

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. S KARTHICKEYAN
EC NO.	173609
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	BANGALORE, VICTORIA ROAD
BIRTHDATE	04-04-1995
PROPOSED DATE OF HEALTH CHECKUP	24-02-2024
BOOKING REFERENCE NO.	23M173609100090540E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 13-02-2024 till 31-03-2024 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE	
CBC	CBC	
ESR	ESR	
Blood Group & RH Factor	Blood Group & RH Factor	
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting	
Blood and Urine Sugar PP	Blood and Urine Sugar PP	
Stool Routine	Stool Routine	
Lipid Profile	Lipid Profile	
Total Cholesterol	Total Cholesterol	
HDL	HDL	
LDL	LDL	
VLDL	VLDL	
Triglycerides	Triglycerides	
HDL / LDL ratio	HDL / LDL ratio	
Liver Profile	Liver Profile	
AST	AST	
ALT	ALT	
GGT	GGT	
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)	
ALP	ALP	
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)	
Kidney Profile	Kidney Profile	
Serum creatinine	Serum creatinine	
Blood Urea Nitrogen	Blood Urea Nitrogen	
Uric Acid	Uric Acid	
HBA1C	HBA1C	
Routine urine analysis	Routine urine analysis	
USG Whole Abdomen	USG Whole Abdomen	
General Tests	General Tests	
X Ray Chest	X Ray Chest	
ECG	ECG	
2D/3D ECHO / TMT	2D/3D ECHO / TMT	
Stress Test	Thyroid Profile (T3, T4, TSH)	
PSA Male (above 40 years)	Mammography (above 40 years)	
	and Pap Smear (above 30 years).	
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation	
Dental Check-up consultation	Physician Consultation	
Physician Consultation	Eye Check-up consultation	
Eye Check-up consultation	Skin/ENT consultation	
Skin/ENT consultation	Gynaec Consultation	





Name

Plan

: Mr. KARTHICKEYAN S

Age: 28 Y

Sex: M

UHID:CKOR.0000251551

OP Number: CKOROPV400886

Bill No :CKOR-OCR-81053

Date : 24.02.2024 09:57

Address: KORA

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

Sno	Serive Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECH	HO - PAN INDIA - FY2324
	I GAMMA GLUTAMYL TRANFERASE (GGT)	
1	2 D ECHO	
-	LIVER FUNCTION TEST (LFT)	
~	GLUCOSE, FASTING	
_	HEMOGRAM + PERIPHERAL SMEAR	
(DIET CONSULTATION	
1	COMPLETE URINE EXAMINATION	
18	URINE GLUCOSE(POST PRANDIAL)	
5	PERIPHERAL SMEAR	
40	LEG C	
1	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
	DENTAL CONSULTATION	
13	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
_14	URINE GLUCOSE(FASTING)	
15	HbA1c, GLYCATED HEMOGLOBIN	
16	X-RAY CHEST PA	
17	ENT CONSULTATION	0.00
-18	FITNESS BY GENERAL PHYSICIAN	Room no-23
	BLOOD GROUP ABO AND RH FACTOR	
20	LIPID PROFILE	
√21	BODY MASS INDEX (BMI)	
122	OPTHAL BY GENERAL PHYSICIAN	

Stagio- Room no 17.

23 ULTRASOUND - WHOLE ABDOMEN

24 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)

20152015 Manual 40

11:15

Bp-142/68 pulse - 52

n

WF







NAME: MR. KARTHICKEYAN S

AGE: 28Y

SEX:MALE

DATE: 24/02/2024

ECHOCARDIOGRAPHY REPORT

MEASUREMENT

AO - 22(20 – 35)mm	LIVD d – 45(36-52)mm	IVS - 10(06 - 11)mm
LA -29(19- 40)mm	LVID s –28(23- 39)mm	PWD – 11(06-11)mm
EF – 60 (>50%)	RVID-24	

