

Patient Name	: Mr.SATHISH H K	Collected	: 29/Mar/2024 07:42AM
Age/Gender	: 45 Y 1 M 12 D/M	Received	: 29/Mar/2024 10:19AM
UHID/MR No	: CMYS.0000060274	Reported	: 29/Mar/2024 11:40AM
Visit ID	: CMYSOPV123976	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 245492963012		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



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

SIN No:BED240086335




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UHID/MR No	: CMYS.0000060274	Reported	: 29/Mar/2024 01:31PM
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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. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.8	g/dL	13-17	Spectrophotometer
PCV	39.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	6.18	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	63	fL	83-101	Calculated
MCH	19.1	pg	27-32	Calculated
MCHC	30.2	g/dL	31.5-34.5	Calculated
R.D.W	16	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,700	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	45.7	%	40-80	Electrical Impedance
LYMPHOCYTES	42	%	20-40	Electrical Impedance
EOSINOPHILS	5.8	%	1-6	Electrical Impedance
MONOCYTES	6.1	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2604.9	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2394	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	330.6	Cells/cu.mm	20-500	Calculated
MONOCYTES	347.7	Cells/cu.mm	200-1000	Calculated
BASOPHILS	22.8	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.09		0.78- 3.53	Calculated
PLATELET COUNT	227000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

R.B.Cs: shows anisopoikilocytosis. Majority are microcytic hypochromic. Also seen are few pencil shaped cells and tear drop cells.



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W.B.Cs: are normal in number, morphology and distribution.
Platelets: are adequate in number and are seen in clumps and singles.
Haemoparasites: Not seen.

IMPRESSION: MICROCYTIC HYPOCHROMIC ANAEMIA.



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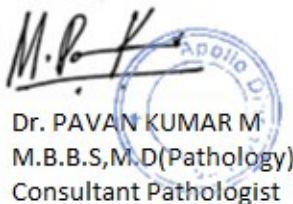


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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	100	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)	80	mg/dl	70-140	GOD, POD

Result is rechecked. Kindly correlate clinically

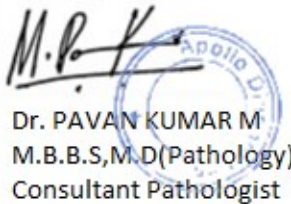
Comment:

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				

Page 5 of 16



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DEPARTMENT OF BIOCHEMISTRY

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

HBA1C, GLYCATED HEMOGLOBIN	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	105	mg/dL		Calculated

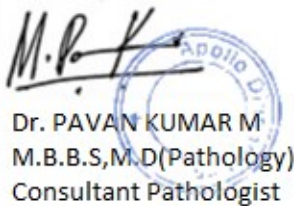
Comment:

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	161	mg/dl	0-200	CHOD
TRIGLYCERIDES	62	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	54	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	107	mg/dL	<130	Calculated
LDL CHOLESTEROL	95.01	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.39	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.00		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.01		<0.11	Calculated

Comment:

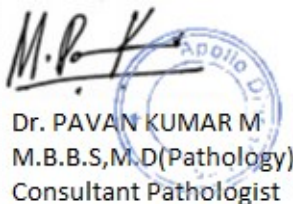
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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.

Page 7 of 16



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

- 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 ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.26	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.33	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.93	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.0	U/l	0-35	IFCC
ALKALINE PHOSPHATASE	80.00	U/l	53-128	IFCC (AMP buffer)
PROTEIN, TOTAL	6.40	g/dl	6.4-8.3	Biuret
ALBUMIN	4.36	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	2.04	g/dL	2.0-3.5	Calculated
A/G RATIO	2.14		0.9-2.0	Calculated

Comment:

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

Common patterns seen:

1. Hepatocellular Injury:

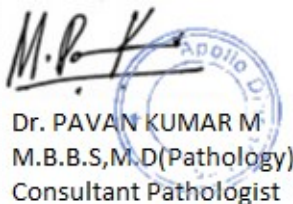
- AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.
- ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI.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

2. Cholestatic Pattern:

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

3. Synthetic function impairment:

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.96	mg/dL	0.67-1.17	Enzymatic colorimetric
UREA	18.02	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	8.4	mg/dl	6-20	Urease, UV
URIC ACID	10.70	mg/dL	3.5-7.2	Uricase
CALCIUM	9.09	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.53	mg/dl	2.7-4.5	Molybdate
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.2	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	6.40	g/dl	6.4-8.3	Biuret
ALBUMIN	4.36	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	2.04	g/dL	2.0-3.5	Calculated
A/G RATIO	2.14		0.9-2.0	Calculated



