

Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 11:24AM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 04:08PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF HAEMATOLOGY

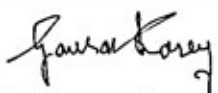
PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBC :- Predominantly are Normocytic Normochromic

WBC :-TLC and DLC are within normal limits

PLATELETS:-Adequate

IMPRESSION : Normocytic Normochromic Blood Picture.



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:BED240240575



Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 11:24AM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 04:08PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF HAEMATOLOGY

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

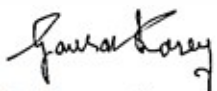
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.6	g/dL	13-17	CYANIDE FREE COLOURIMETER
PCV	37.20	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.14	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	89.8	fL	83-101	Calculated
MCH	32.7	pg	27-32	Calculated
MCHC	36.5	g/dL	31.5-34.5	Calculated
R.D.W	16.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,920	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	60.9	%	40-80	Electrical Impedance
LYMPHOCYTES	32.7	%	20-40	Electrical Impedance
EOSINOPHILS	1.5	%	1-6	Electrical Impedance
MONOCYTES	3.5	%	2-10	Electrical Impedance
BASOPHILS	1.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2996.28	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1608.84	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	73.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	172.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	68.88	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.86		0.78- 3.53	Calculated
PLATELET COUNT	219000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC :- Predominantly are Normocytic Normochromic

WBC :-TLC and DLC are within normal limits

PLATELETS:-Adequate

Page 2 of 7



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:BED240240575

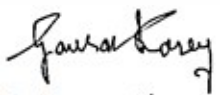


Patient Name	: Mr.PANKUSH	Collected	: 22/Oct/2024 10:17AM
Age/Gender	: 28 Y 2 M 14 D/M	Received	: 22/Oct/2024 11:24AM
UHID/MR No	: RAMR.0000045059	Reported	: 22/Oct/2024 04:08PM
Visit ID	: RAMROPV173257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 7889288046		

DEPARTMENT OF HAEMATOLOGY

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

IMPRESSION : Normocytic Normochromic Blood Picture.



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:BED240240575

Page 3 of 7

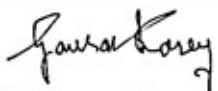


Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 11:24AM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 01:15PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF HAEMATOLOGY

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

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

Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:BED240240575

Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 11:24AM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 12:38PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	90	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:

- 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
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	141.45	U/l	0-45	IFCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

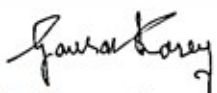
ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL CHOLESTEROL , SERUM	237	mg/dl	0-200	CHOD

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

Page 5 of 7



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:SE04838002



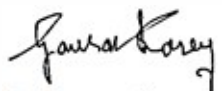
Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 11:24AM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 12:38PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF BIOCHEMISTRY

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

UREA , SERUM	25.01	mg/dl	13-43	Urease, UV
---------------------	-------	-------	-------	------------

Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE , SERUM	0.77	mg/dL	0.67-1.17	Enzymatic colorimetric



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:SE04838002



Patient Name : Mr.PANKUSH	Collected : 22/Oct/2024 10:17AM
Age/Gender : 28 Y 2 M 14 D/M	Received : 22/Oct/2024 02:43PM
UHID/MR No : RAMR.0000045059	Reported : 22/Oct/2024 02:47PM
Visit ID : RAMROPV173257	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 7889288046	

DEPARTMENT OF CLINICAL PATHOLOGY

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

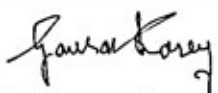
Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
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	Modifed Ehrlich Reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	Microscopy
RBC	ABSENT	/hpf	0-2	Microscopy
CASTS	ABSENT		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.

