


Patient Name	: Mr.PAWAN KUMAR THAMMI SETTY	Collected	: 29/Mar/2024 08:20AM
Age/Gender	: 36 Y 4 M 14 D/M	Received	: 29/Mar/2024 10:19AM
UHID/MR No	: CMYS.0000060284	Reported	: 29/Mar/2024 11:40AM
Visit ID	: CMYSOPV123987	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 115666		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

  
Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240086487



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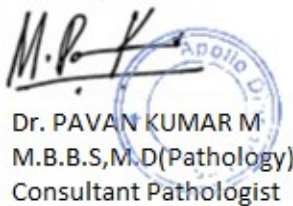
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	14.4	g/dL	13-17	Spectrophotometer
PCV	44.50	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.71	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	94	fL	83-101	Calculated
MCH	30.6	pg	27-32	Calculated
MCHC	32.4	g/dL	31.5-34.5	Calculated
R.D.W	<b>14.8</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,800	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	<b>33</b>	%	40-80	Electrical Impedance
LYMPHOCYTES	37.8	%	20-40	Electrical Impedance
EOSINOPHILS	<b>23</b>	%	1-6	Electrical Impedance
MONOCYTES	5.9	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	<b>1914</b>	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2192.4	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	<b>1334</b>	Cells/cu.mm	20-500	Calculated
MONOCYTES	342.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	17.4	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	0.87		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	279000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	11	mm at the end of 1 hour	0-15	Modified Westergren
<b>PERIPHERAL SMEAR</b>				

R.B.C: Majority are normocytic normochromic.

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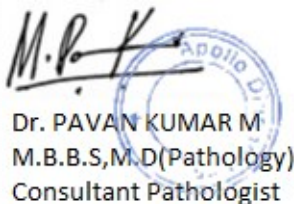
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324**

W.B.C: Are normal in number,morphology and increase in eosinophils.

Platelets: Adequate and are seen in singles and clumps.

Hemoparasites: Not seen.

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE WITH EOSINOPHILIA.**



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**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	98	mg/dl	74-106	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:

- 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)	82	mg/dl	70-140	GOD, POD

Result is rechecked. Kindly correlate clinically

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				

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SIN No:EDT240039991



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

HBA1C, GLYCATED HEMOGLOBIN	5.0	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	97	mg/dL	Calculated

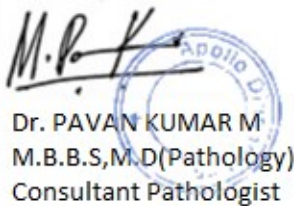
**Comment:**

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)



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	146	mg/dl	0-200	CHOD
TRIGLYCERIDES	55	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	41	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	105	mg/dL	<130	Calculated
LDL CHOLESTEROL	93.66	mg/dL	<100	Calculated
VLDL CHOLESTEROL	10.99	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.53		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.10		<0.11	Calculated

**Comment:**

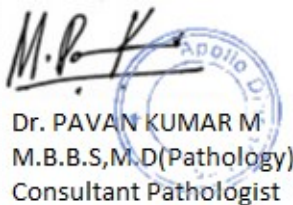
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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.

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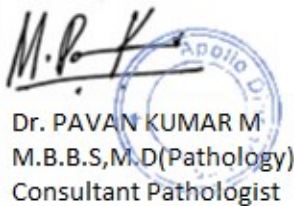


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- 3) Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 4) Low HDL levels are associated with coronary heart disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- 5) As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
- 6) VLDL, LDL Cholesterol Non-HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 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).