VALVES

Mitral Valve

: Normal,

Aortic Valve

: Normal,,

Tricuspid Valve

: Normal, Trivial TR, RVSP – 22 mm

Pulmonary Valve

: Normal,

CHAMBERS

Left Atrium

: Normal

Right Atrium

: Normal

Left Ventricle

: Normal

Right Ventricle

: Normal

SEPTAE

IVS

: Intact

IAS

: Intact









GREAT ARTERIES

Aorta

: Normal

Pulmonary Artery

: Normal

DOPPLER DATA

Mitral

: E > A, 0.7/0.5

Aortic

: Normal , 1.0 m/s

Tricuspid

: Normal , 0.4 / 0.6

Pulmonary

: Normal, 1.10

WALL MOTION ABNORMALITIES

: No RWMA

Pericardium

: Normal

FINAL DIAGNOSIS

NORMAL CHAMBERS AND VALVES NO RWMA AT REST, LV EF - 60 % NORMAL DIASTOLIC FUNCTION NO OBVIOUS CLOTS/ EFFUSION/ VEGETATION

DR. MOHAN MURALI
DNB(MED), DYNB(CARDIOLOGY)
CONSULTANT CARDIOLOGIST





: Mr. KARTHICKEYAN S

UHID

: CKOR.0000251551

Reported on

: 24-02-2024 18:25

Adm/Consult Doctor

Age

: 28 Y M

OP Visit No

: CKOROPV400886

Printed on

: 25-02-2024 12:09

Ref Doctor

: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

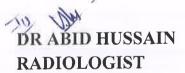
Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION: NORMAL STUDY.



Printed on:24-02-2024 18:25

---End of the Report---

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Reg.d. Office: 1-10-60/62, Ashoka Raghupathl 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 | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla)

Online appointments: www.apolloclinic.com

Page 1 of 1
TO BOOK AN APPOINTMENT

TO BOOK AN APPOINTMENT





Apollo Medical Centre Expertise. Closer to you.

DR AANCHAL AGGARWAL MITTAL M.B.B.S, MS (ENT) Phone No.9972044580,080-25633823/24/23

HEALTH CHECK-ENT

		menern ene	CR EIVI
NAME:	Karthicheyan S		AGE: 28) M.
EAR:	·	RE:	LE:
EXTERNA	AL EAR	M	
MIDDLE	EAR	(M)	(M)
INNER EA	AR (FN)		
HEARING	G ASSESSMENT:	RE;	LE:
RHINNE		tre	eve
WEBER		e Eq	mal →
ABC		Sam	qual -> as enamines.
NOSE		THROAT	
AIRWAY		ORAL CAVIT	Y N
SEPTUM	Mild DNS -XE	OROPHARY	
TURBINA	TES (N)	PHARYNX	M
OTHERS		LARYNX	
NECK			
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OTHER			
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IMPRESS	ION		Mar faul

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor; Ameerpet, Hyderabad, Telangana - 500 038 | Email ID: enquiry@apollohl.com **APOLLO CLINICS NETWORK KARNATAKA**

Bangalore (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (Kalidasa Road)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

SIGNATURE:

1860 500 7788

OPTHAL REPORT

NAME: Kasthickeyan S AGE: 28.GENDER: MALE/FEMALE

RIGHT EYE

	SPH	CYL	AXIS	VA
DV		plano		6/6
NV				luc

LEFT EYE

	SPH	CYL	AXIS	VA
DV		Plana		66
NV		,		46
				No

REMARK: Show black lens

DATE: 24/02/24

OPTOMETRIST

BRING THIS PRESCRIPTION IN YOUR NEXT VISIT



DR VIJAYA LAKSHMI M M.B.B.S, D.L.O, D.N.B(ENT) Phone No.9972044580,080-25633823/24/23

Apollo Medical Centre

Expertise. Closer to you

HEALTH CHECK-ENT

94	102/	M
24	1	TAT A T

NAME: Keltrickeyen & P

AGE: Joy /

EAR:

