkbox"/>
<p>It Wit Restrictions Recommendations</p> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1. <u>Physician Refrance for ↑HbA_{1c} Level</u> <u>↑ cholesterol T₃ levels.</u> <u>Hypertension</u></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 <u>Normotensive BP < 140/90 mmHg</u></p> <p>Current <input checked="" type="checkbox"/> Unfit.</p>	
<p>Review after <u>all refrance done</u> recommended</p> <p>Unfit</p>	

Height: 158cm.

Weight: 64kg.

Blood Pressure : 150/100mmHg

Dr. [Signature]

Medical Officer

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 New Delhi-110005

This certificate is not meant for medico-legal purposes

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