

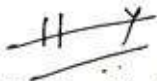
| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 10:21AM |
| Age/Gender : 41 Y 6 M 0 D/M | Received : 03/Aug/2024 12:37PM |
| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 03:31PM |
| Visit ID : CBASOPV105174 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 9920144559,,, | |

DEPARTMENT OF HAEMATOLOGY

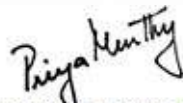
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| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|---------------|-------------------------|-----------------|--------------------------------|
| HEMOGRAM , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 8.1 | g/dL | 13-17 | Spectrophotometer |
| PCV | 25.30 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 3.75 | Million/cu.mm | 4.5-5.5 | Electrical Impedence |
| MCV | 67.5 | fL | 83-101 | Calculated |
| MCH | 21.7 | pg | 27-32 | Calculated |
| MCHC | 32.1 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 19.6 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 5,980 | cells/cu.mm | 4000-10000 | Electrical Impedence |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 57.8 | % | 40-80 | Electrical Impedence |
| LYMPHOCYTES | 33 | % | 20-40 | Electrical Impedence |
| EOSINOPHILS | 2.5 | % | 1-6 | Electrical Impedence |
| MONOCYTES | 6.5 | % | 2-10 | Electrical Impedence |
| BASOPHILS | 0.2 | % | <1-2 | Electrical Impedence |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 3456.44 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 1973.4 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 149.5 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 388.7 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 11.96 | Cells/cu.mm | 0-100 | Calculated |
| Neutrophil lymphocyte ratio (NLR) | 1.75 | | 0.78- 3.53 | Calculated |
| PLATELET COUNT | 352000 | cells/cu.mm | 150000-410000 | Electrical impedence |
| ERYTHROCYTE SEDIMENTATION RATE (ESR) | 47 | mm at the end of 1 hour | 0-15 | Modified Westegren method |
| PERIPHERAL SMEAR | | | | |

Page 1 of 9



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SIN No: BED240203490

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 1860 500 7788
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| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 10:21AM |
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| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 03:31PM |
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| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 9920144559,,, | |

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

RBCs: Show mild anisopoikilocytosis with Microcytic hypochromic RBCs.Few pencil cells, polychromatophils seen

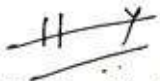
WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

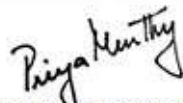
HEMOPARASITES: negative

IMPRESSION: MICROCYTIC HYPOCHROMIC ANEMIA.

Note: Kindly evaluate for iron deficiency status.



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| | |
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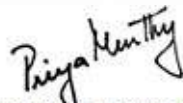
DEPARTMENT OF HAEMATOLOGY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|----------|------|-----------------|-----------------------------|
| BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA | | | | |
| BLOOD GROUP TYPE | B | | | Microplate Hemagglutination |
| Rh TYPE | Positive | | | Microplate Hemagglutination |



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| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 02:00PM |
| Age/Gender : 41 Y 6 M 0 D/M | Received : 03/Aug/2024 06:11PM |
| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 06:39PM |
| Visit ID : CBASOPV105174 | Status : Final Report |
| Ref Doctor : Dr.SELF | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 9920144559,,, | |

DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-------------------------------|--------|-------|-----------------|------------|
| GLUCOSE, FASTING , NAF PLASMA | 103 | mg/dL | 70-100 | HEXOKINASE |

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- 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. Range | Method |
|--|--------|-------|-----------------|------------|
| GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR) | 102 | mg/dL | 70-140 | HEXOKINASE |

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



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SIN No:PLP1479876

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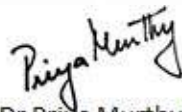
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|-----------------|-----------------------|--------------|-------------------------------|
| Patient Name | : Mr.CHANDRASEKHARA M | Collected | : 03/Aug/2024 02:00PM |
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DEPARTMENT OF BIOCHEMISTRY

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



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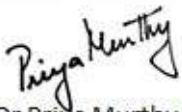
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| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 10:21AM |
| Age/Gender : 41 Y 6 M 0 D/M | Received : 03/Aug/2024 05:33PM |
| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 06:24PM |
| Visit ID : CBASOPV105174 | Status : Final Report |
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DEPARTMENT OF BIOCHEMISTRY

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

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|--------|------|-----------------|--------|
| ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM | 8 | U/L | <50 | IFCC |



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Consultant Pathologist

SIN No:SE04800098

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| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 10:21AM |
| Age/Gender : 41 Y 6 M 0 D/M | Received : 03/Aug/2024 05:33PM |
| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 06:30PM |
| Visit ID : CBASOPV105174 | Status : Final Report |
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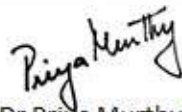
| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---------------------------------|--------|-------|-----------------|--------|
| BILIRUBIN, TOTAL , SERUM | 0.44 | mg/dL | 0.3-1.2 | DPD |