RE:

LE:

EXTERNAL EAR

MIDDLE EAR

INNER EAR (FN)

HEARING ASSESSMENT:

LE:

31 2

WEBER

RHINNE

ABC

RE:

NOSE

THROAT

AIRWAY

ORAL CAVITY

SEPTUM

OROPHARYNX

TURBINATES

PHARYNX

OTHERS

LARYNX

(

NECK

NECK NODES

OTHER

Normal

AUDIOMETRY

IMPRESSION

Nosmel

Myaylan SIGNATURE:

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor; Ameerpet, Hyderabad, Telangana - 500 038 | Email ID: enquiry@apollohl.com

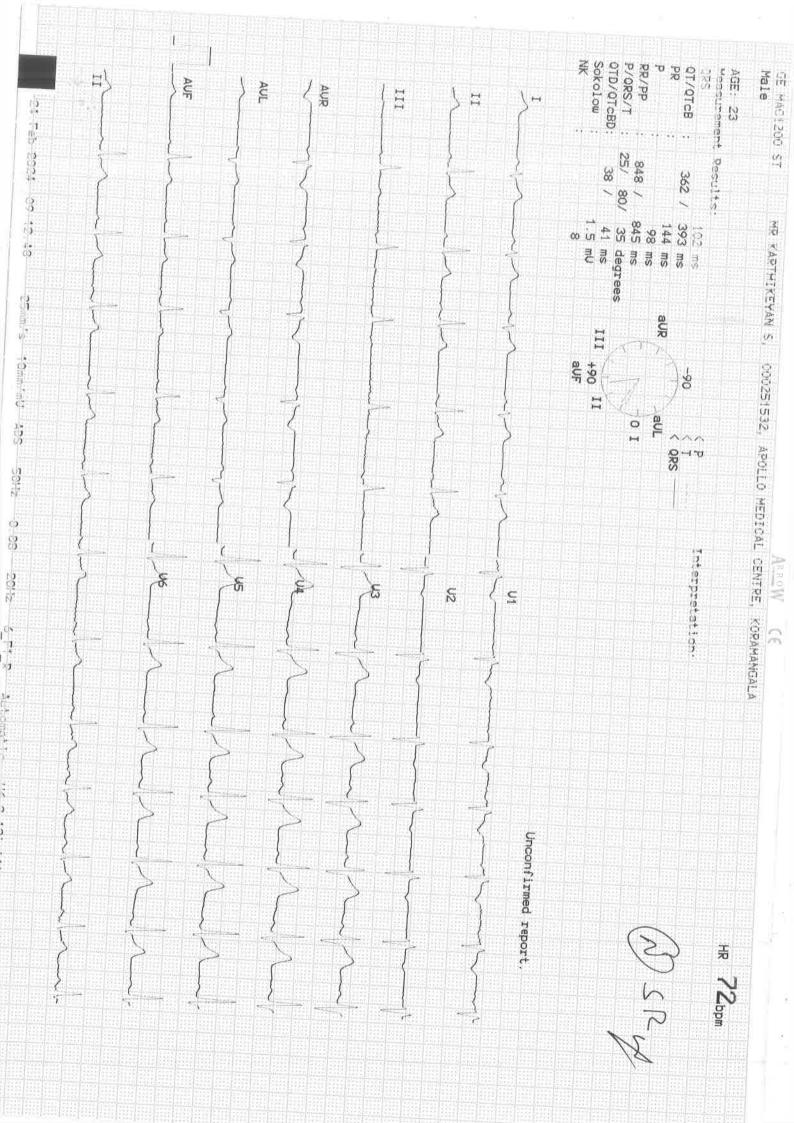
APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronics City | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (Kalidasa Road)