*** End Of Report ***

Page 7 of 7



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:UR2417396

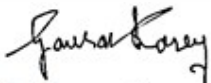


Patient Name : Mr.PANKUSH
Age/Gender : 28 Y 2 M 14 D/M
UHID/MR No : RAMR.0000045059
Visit ID : RAMROPV173257
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 7889288046

Collected : 22/Oct/2024 10:17AM
Received : 22/Oct/2024 02:43PM
Reported : 22/Oct/2024 02:47PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. 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 (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:UR2417396



Visit us: www.apollocradle.com ✉ Write to us: contactus@apollocradle.com

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)

CIN - U85100162009PLC099414

Regd. Office: 1-10-60/62, Ashoka Baghupathi Chambers, 5th Floor, Begumpet,
Hyderabad - 500 016, Telangana

Address: Railway Link Road, Naushera House,
Amritsar Urban Circle No.109,
Abadi Court Road, Amritsar - 143001

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr Pankush 45059 on 22/10/24

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

<p>Medically Fit</p> <p>• <input type="checkbox"/></p>	Tick
<p>Fit with restrictions/recommendations</p> <p>• <input checked="" type="checkbox"/></p> <p>Though following restrictions have been revealed, in my opinion, these are not Impediments to the job.</p> <p>1. <u>SGPT - 141.45 u/L</u></p> <p>2. <u>Cholesterol level - 237mg/dl</u></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>10 days</u></p>	
<p>Currently Unfit.</p> <p>Review after _____ recommended</p>	
<p>Unfit</p>	


 Dr. _____
 Medical Officer
 The Apollo Cradle, (Amritsar)

This certificate is not meant for medico-legal purposes



Patient Name : Mr.PANKUSH
Age/Gender LIVES : 28 Y 2 M 14 D/M
UHID/MR No : RAMR.0000045059
Visit ID : RAMROPV173257
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 7889288046

Collected : 22/Oct/2024 10:17AM
Received : 22/Oct/2024 11:24AM
Reported : 22/Oct/2024 04:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBC :- Predominantly are Normocytic Normochromic

WBC :-TLC and DLC are within normal limits

PLATELETS:-Adequate

IMPRESSION : Normocytic Normochromic Blood Picture.

Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:BED240240575





Patient Name : Mr.PANKUSH
 Age/Gender : 28 Y 2 M 14 D/M
 UHID/MR No : RAMR.0000045059
 Visit ID : RAMROPV173257
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 7889288046

Collected : 22/Oct/2024 10:17 AM
 Received : 22/Oct/2024 11:24 AM
 Reported : 22/Oct/2024 04:08 PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY
 ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.6	g/dL	13-17	CYANIDE FREE COLOURIMETER
PCV	37.20	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.14	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	89.8	fL	83-101	Calculated
MCH	32.7	pg	27-32	Calculated
MCHC	36.5	g/dL	31.5-34.5	Calculated
R.D.W	16.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,920	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	60.9	%	40-80	Electrical Impedance
LYMPHOCYTES	32.7	%	20-40	Electrical Impedance
EOSINOPHILS	1.5	%	1-6	Electrical Impedance
MONOCYTES	3.5	%	2-10	Electrical Impedance
BASOPHILS	1.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2996.28	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1608.84	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	73.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	172.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	68.88	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.86		0.78- 3.53	Calculated
PLATELET COUNT	219000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC :- Predominantly are Normocytic Normochromic

WBC :-TLC and DLC are within normal limits

PLATELETS:-Adequate

Page 2 of 7

Dr Gaurav Shorey
 MBBS, MD(Pathology)
 Consultant Pathologist

SIN No:BED240240575



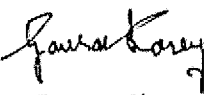


Patient Name : Mr.PANKUSH
Age/Gender LIVES : 28 Y 2 M 14 D/M
UHID/MR No : RAMR.0000045059
Visit ID : RAMROPV173257
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 7889288046

Collected : 22/Oct/2024 10:17AM
Received : 22/Oct/2024 11:24AM
Reported : 22/Oct/2024 04:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324

IMPRESSION : Normocytic Normochromic Blood Picture.


Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist
SIN No:BED240240575

Page 3 of 7





Patient Name : Mr.PANKUSH
 Age/Gender LIVES : 28 Y 2 M 14 D/M
 UHID/MR No : RAMR.0000045059
 Visit ID : RAMROPV173257
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 7889288046

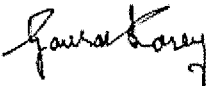
Collected : 22/Oct/2024 10:17 AM
 Received : 22/Oct/2024 11:24 AM
 Reported : 22/Oct/2024 01:15 PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

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




 Dr Gaurav Shorey
 MBBS, MD(Pathology)
 Consultant Pathologist
 SIN No:BED240240575



Patient Name : Mr.PANKUSH Age/Gender LIVES : 28 Y 2 M 14 D/M UHID/MR No : RAMR.0000045059 Visit ID : RAMROPV173257 Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 7889288046	Collected : 22/Oct/2024 10:17AM Received : 22/Oct/2024 11:24AM Reported : 22/Oct/2024 12:38PM Status : Final Report Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
---	--

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	90	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. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	141.45	U/l	0-45	IFCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes. ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear. The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL CHOLESTEROL , SERUM	237	mg/dl	0-200	CHOD

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

Dr Gaurav Shorey
 MBBS, MD(Pathology)
 Consultant Pathologist

SIN No:SE04838002





Patient Name	: Mr.PANKUSH	Collected	: 22/Oct/2024 10:17AM
Age/Gender LIVES	: 28 Y 2 M 14 D/M	Received	: 22/Oct/2024 11:24AM
UHID/MR No	: RAMR.0000045059	Reported	: 22/Oct/2024 12:38PM
Visit ID	: RAMROPV173257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 7889288046		

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
UREA , SERUM	25.01	mg/dl	13-43	Urease, UV
CREATININE , SERUM	0.77	mg/dL	0.67-1.17	Enzymatic colorimetric

Dr Gaurav Shorey
 MBBS, MD(Pathology)
 Consultant Pathologist

SIN No:SE04838002



Patient Name	: Mr.PANKUSH	Collected	: 22/Oct/2024 10:17AM
Age/Gender	: 28 Y 2 M 14 D/M	Received	: 22/Oct/2024 02:43PM
UHID/MR No	: RAMR.0000045059	Reported	: 22/Oct/2024 02:47PM
Visit ID	: RAMROPV173257	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 7889288046		

DEPARTMENT OF CLINICAL PATHOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324

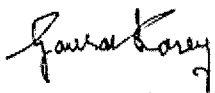
Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	6.0		5-7.5	Double Indicator
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
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	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	Microscopy
RBC	ABSENT	/hpf	0-2	Microscopy
CASTS	ABSENT		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.

*** End Of Report ***

Page 7 of 7



Dr Gaurav Shorey
 MBBS, MD(Pathology)
 Consultant Pathologist

SIN No:UR2417396





Patient Name : Mr.PANKUSH
Age/Gender : 28 Y 2 M 14 D/M
UHID/MR No : RAMR.0000045059
Visit ID : RAMROPV173257
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 7889288046

Collected : 22/Oct/2024 10:17AM
Received : 22/Oct/2024 02:43PM
Reported : 22/Oct/2024 02:47PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. 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 (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.

Dr Gaurav Shorey
MBBS, MD(Pathology)
Consultant Pathologist

SIN No:UR2417396





Date : 22-10-2024

MR NO : RAMR.0000045059

Name : Mr. Pankush

Age/ Gender : 28 Y / Male

Consultation Timing: 10:03

Department : GENERAL

Doctor :

Registration No :

Qualification : *optol*

VA L 616

n/n 6

Colour vision normal

26

Patient Name:	MR.PANKUSH 28YM	MR No:	RAMR.0000045059
Age:	28 Years	Location:	APOLLO CRADLE HOSPITAL AMRITSAR,PUNJAB
Gender:	M	Physician:	
Image Count:	1	Date of Exam:	22-Oct-2024
Arrival Time:	22-Oct-2024 10:58	Date of Report:	22-Oct-2024 11:19

X-RAY CHEST PA VIEW

FINDINGS

Normal heart and mediastinum.
There is no focal pulmonary mass lesion is seen.
No collapse or consolidation is evident.
The apices, costo and cardiophrenic angles are free.
No hilar or mediastinal lymphadenopathy is demonstrated.
There is no pleural or pericardial effusion.
No destructive osseous pathology is evident.

IMPRESSION:

No significant abnormality is seen.