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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.89	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	<b>0.24</b>	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.65	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/l	0-35	IFCC
ALKALINE PHOSPHATASE	55.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	<b>6.20</b>	g/dl	6.4-8.3	Biuret
ALBUMIN	4.66	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	<b>1.54</b>	g/dL	2.0-3.5	Calculated
A/G RATIO	<b>3.03</b>		0.9-2.0	Calculated

**Comment:**

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

Common patterns seen:

**1. Hepatocellular Injury:**

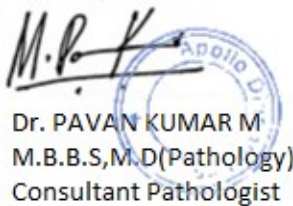
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.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

**2. Cholestatic Pattern:**

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

**3. Synthetic function impairment:**

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	0.99	mg/dL	0.67-1.17	Enzymatic colorimetric
UREA	13.44	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	6.3	mg/dl	6-20	Urease, UV
URIC ACID	4.60	mg/dL	3.5-7.2	Uricase
CALCIUM	9.88	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	4.29	mg/dl	2.7-4.5	Molybdate
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	<b>6.10</b>	g/dl	6.4-8.3	Biuret
ALBUMIN	4.66	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	<b>1.44</b>	g/dL	2.0-3.5	Calculated
A/G RATIO	<b>3.24</b>		0.9-2.0	Calculated



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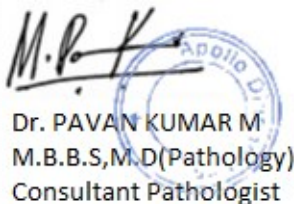


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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	12.00	U/l	0-55	IFCC



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DEPARTMENT OF IMMUNOLOGY

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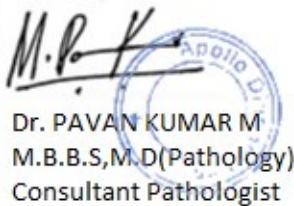
Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	0.88	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	6.35	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	2.840	µIU/mL	0.35-4.94	CMIA

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



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Consultant Pathologist

SIN No:SPL24058466

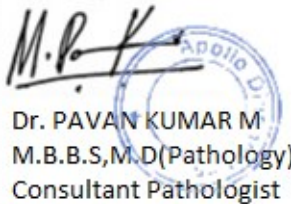


Patient Name : Mr.PAWAN KUMAR THAMMI SETTY	Collected : 29/Mar/2024 08:20AM
Age/Gender : 36 Y 4 M 14 D/M	Received : 29/Mar/2024 10:35AM
UHID/MR No : CMYS.0000060284	Reported : 29/Mar/2024 12:18PM
Visit ID : CMYSOPV123987	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 115666	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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	Bromothymol Blue
SP. GRAVITY	1.015		1.002-1.030	Dipstick
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	3 - 5	/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. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UR2319373



Patient Name : Mr.PAWAN KUMAR THAMMI SETTY	Collected : 29/Mar/2024 08:20AM
Age/Gender : 36 Y 4 M 14 D/M	Received : 29/Mar/2024 10:19AM
UHID/MR No : CMYS.0000060284	Reported : 29/Mar/2024 11:54AM
Visit ID : CMYSOPV123987	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 115666	