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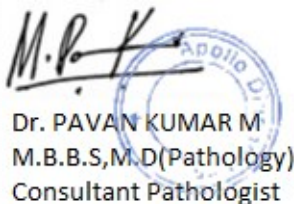


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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	21.00	U/l	0-55	IFCC



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DEPARTMENT OF IMMUNOLOGY

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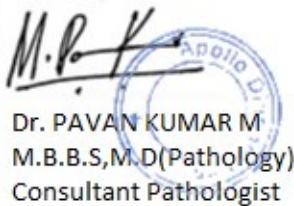
Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.63	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	10.03	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	4.360	µIU/mL	0.35-4.94	CMIA

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

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

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



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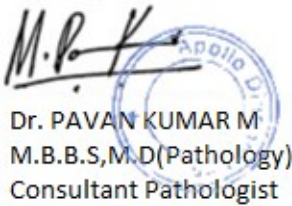
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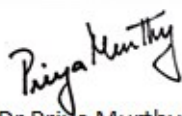
DEPARTMENT OF IMMUNOLOGY

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	0.399	ng/mL	<4	CMIA



Govinda Raju N L
MSc, MPhil, (Phd)
Consultant Biochemist



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



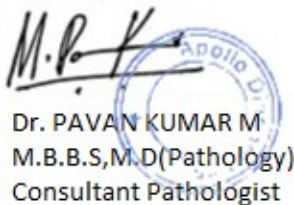
SIN No:IM07243623

Patient Name : Mr.SATHISH H K	Collected : 29/Mar/2024 07:42AM
Age/Gender : 45 Y 1 M 12 D/M	Received : 29/Mar/2024 10:35AM
UHID/MR No : CMYS.0000060274	Reported : 29/Mar/2024 11:55AM
Visit ID : CMYSOPV123976	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 245492963012	

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
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
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
BIOCHEMICAL EXAMINATION				
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
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	4 - 5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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

SIN No:UR2319248



Patient Name : Mr.SATHISH H K	Collected : 29/Mar/2024 07:42AM
Age/Gender : 45 Y 1 M 12 D/M	Received : 29/Mar/2024 10:35AM
UHID/MR No : CMYS.0000060274	Reported : 29/Mar/2024 11:55AM
Visit ID : CMYSOPV123976	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 245492963012	

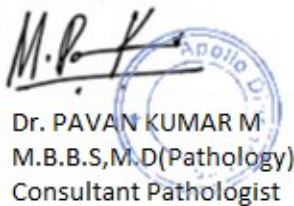
DEPARTMENT OF CLINICAL PATHOLOGY

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 ***



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

SIN No:UF011485



8,9,12

Name : Mr. SATHISH H K

Age: 45 Y

Sex: M

UHID:CMYS 0000060274



OP Number:CMYSOPV123976

Bill No :CMYS-OCR-22861

Date : 29.03.2024 07:41

Address : MYSORE

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
INDIA OP AGREEMENT

Sno	Service Type/Service Name	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE(FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
4	HbA1c, GLYCATED HEMOGLOBIN	
5	2D ECHO	
6	LIVER FUNCTION TEST (LFT)	
7	X-RAY CHEST PA - P	
8	GLUCOSE, FASTING	wt 61.5
9	HEMOGRAM + PERIPHERAL SMEAR	Ht 167
10	PHYSICIAN CONSULTATION - P	B/P 110/80
11	FITNESS BY GENERAL PHYSICIAN - P	
12	DIET CONSULTATION - P	
13	COMPLETE URINE EXAMINATION	
14	URINE GLUCOSE(POST PRANDIAL)	
15	PERIPHERAL SMEAR	
16	EKG - P	
17	BLOOD GROUP ABO AND RH FACTOR	
18	LIPID PROFILE	
19	BODY MASS INDEX (BMI) - P	
20	OPHTHAL BY GENERAL PHYSICIAN	
21	RENAL PROFILE RENAL FUNCTION TEST (RFT/KFT) - P	
22	ULTRASOUND - WHOLE ABDOMEN - P	
23	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
24	DENTAL CONSULTATION - P	
25	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	

Date : 29-03-2024
R NO : CMYS.0000060274
Name : Mr. SATHISH H K
Age/ Gender : 45 Y / Male

Department : GENERAL
Doctor : ROHITH H.K
Registration No :
Qualification :

Consultation Timing: 07:40

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

General Examination /
Allergies History

Hb - 11.8

Clinical Diagnosis & Management Plan

Pt. came for Annual Health Checkup.
No fresh complaints
No h/o DM, HTN



Follow up date :

Doctor Signature

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

Date : 29-03-2024
MR NO : CMYS.0000060274
Name : Mr. SATHISH H K
Age/ Gender : 45 Y / Male

Department : GENERAL (Ophthalm)
Doctor :
Registration No :
Qualification :

Consultation Timing: 07:40

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp : 20	B.P :

General Examination /
Allergies History

NO -

Clinical Diagnosis & Management Plan

Not wearing spectacle
No fresh complaints.
Not on regular treatment
No HTN, T2DM [HTN.
vision (R) (L)
Far N6 N6
Near 6/6 6/6
Colour NAD.