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

CONFIDENTIALITY:

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

PLEASE NOTE:

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

ID: pankush

22.10.2024 10:29:50

Room:

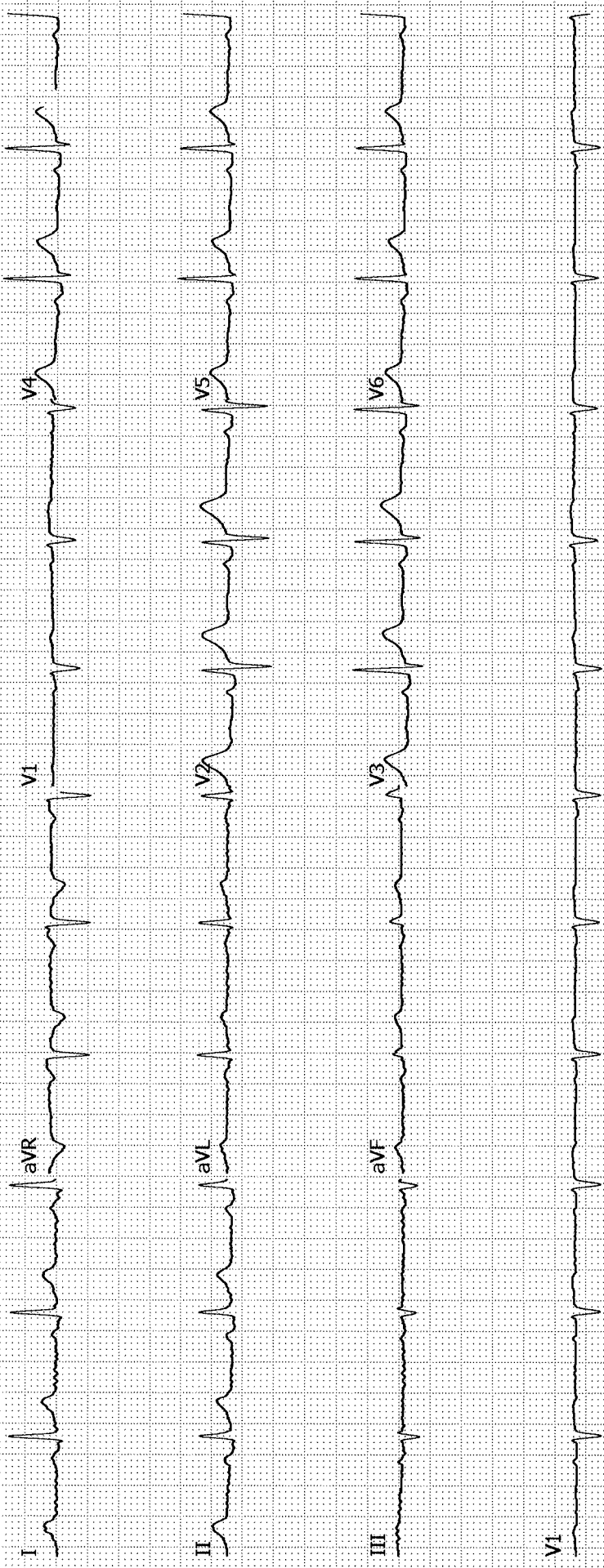
72 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 76 ms
QT / QTcBaz : 368 / 402 ms
PR : 162 ms
P : 104 ms
RR / PP : 834 / 833 ms
P / QRS / T : 35 / 24 / 27 degrees

Normal sinus rhythm
Normal ECG

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:



Apollo Clinic

CONSENT FORM

Patient Name: Pankaj Age: 28Y M
UHID Number: 45059 Company Name:

I Mr/Mrs/Ms Pankaj Employee of Arcofeni medical
(Company) Want to inform you that I am not interested in getting Strep

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

And I claim the above statement in my full consciousness.

Patient Signature: [Signature] Date: 22/01/24

Amritsar Clinic

From: noreply@apolloclinics.info
Sent: 18 October 2024 18:57
To: network@mediwheel.in
Cc: amritsar@apolloclinic.com; syamsunder.m@apollohl.com
Subject: Your appointment is confirmed



Dear Pankush Pankush,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **APOLLO CLINIC, AMRITSAR** clinic on **2024-10-21** at **08:00-08:15**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - PMC PACK D - PAN INDIA - FY2324]

"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.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

Clinic Address: NAUSHERA HOUSE, RAILWAY LINK ROAD, AMRITSAR – 143001.

Contact No: 0183-2840400.

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays. Kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic