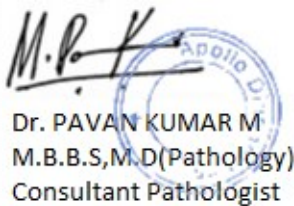
**DEPARTMENT OF CLINICAL PATHOLOGY**

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

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

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

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



Dr. PAVAN KUMAR M  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UF011504



Name : Mr. PAWAN KUMAR THAMMI SETTY

Age: 36 Y

UHID:CMYS.0000060284

Sex: M



OP Number:CMYSOPV123987

Address : MYSORE

 Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN  
 INDIA OP AGREEMENT

Bill No :CMYS-OCR-22871

Date : 29.03.2024 08:18

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
✓ 1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2 D ECHO — P	
✓ 3	LIVER FUNCTION TEST (LFT)	
✓ 4	GLUCOSE, FASTING	
✓ 5	HEMOGRAM + PERIPHERAL SMEAR	
✓ 6	DIET CONSULTATION → P	
✓ 7	COMPLETE URINE EXAMINATION	
✓ 8	URINE GLUCOSE(POST PRANDIAL) P	WF 53.4
✓ 9	PERIPHERAL SMEAR	
✓ 10	ECG	HF 161
✓ 11	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
✓ 12	DENTAL CONSULTATION	BA 110/80
✓ 13	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) P	
✓ 14	URINE GLUCOSE(FASTING)	
✓ 15	HbA1c, GLYCATED HEMOGLOBIN	
✓ 16	X-RAY CHEST PA	
✓ 17	ENT CONSULTATION — P	
✓ 18	FITNESS BY GENERAL PHYSICIAN — P	
✓ 19	BLOOD GROUP ABO AND RH FACTOR	
✓ 20	LIPID PROFILE	
✓ 21	BODY MASS INDEX (BMI)	
✓ 22	OPHAL BY GENERAL PHYSICIAN — P	
✓ 23	ULTRASOUND - WHOLE ABDOMEN — P	
✓ 24	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	



## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. pavan kumar Thammiset on 29/3/24

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

Dr. [Signature]  
 Medical Officer  
 The Apollo Clinic, Mysore

**Apollo Clinic**  
 #23, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/41

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

**Apollo Health and Lifestyle Limited**  
 (CIN: UR51107G2000PLC115819)  
 Regd. Office: 1-10-6/3-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016  
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 Koramangala | Sarjapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT  
**1860 500 7788**

Date : 29-03-2024  
 MR NO : CMYS.0000060284  
 Name : Mr. PAWAN KUMAR THAMMI SET  
 Age/ Gender : 36 Y / Male  
 Department : GENERAL [Ophthalmology]  
 Doctor :  
 Registration No :  
 Qualification :

Consultation Timing: 08:17

Height : 161	Weight : 53.6	BMI :	Waist Circum :
Temp : (N)	Pulse : 90/min	Resp : 20/min	B.P : 110/80

General Examination /  
Allergies History

dust allergy.

Clinical Diagnosis & Management Plan

All reports are WNL.  
 No H<sub>2</sub>O, T<sub>4</sub>, DM, HTN.  
 Not on any Rx  
 H<sub>2</sub>O dust allergy.

R̄ P̄ Ē C̄ K̄ L̄ Ē

R.S }  
 CVS } HAD.  
 PLA }

Follow up date :

Regular health check

Doctor Signature  
**Apollon Clinic**  
 # 29, 1st Floor,  
 Kalidasa Road, Mysore - 02  
 Ph : 0821-4006040/41

Date : 29-03-2024  
MR NO : CMYS.0000060284

Department : GENERAL  
Doctor :

Name : Mr. PAWAN KUMAR THAMMI SET  
Age/ Gender : 36 Y / Male

Registration No : H pawan kumar R  
Qualification : M.D. (ENT)

Consultation Timing: 08:17

Height : 161	Weight : 53.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Cause for middle ear pain

AR

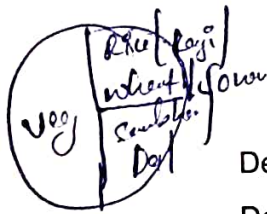
- Ear - Bilateral TM - (O)
- NOSE - nasal mucosa (O) pale
- and cavity in antrum - (O)
- with (O)

AR

Recur

Follow up date :

PC  
Doctor Signature  
**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41



Date : 29-03-2024  
MR NO : CMYS.0000060284

Department : GENERAL Dietetics  
Doctor : Madhura . B. P

Name : Mr. PAWAN KUMAR THAMMI SET  
Age/ Gender : 36 Y / Male

Registration No :  
Qualification : M.Sc Nutrition & Dietetics

Consultation Timing: 08:17

Height : 161	Weight : 53.4	BMI : 21 kg/m <sup>2</sup>	Waist Circum : 80
Temp :	Pulse :	Resp : 16	B.P : 110/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

1 kilo - constipation  
 -> Advised high calorie, high protein diet with fiber rich foods.  
 -> Dietary guidelines chart is given.