Follow up date :

Regular Eye

Doctor Signature

Apollo Clinic

23, 1st Floor,

Kalidasa Road, Mysore - 02

Ph: 0821-4006040/41

Date : 29-03-2024
 MR NO : CMYS.0000060274
 Name : Mr. SATHISH H K
 Age/ Gender : 45 Y / Male

Department : GENERAL
 Doctor :
 Registration No : Dr Praveen Kumar R
 Qualification : M.S (ENT)

Consultation Timing: 07:40

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

General Examination /
 Allergies History

Clinical Diagnosis & Management Plan

Care for regular health checkup

Ear - (R) TM (L)

(L) Ear wax (R)

Nose / Throat (L)

Ad

Reaudit

He

Follow up date :

Doctor Signature

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

Date : 29-03-2024
MR NO : CMYS.0000060274

Department : GENERAL Dietetics
Doctor : Madhura . B . P

Name : Mr. SATHISH H K
Age/ Gender : 45 Y / Male

Registration No :
Qualification : M.Sc Nutrition & Dietetics
PhD*

Consultation Timing: 07:40

Iron - 67kg

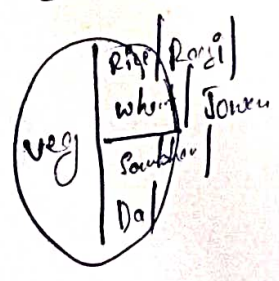
Height: 167	Weight: 61.5	BMI: 21.9/m ²	Waist Circum:
Temp:	Pulse:	Resp:	B.P:

General Examination /
Allergies History

HB - 11.8
T₃ Total - 1.63

Clinical Diagnosis & Management Plan

- Advised high calorie, high protein diet with fiber rich foods.
- Dietary guideline chart is given.
- Include Iron rich foods like dark green leafy vegetables, pomegranate, Beetroot & other vegetables.



Follow up date :

Doctor Signature
[Signature]
29/3/2024

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

Date : 29-03-2024
MR NO : CMYS.0000060274
Name : Mr. SATHISH H K
Age/ Gender : 45 Y / Male

Department : GENERAL
Doctor :
Registration No :
Qualification :

Consultation Timing: 07:40

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

General Examination
Allergies History

Clinical Diagnosis & Management Plan

OK/By Dr. Sathish H K
OK
CMT, ST-1
Gen Teeth attrition noted
Adv:- oral prophylaxis

Follow up date :


Doctor Signature

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

Patient Name	: Mr. SATHISH H K	Age	: 45 Y M
UHID	: CMYS.0000060274	OP Visit No	: CMYSOPV123976
Reported on	: 29-03-2024 15:27	Printed on	: 29-03-2024 15:27
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 15:27

---End of the Report---



Dr. CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)

Radiology

Apollo Health and Lifestyle Limited

(CIN: UB51107G2000PLC115819)

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

APOLLO CLINICS NETWORK KARNATAKA

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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Page 1 of 1

Patient Name: Mr.Sathish	Date: 29.03.2024	Referring Doctor: Self
Age / Sex :46yrs /Male	UHID :	
ULTRASONOGRAPHY – ABDOMEN & PELVIS		

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 8.9x3.5 cm with parenchymal thickness of 1.2 cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 9.1x4.9 cm with parenchymal thickness of 1.6 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. Chetan H, DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

ICD# UB511GTG2000PLC1158191

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

Ph. No. (040) 4904 7777 Fax No. 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

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Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

1860 500 72

Patient's Name : Mr. K Sathish

Age & sex : 46Yrs /Male

Date : 29.03.2024

UHID No :

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chamber volumes
- Normal left ventricular function. EF 61%
- No regional wall motion abnormality
- Normal valves
- No clots. No pericardial effusion

Findings

Left Ventricle:	Normal
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

Dr. C.B. KESHAVAMURTHY MD, DM, DNB

CONSULTANT CARDIOLOGIST
Apollo Health and Lifestyle Limited, Apollo Bldg, 4th Floor, Begumpet, Hyderabad, Telangana - 500 016
Apollo Bldg, 4th Floor, Begumpet, Hyderabad, Telangana - 500 016
Apollo Bldg, 4th Floor, Begumpet, Hyderabad, Telangana - 500 016
Apollo Bldg, 4th Floor, Begumpet, Hyderabad, Telangana - 500 016
Apollo Bldg, 4th Floor, Begumpet, Hyderabad, Telangana - 500 016
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Koramangala | Sarajapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinics.com

TO BOOK AN APPOINTMENT

1860 500 7777

Patient's Name : Mr. K Sathish

Age & sex : 46Yrs /Male

Date : 29.03.2024

UHID No :

Measurements

AO : 2.31 cm
LA : 2.86 cm

RV : 2.00 cm
LVIDd : 3.48 cm
LVIDs : 2.37 cm
IVSd : 0.90 cm
IVSs : 1.10 cm
PWd : 0.90 cm
PWs : 1.30 cm
EF : 61.0 %
FS : 30.0 %

Doppler

MV	TV	AV	PV
E: 0.62 m/s	E 0.60 m/s	V max 0.99 m/s	V max 1.07 m/s
A: 0.46 m/s	A 0.40 m/s		
MR Nil	TR Nil	AR Nil	PR Nil


Dr. C.B. KESHAVAMURTHY MD, DM, DNB

CONSULTANT CARDIOLOGIST

ICMR (AS1107020001C115819)

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

Ph: No: 4614 4214 7777 | Fax No: 4604 7744 | E-mail: enquiry@apollohi.com | www.apollohi.com

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Koramangala | Sarjapur Road | Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7283

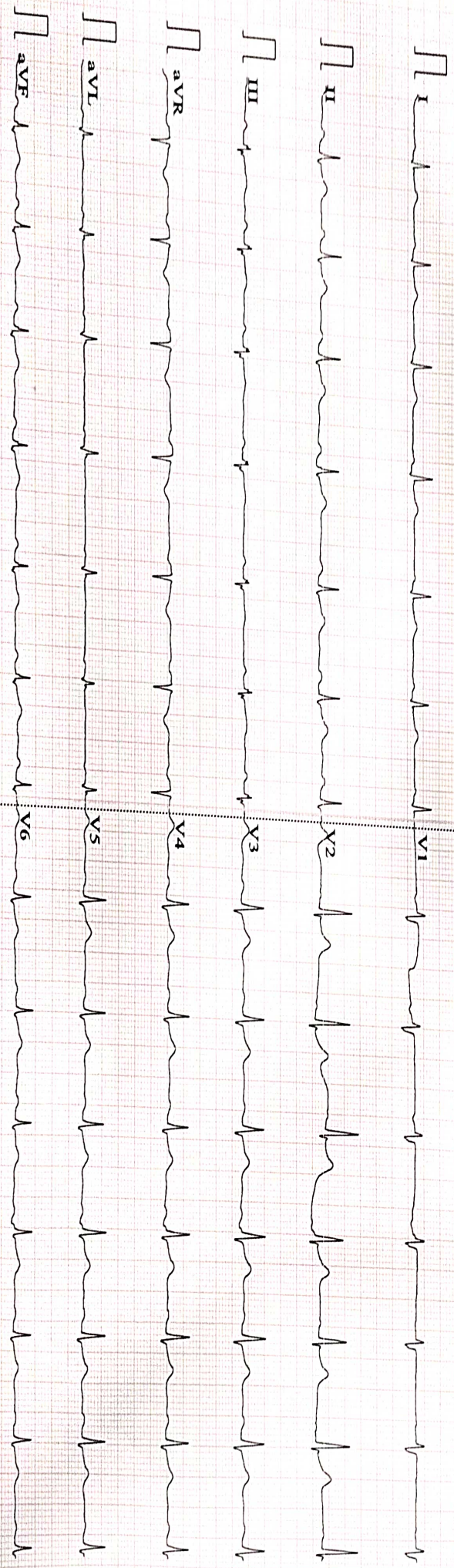
ID: 602/4
MR SATHISH H K
Male 45Years
167cm 61kg 110/80 mmHg

29-03-2024 09:33:38 AM

Diagnosis Information:

Unconfirmed Report.

APOLLO Clinic
#25, 1st Floor,
Kallidasa Road, Mysore - 02
Ph : 0821-4006040/41



0.5~45Hz AC50 25mm/s 10mm/mV 2*5.0s 82 CARDIART 3 D VI.43 Glasgow V28.6.0 APOLLO CLINIC MYSURU