Online appointments: www.apollochus.com

TO BOOK AN APPOINTMENT

1860 500 7788









Patient Name UHID

Mr. Karthikeyan S ECKOR.0000251532 Dr. MOHAN MURALI Age OP Visit No Conducted Date

123 Y/M *CKOROP V400845 ±25-02-2024 10:43

Reported By: Referred By SELF

ECG REPORT

Observation:-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 72 beats per minutes.
- 3. No pathological Q wave or S-T,T changes seen.
- 4. Normal P,Q,R,S,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement see

Impression:

NORMAL RESTING ECG

Dr MOHAN MURALI CARDIOLOGIST

NOTE: KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED.

---- END OF THE REPORT -----







: Mr Karthicheyan S

Patient ID: 251551

Age

: 28Year(s)

Sex

: Male

1Referring Doctor: H/C

Date

: 24.02.2024

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and shows normal echotexture. No biliary dilatation. No focal lesion **CBD** is not dilated. **Portal vein** is normal in size, course and calibre.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

Right Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Prostate: normal in size and exchotexture.

There is no ascites.

IMPRESSION: NO SIGNIFICANT ABNORMALITIES DETECTED.

DR VINOD JOSEPH DNB,DMRD

RADIOLOGIST





Plan

Name Mr. KARTHICKEYAN S

Age: 28 Y

UHID:CKOR.0000251551

Sex: M

OP Number: CKOROPV400886

Bill No :CKOR-OCR-81053

Address: KORA

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

Date : 24.02.2024 09:57 Serive Type/ServiceName Department ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324 1 GAMMA GLUTAMYL TRANFERASE (GGT) 22 D ECHO 3 LIVER FUNCTION TEST (LFT) 4GLUCOSE, FASTING THEMOGRAM + PERIPHERAL SMEAR 6 DIET CONSULTATION 7 COMPLETE URINE EXAMINATION SURINE GLUCOSE(POST PRANDIAL) 9 PERIPHERAL SMEAR 10 Eeg 4 HRENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) 12 DENTAL CONSULTATION 13 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 14 URINE GLUCOSE(FASTING) HbA1c, GLYCATED HEMOGLOBIN 16 X-RAY CHEST PA 17 ENT CONSULTATION Room no-23 18 FITNESS BY GENERAL PHYSICIAN BLOOD GROUP ABO AND RH FACTOR 20 LIPID PROFILE 21 BODY MASS INDEX (BMI) 7 22 OPTHAL BY GENERAL PHYSICIAN 23 ULTRASOUND - WHOLE ABDOMEN 24 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)

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50123012 Monal 40

12:14

Bp-142/68
pulse - 52







CERTIFICATE OF MEDICAL FITNESS

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

Medically Fit	
Fit with restrictions/recommendations	
Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
2.	
However the employee should follow the advice/medication that has been communicated to him/her.	
occir communicated to minumer.	71
Review after	
9 E	

Medical Officer

The Apollo Clinic (Location)

This certificate is not meant for medico - legal purposes.

Unfit

Patient Name : Mr. KARTHICKEYAN S Age : 28 Y/M

UHID : CKOR.0000251551 OP Visit No : CKOROPV400886 Reported By: : Dr. TOBY ABRAHAM THOMAS Conducted Date : 25-02-2024 08:54

Referred By : SELF

ECG REPORT

Observation:-

- 1. Sinus Bradycardia.
- 2. Heart rate is 59 beats per minutes.
- 3. No pathological Q wave or S-T,T changes seen.
- 4. Normal P,Q,R,S,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

Dr. TOBY ABRAHAM THOMAS CONSULTANT

NOTE:KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED.

Patient Name : Mr. KARTHICKEYAN S Age : 28 Y/M

UHID : CKOR.0000251551 OP Visit No : CKOROPV400886 Reported By: : Dr. TOBY ABRAHAM THOMAS Conducted Date : 25-02-2024 08:54

Referred By : SELF

---- END OF THE REPORT -----



Patient Name	: Mr. KARTHICKEYAN S	Age/Gender	: 28 Y/M
UHID/MR No.	: CKOR.0000251551	OP Visit No	: CKOROPV400886
Sample Collected on	:	Reported on	: 28-02-2024 11:43
LRN#	: RAD2247261	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: NA		
-			

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver is normal in size and shows normal echotexture. No biliary dilatation. No focal lesion **CBD** is not dilated. **Portal vein** is normal in size, course and calibre.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

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Left Kidney is normal in size, position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Prostate: normal in size and exchotexture.

There is no ascites.

IMPRESSION: NO SIGNIFICANT ABNORMALITIES DETECTED.



Patient Name : Mr. KARTHICKEYAN S Age/Gender

: 28 Y/M

DR VINOD JOSEPH DNB,DMRD RADIOLOGIST



Patient Name : Mr. KARTHICKEYAN S Age/Gender : 28 Y/M

UHID/MR No. :

: CKOR.0000251551

Sample Collected on :

LRN#

: RAD2247261

Ref Doctor : SELF **Emp/Auth/TPA ID** : NA

OP Visit No Reported on Specimen : CKOROPV400886 : 24-02-2024 18:25

. 24-02-2024 10.23

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION: NORMAL STUDY.

DR ABID HUSSAIN RADIOLOGIST







Patient Name : Mr.KARTHICKEYAN S

Age/Gender : 28 Y 10 M 20 D/M

UHID/MR No : CKOR.0000251551

Visit ID : CKOROPV400886

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : NA Collected : 24/Feb/2024 10:30AM

Received : 24/Feb/2024 11:20AM Reported : 24/Feb/2024 12:10PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	16.3	g/dL	13-17	Spectrophotometer
PCV	47.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.85	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	98	fL	83-101	Calculated
MCH	33.5	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	12.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,630	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)			•
NEUTROPHILS	44.2	%	40-80	Electrical Impedance
LYMPHOCYTES	44.1	%	20-40	Electrical Impedance
EOSINOPHILS	2.4	%	1-6	Electrical Impedance
MONOCYTES	8.7	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2488.46	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2482.83	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	135.12	Cells/cu.mm	20-500	Calculated
MONOCYTES	489.81	Cells/cu.mm	200-1000	Calculated
BASOPHILS	33.78	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1		0.78- 3.53	Calculated
PLATELET COUNT	228000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	3	mm at the end of 1 hour	0-15	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

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

Page 1 of 14

SIN No:BED240048774

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No

: CKOR.0000251551

Visit ID Ref Doctor : CKOROPV400886

Emp/Auth/TPA ID

: Dr.SELF

: NA

Collected

: 24/Feb/2024 10:30AM

Received

: 24/Feb/2024 11:20AM

Reported

: 24/Feb/2024 12:10PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Page 2 of 14

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

SIN No:BED240048774

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No

: CKOR.0000251551

Visit ID

: CKOROPV400886

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: NA

Collected

: 24/Feb/2024 10:30AM

Received

: 24/Feb/2024 11:20AM

Reported

: 24/Feb/2024 02:37PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FAC	TOR , WHOLE BLOOD EDTA	Ì		
BLOOD GROUP TYPE	AB			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 3 of 14

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

SIN No:BED240048774

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE









: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No

: CKOR.0000251551

Visit ID

: CKOROPV400886

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: NA

Collected

: 24/Feb/2024 10:30AM

Received

: 24/Feb/2024 11:31AM

Reported Status : 24/Feb/2024 01:25PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	89	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)	80	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN),	VHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.3	%		HPLC

Page 4 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240021991

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFSTYLE LIMITED- RRL BANGALORE

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









Patient Name : Mr.KARTHICKEYAN S

Age/Gender : 28 Y 10 M 20 D/M

UHID/MR No : CKOR.0000251551

Visit ID : CKOROPV400886

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : NA Collected : 24/Feb/2024 10:30AM

Received : 24/Feb/2024 11:31AM Reported : 24/Feb/2024 01:25PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

ESTIMATED AVERAGE GLUCOSE	105	mg/dL	Calculated
(eAG)			

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.

- 1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- 2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 3. 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.
- 4. 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.
- 5. 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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Ref Doctor : Dr.SELF Emp/Auth/TPA ID : NA Collected : 24/Feb/2024 10:30AM Received : 24/Feb/2024 11:51AM

Reported : 24/Feb/2024 12:57PM Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	212	mg/dL	<200	CHO-POD
TRIGLYCERIDES	64	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	61	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	151	mg/dL	<130	Calculated
LDL CHOLESTEROL	138	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.47		0-4.97	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

- 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.
- 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.

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DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04640665

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APOLLO CLINICS NETWORK









: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No Visit ID : CKOR.0000251551

Ref Doctor

: CKOROPV400886

Emp/Auth/TPA ID

: Dr.SELF : NA Collected

: 24/Feb/2024 10:30AM

Received

: 24/Feb/2024 11:51AM

Reported Status : 24/Feb/2024 12:57PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Page 7 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04640665

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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
IVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.86	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.74	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	29	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	26.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	56.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.06	g/dL	6.6-8.3	Biuret
ALBUMIN	4.35	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.71	g/dL	2.0-3.5	Calculated
A/G RATIO	1.61		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 > 1In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons'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.

Page 8 of 14



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Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION	TEST (RFT/KFT), SEF	RUM		
CREATININE	0.94	mg/dL	0.67-1.17	Jaffe's, Method
UREA	28.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.81	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.03	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	136	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.5	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)

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DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No

: CKOR.0000251551

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Ref Doctor Emp/Auth/TPA ID

: NA

: Dr.SELF

Collected

: 24/Feb/2024 10:30AM

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: 24/Feb/2024 11:51AM

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Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL	55.00	U/L	<55	IFCC
TRANSPEPTIDASE (GGT), SERUM				

Page 10 of 14



DR.SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

SIN No:SE04640665

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: Mr.KARTHICKEYAN S

Age/Gender

: 28 Y 10 M 20 D/M

UHID/MR No

: CKOR.0000251551

Visit ID Ref Doctor : CKOROPV400886

: Dr.SELF

Emp/Auth/TPA ID : NA

Collected

: 24/Feb/2024 10:30AM

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: 24/Feb/2024 11:51AM

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: 24/Feb/2024 12:47PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH)	, SERUM			
TRI-IODOTHYRONINE (T3, TOTAL)	1.11	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.94	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.292	μIU/mL	0.34-5.60	CLIA

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	Т3	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

Page 11 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24032205

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

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APOLLO CLINICS NETWORK









: Mr.KARTHICKEYAN S

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: 28 Y 10 M 20 D/M

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: Dr.SELF

: NA

Collected

: 24/Feb/2024 10:30AM

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: 24/Feb/2024 11:51AM : 24/Feb/2024 12:47PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Page 12 of 14



DR.SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

SIN No:SPL24032205

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Visit ID : CKOROPV400886

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Collected : 24/Feb/2024 10:30AM Received : 24/Feb/2024 01:04PM

: 24/Feb/2024 03:50PM Reported

: Final Report : ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF CLINICAL PATHOLOGY

Status

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS 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	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
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	1		
PUS CELLS	2-3	/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

Page 13 of 14

Dr. Chinki Anupam M.B.B.S,M.D(Pathology) Consultant Pathologist

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



SIN No:UR2290843

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

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Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: NA

Collected

: 24/Feb/2024 10:30AM

Received

: 24/Feb/2024 01:04PM

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: 24/Feb/2024 03:45PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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 ***

Result/s to Follow: PERIPHERAL SMEAR

Page 14 of 14

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

SIN No:UF010785

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

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