Follow up date :

Doctor Signature  
**Apollo Clinic**  
 # 23, 1st Floor,  
 Kalidasa Road, Mysore  
 Ph : 0821-4006040/41

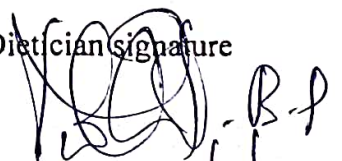
Department- Dietetics

Name- Madhura B P

Qualification- M.Sc Nutrition & Dietetic  
PhD\*

- Do not skip any of the meals, take small frequent meals.
- Include all variety of seasonal fruits, vegetables and green leafy vegetables on regular basis.
- Include nuts like Almond, Walnuts and dry-fruits like dried dates and raisins regularly.
- Include seeds like Flax seeds, Pumpkin seeds, Sunflower seeds, Sesame seeds and watermelon seeds- 1 teaspoon each and dry roasted.
- Avoid 5 white slow poisons like Sugar, Salt, Maida, Baking soda and creams.
- Cooking oil- ½ litre/person/month.
- Use combination of oils like Rice bran oil, Groundnut oil, Sesame oil, Mustard oil/ Coconut oil and Ghee. Change the oil every month or 2 months. But do not mix the oils.
- Drink at least 2-3 liters of water in a day.
- Skimmed or toned milk can be used on regular basis. Since it's a rich source of protein and low in calories.
- Avoid Butter, Vanaspati and Dalda.
- Avoid deep-fried foods, Biscuits, Cookies, Bakery products, Pastries, Papad, packed and processed foods, chocolates, Alcohol, caffeine and carbonated beverages.
- Avoid junk foods like Pizza and Burger.

Dietician signature



29/3/2024

Date : 29-03-2024

MR NO : CMYS.0000060284

Department : GENERAL

Doctor :

Name : Mr. PAWAN KUMAR THAMMI SET

Registration No :

Age/ Gender : 36 Y / Male

Qualification :

Consultation Timing: 08:17

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

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

C/S/By Dr. Jyothishree

O/E

Gen. Teeth attrition noted

Adv. - Night guard

Follow up date :

*Jyothishree*  
**Apollo Clinic**  
# 23, 1st Floor,  
Kalidasa Road, Mysore - 02  
Ph : 0821-4006040/41

Date : 29-03-2024  
MR NO : CMYS.0000060284

Department : GENERAL  
Doctor :

Name : Mr. PAWAN KUMAR THAMMI SET  
Age/ Gender : 36 Y / Male

Registration No :  
Qualification :

Consultation Timing: 08:17

Height : 161	Weight : 53.4	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /  
Allergies History

Clinical Diagnosis & Management Plan

Not wearing regular.  
No fresh complaints

vision	(R)	(L)
Far	N6	N6
Near	6/6	6/6
colour	(N)	(N)

Follow up date :

Regular eye

Doctor Signature  
**Apollo Clinic**  
# 23, 1st Floor,  
Kadavara Road, Mysore - 02  
Ph : 0821-4006040/41

ID: 60284  
MR PAWAN KUMAR THAMMI SEITY  
Male 36Years  
161cm 53kg 110/ mmHg

29-03-2024 08:30:54 AM

Diagnosis Information:

Unconfirmed Report.

**Apollo Clinic**  
# 23, 1st Floor,  
Mallidasa Road, Mysore - 02  
0821-0000/01



0.5-45Hz AC50 25mm/s 10mm/mV 2\*5.0s 67 CARDIART

8 D V1.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU



Patient Name	: Mr. PAWAN KUMAR THAMMI SETTY	Age	: 36 Y M
UHID	: CMYS.0000060284	OP Visit No	: CMYSOPV123987
Reported on	: 29-03-2024 15:36	Printed on	: 29-03-2024 15:36
Adm/Consult Doctor	:	Ref Doctor	: SELF

**DEPARTMENT OF RADIOLOGY**

**X-RAY CHEST PA**

Both lung fields and hila are normal .  
No obvious active pleuro-parenchymal lesion seen .  
Both costophrenic and cardiophrenic angles are clear .  
Both diaphragms are normal in position and contour .  
Thoracic wall and soft tissues appear normal.