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-------------------------------------|--------|-------|-----------------|-------------------------|
| BUN/CREATININE RATIO , SERUM | | | | |
| BLOOD UREA NITROGEN | 7.7 | mg/dL | 8.0 - 23.0 | Calculated |
| CREATININE | 0.90 | mg/dL | 0.84 - 1.25 | Modified Jaffe, Kinetic |
| BUN / CREATININE RATIO | 8.51 | | | Calculated |

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---------------------------|--------|-------|-----------------|-------------------------|
| CREATININE , SERUM | 0.90 | mg/dL | 0.84 - 1.25 | Modified Jaffe, Kinetic |



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| | |
|------------------------------------|--|
| Patient Name : Mr.CHANDRASEKHARA M | Collected : 03/Aug/2024 10:18AM |
| Age/Gender : 41 Y 6 M 0 D/M | Received : 03/Aug/2024 12:21PM |
| UHID/MR No : CBAS.0000093837 | Reported : 03/Aug/2024 01:00PM |
| Visit ID : CBASOPV105174 | Status : Final Report |
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DEPARTMENT OF CLINICAL PATHOLOGY

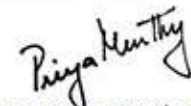
ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|--|----------|------|-----------------------|----------------------------------|
| COMPLETE URINE EXAMINATION (CUE) , URINE | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | YELLOW | | PALE YELLOW | Physical measurement |
| TRANSPARENCY | Clear | | CLEAR | Physical measurement |
| pH | 5.5 | | 5-7.5 | Bromothymol Blue |
| SP. GRAVITY | 1.014 | | 1.002-1.030 | Dipstick |
| BIOCHEMICAL EXAMINATION | | | | |
| URINE PROTEIN | NEGATIVE | | NEGATIVE | PROTEIN ERROR OF INDICATOR |
| GLUCOSE | NORMAL | | NEGATIVE | GOD-POD |
| URINE BILIRUBIN | NEGATIVE | | NEGATIVE | AZO COUPLING |
| URINE KETONES (RANDOM) | NEGATIVE | | NEGATIVE | Sodium nitro prusside |
| UROBILINOGEN | NORMAL | | NORMAL (0.1-1.8mg/dl) | Diazonium salt |
| NITRITE | NEGATIVE | | NEGATIVE | Griess reaction |
| LEUCOCYTE ESTERASE | NEGATIVE | | NEGATIVE | Diazonium salt |
| CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY | | | | |
| PUS CELLS | 1 | /hpf | 0-5 | Automated Image based microscopy |
| EPITHELIAL CELLS | 0 | /hpf | < 10 | Automated Image Based Microscopy |
| RBC | 0 | /hpf | 0-2 | Automated Image based microscopy |
| CASTS | NEGATIVE | /lpf | 0-2 Hyaline Cast | Automated Image based microscopy |
| CRYSTALS | NEGATIVE | /hpf | Occasional-Few | Automated Image based microscopy |

Page 8 of 9



Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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



SIN No:UR2399035

This test has been performed at Apollo Health & Lifestyle Ltd. BANGALORE Laboratory

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

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)

Address:
323/100/123, Doddathangur Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

 1860 500 7788
www.apolloclinic.com

| | | | |
|-----------------|-----------------------|--------------|-------------------------------|
| Patient Name | : Mr.CHANDRASEKHARA M | Collected | : 03/Aug/2024 10:18AM |
| Age/Gender | : 41 Y 6 M 0 D/M | Received | : 03/Aug/2024 12:21PM |
| UHID/MR No | : CBAS.0000093837 | Reported | : 03/Aug/2024 01:00PM |
| Visit ID | : CBASOPV105174 | Status | : Final Report |
| Ref Doctor | : Dr.SELF | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 9920144559,,, | | |

DEPARTMENT OF CLINICAL PATHOLOGY

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

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.

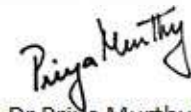
***** End Of Report *****

Result/s to Follow:
PERIPHERAL SMEAR

Page 9 of 9



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APOLLO CLINICS NETWORK

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Address:
323/100/123, Doddathangur Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

 **1860 500 7788**
www.apolloclinic.com

Name : Mr. Chandrasekhara M

Age: 41 Y

Sex: M

UHID:CBAS.0000093837



OP Number:CBASOPV105174

Bill No :CBAS-OCR-63574

Date : 03.08.2024 10:11

Address : BLKR

Plan : ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT

| Sno | Service Type/ServiceName | Department |
|---------------|---|------------|
| 1 | ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324 | |
| 1 | BILIRUBIN, TOTAL - SERUM | |
| 2 | GLUCOSE, FASTING | |
| 3 | HEMOGRAM + PERIPHERAL SMEAR | |
| 4 | ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM | |
| 5 | COMPLETE URINE EXAMINATION | |
| 6 | PERIPHERAL SMEAR | |
| 7 | ECG | |
| 8 | CREATININE, SERUM | |
| 9 | GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) | |
| 10 | X-RAY CHEST PA | |
| 11 | FITNESS BY GENERAL PHYSICIAN | |
| 12 | BLOOD GROUP ABO AND RH FACTOR | |
| 13 | OPHTHAL BY GENERAL PHYSICIAN | |
| 14 | BUN/CREATININE RATIO | |

to do :

S. Iron, Ferritin
Hbc, Ur B. 2

Urb = ASD

Cyan

Ht → 160 cm

Wt → 70.11 kg

HIP → 87 cm

Wid → 94 cm

B.P → 120/86

PR → 81

CERTIFICATE OF MEDICAL FITNESS

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

of **Mr Chandra Sekhara M on 03.08.24**
41/M Avcofemi - Ment. Wheel

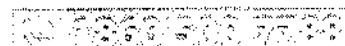
After reviewing the medical history and on clinical examination it has been found that he/she is

| | Tick |
|---|--------------------------|
| <ul style="list-style-type: none"> • Medically Fit | <input type="checkbox"/> |
| <ul style="list-style-type: none"> • Fit with restrictions/recommendations <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>How ever the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after</p> | <input type="checkbox"/> |
| <ul style="list-style-type: none"> ✓ Currently Unfit. To start treatment for Anemia <p>Review after</p> <p style="text-align: right; margin-right: 50px;">recommended</p> | <input type="checkbox"/> |
| <ul style="list-style-type: none"> • Unfit | <input type="checkbox"/> |

Dr. **Chaya**
 Medical Officer
 The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

DR. K.A. VIJAYA VARDHAN, MD
 Consultant Physician / Diabetology &
 KML REG (001)4232



Mr. Chandrasekhara . M
41/M

03.08.24

J. M. Linnard
Levitt
P. MC

- No Medical Complaints

Smoking: Yes

No Habits.

P/E: ~~Normal~~ Walking

F/H: Normal

G.E - lower weight
P +
S.E. CVS IES I PA

- NAD

Rijany

Dr. R.A. VIJAYA VANISHAN, M.D.
Consultant Physician / Diabetologist
KMC REG No 11234

Mr. Chandrasekhar M 21/07 93837
3/8/24

EYE CHECK UP REPORT

Vision Acuity $\left\{ \begin{array}{l} 6/6 \\ \text{unaided} \\ 6/6 \end{array} \right.$

Digital IOP $\left\{ \begin{array}{l} \text{②} \\ \text{②} \end{array} \right.$

Near Vision $\left\{ \begin{array}{l} \text{N6} \\ \text{unaided} \\ \text{N6} \end{array} \right.$

Colour Vision $\left\{ \begin{array}{l} \text{Normal} \\ \text{Normal} \end{array} \right.$

• Fundus: Normal @ study

• Ant. Segment :- WNL

• Media: Normal

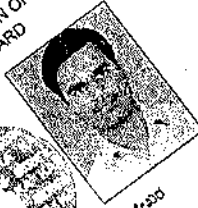
• Pupil: N/A

CS

భారత ఎన్నికల आयोग
ELECTION COMMISSION OF INDIA

IDENTITY CARD

XHL5439859



Electors Name : M Chandrasekhara

Father's Name : M Thimmarreddy

Sex / Date of Birth : Male / 14/07/1982

Your appointment is confirmed

noreply@apolloclinics.info <noreply@apolloclinics.info>

Sun 8/4/2024 3:29 PM

To:atcenter.cc@mfine.co <atcenter.cc@mfine.co>

Cc:Basavanagudi Apolloclinic <basavanagudi@apolloclinic.com>;Irfan Ali S <Irfanali.s@apolloclinic.com>;Syamsunder M <syamsunder.m@apollohl.com>



Dear Chandrashekar m,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **BASAVANAGUDI clinic** on **2024-08-10 at 08:00-08:15**.

| | |
|----------------|---|
| Payment Mode | |
| Corporate Name | NOVOCURA TECH HEALTH SERVICES PRIVATE LIMITED |
| Agreement Name | [NOVOCURA MFCHCH 664-01 HC AND 02 PMC CREDIT PAN INDIA OP AGREEMENT FY2425] |
| Package Name | [NOVOCURA - MFCHCH 664-01 HC - 2D ECHO - PAN INDIA - FY2425] |

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.

Patient Name : Mr. Chandrasekhara M

Age/Gender : 41 Y/M

UHID/MR No. : CBAS.0000093837

OP Visit No : CBASOPV105174

Sample Collected on :

Reported on : 03-08-2024 15:07

LRN# : RAD2395584

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9920144559,,,,,

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

IMPRESSION:

No obvious abnormality seen in the present study.



Dr. V K PRNAV VENKATESH
MBBS,MD
Radiology