**IMPRESSION :NORMAL STUDY .**

Printed on:29-03-2024 15:36

---End of the Report---



**Dr. CHETAN HOLEPPAGOL**  
**MBBS, DNB(RADIO DIAGNOSIS)**

Radiology

**Apollo Health and Lifestyle Limited**

(CIN: URS110TG2000PLC115819)

Regd Office: 110-60-62, Anhola Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016

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Koramangala | Sarjapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 778**

<b>Patient Name: Mr. PAWAN KUMAR THAMMI SETTY</b>	<b>Date: 29.03.2024</b>	<b>Referring Doctor: Self</b>
<b>Age / Sex :36yrs /Male</b>	<b>UHID :60284</b>	
<b>ULTRASONOGRAPHY – ABDOMEN &amp; PELVIS</b>		

**LIVER:** It is normal in size, outline and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

**GALL BLADDER:** It is distended and normal. No evidence of calculi.

**SPLEEN:** It is normal in size, outline and echopattern. No e/o focal lesions.

**PANCREAS:** It is normal in size, outline and echopattern.

**RIGHT KIDNEY:** It measures 8.8 cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**LEFT KIDNEY:** It measures 8.6 cm with parenchymal thickness of 1.3 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

**URINARY BLADDER:** It is well distended. The UB wall is normal. No e/o calculi.

**PROSTATE:** It is normal in size, outline and echotexture.

No e/o free fluid in the abdomen.

**IMPRESSION: NORMAL STUDY.**

**Dr. Raghuveer Suhas Prasad, DNB**  
Consultant Radiologist.

**Apollo Health and Lifestyle Limited**

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TO BOOK AN APPOINTMENT

**1860 500 7788**

Patient's Name : Mr. PAWAN KUMAR THAMMI SETTY	Age & Sex; 36Yrs /Male
Date : 29.03.2024	UHID No:060284

## 2D ECHOCARDIOGRAPHY STUDY

### Impression:

- Normal chambers and valves
- No regional wall motion abnormality
- Normal left ventricular systolic function. EF 66 %
- No clots. No pericardial effusion

### Findings

Left Ventricle:	No RWMA
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal

#### **Apollo Health and Lifestyle Limited**

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TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mr. PAWAN KUMAR THAMMI SETTY	Age & Sex; 36Yrs /Male
Date : 29.03.2024	UHID No:060284

Measurements

AO : 3.1 cm  
 LA : 3.3 cm  
  
 RV : 3.3 cm  
 LVIDd : 3.45 cm  
 LVIDs : 2.22 cm  
 IVSd : 0.79 cm  
 IVSs : 1.27 cm  
 PWd : 0.79 cm  
 PWs : 1.19 cm  
 EF : 66.0 %  
 FS : 33.0 %

Doppler  
 MV TV AV PV  
 E 0.81 m/s E --- m/s V max 1.20 m/s V max 0.77 m/s  
 :  
 A: 0.47 m/s A --- m/s

**Dr. GURU PRASAD. B. V, MBBS, PGDCC**  
**CONSULTANT – NON-INVASIVE CARDIOLOGY**



**Dr. GURU PRASAD. B. V**  
 MBBS, PGDCC (CARDIOPH)  
 CCAM, CRT/CD/CPM, PGCC, CCT/CCM  
 Consultant - Non Invasive Cardiology  
 RMC No: 69949

**Apollo Health and Lifestyle Limited**

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TO BOOK AN APPOINTMENT

**1860 500 77**