

Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA	Collected : 27/Jul/2024 08:12AM
Age/Gender : 39 Y 9 M 25 D/M	Received : 27/Jul/2024 01:41PM
UHID/MR No : CJPN.0000096427	Reported : 27/Jul/2024 02:51PM
Visit ID : CJPNOPV201908	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S30085	

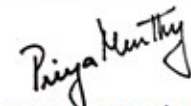
DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
<b>HAEMOGLOBIN</b>	15.2	g/dL	13-17	Spectrophotometer
PCV	43.60	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.72	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	92.2	fL	83-101	Calculated
MCH	<b>32.1</b>	pg	27-32	Calculated
MCHC	<b>34.8</b>	g/dL	31.5-34.5	Calculated
R.D.W	12.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,760	cells/cu.mm	4000-10000	Electrical Impedance
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	45.9	%	40-80	Electrical Impedance
LYMPHOCYTES	<b>43.8</b>	%	20-40	Electrical Impedance
EOSINOPHILS	2.2	%	1-6	Electrical Impedance
MONOCYTES	7.3	%	2-10	Electrical Impedance
BASOPHILS	0.8	%	<1-2	Electrical Impedance
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3102.84	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2960.88	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	148.72	Cells/cu.mm	20-500	Calculated
MONOCYTES	493.48	Cells/cu.mm	200-1000	Calculated
BASOPHILS	54.08	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.05		0.78- 3.53	Calculated
<b>PLATELET COUNT</b>	188000	cells/cu.mm	150000-410000	Electrical impedance
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	5	mm at the end of 1 hour	0-15	Modified Westegren method
<b>PERIPHERAL SMEAR</b>				



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:BED240196397

This test has been performed at Apollo Health & Lifestyle Lab, 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

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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)

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## DEPARTMENT OF HAEMATOLOGY

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

RBCs: are normocytic normochromic

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

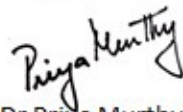
PLATELETS: appear adequate in number.

HEMOPARASITES: negative

**IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE**



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



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



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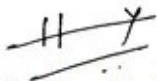
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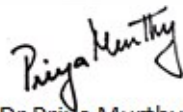
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Dr. Harshitha Y  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



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



SIN No: BED240196397

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 1860 500 7788  
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Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA	Collected : 27/Jul/2024 11:34AM
Age/Gender : 39 Y 9 M 25 D/M	Received : 27/Jul/2024 05:50PM
UHID/MR No : CJPN.0000096427	Reported : 27/Jul/2024 06:28PM
Visit ID : CJPNOPV201908	Status : Final Report
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Emp/Auth/TPA ID : 22S30085	

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	98	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

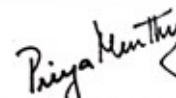
Note:

- 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)	100	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.

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



SIN No:PLP1477499

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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
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	117	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.

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

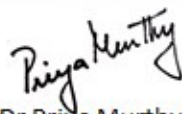
A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



Dr.Govinda Raju N L  
MSc,PhD(Biochemistry)  
Consultant Biochemistry



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



SIN No:EDT240081019

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Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA	Collected : 27/Jul/2024 08:12AM
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIPID PROFILE , SERUM</b>				
TOTAL CHOLESTEROL	176	mg/dL	<200	CHO-POD
TRIGLYCERIDES	50	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	50	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	126	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>115.9</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	10	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.52		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated


**Comment:**

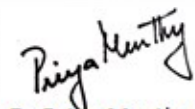
Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	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

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

  
Dr. Govinda Raju N L  
MSc, PhD (Biochemistry)  
Consultant Biochemistry

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



SIN No: SE04792896

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.63	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	37	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	35.0	U/L	<50	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.0		<1.15	Calculated
ALKALINE PHOSPHATASE	82.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.34	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.96	g/dL	2.0-3.5	Calculated
A/G RATIO	1.47		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:

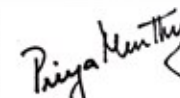
\*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.  
 \*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. 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. ALP elevation also seen in pregnancy, impacted by age and sex. \*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:

  
 Dr.Govinda Raju N L  
 MSc,PhD(Biochemistry)  
 Consultant Biochemistry

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



SIN No:SE04792896

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE 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 |  
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**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)

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 Neeladri Nagar, Electronic city, Bengaluru,  
 Karnataka- 560034

  
 1860 500 7788  
 www.apolloclinic.com

Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA  
Age/Gender : 39 Y 9 M 25 D/M  
UHID/MR No : CJPN.0000096427  
Visit ID : CJPNOPV201908  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 22S30085

Collected : 27/Jul/2024 08:12AM  
Received : 27/Jul/2024 12:57PM  
Reported : 27/Jul/2024 02:32PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF BIOCHEMISTRY

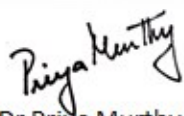
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

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

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



Dr.Govinda Raju N L  
MSc,PhD(Biochemistry)  
Consultant Biochemistry



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



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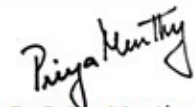
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	1.00	mg/dL	0.84 - 1.25	Modified Jaffe, Kinetic
UREA	22.70	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.91	mg/dL	3.5-7.2	Uricase PAP
CALCIUM	9.60	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.00	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.30	g/dL	6.6-8.3	Biuret
ALBUMIN	4.34	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.96	g/dL	2.0-3.5	Calculated
A/G RATIO	1.47		0.9-2.0	Calculated

  
**Dr. Govinda Raju N L**  
 MSc, PhD (Biochemistry)  
 Consultant Biochemistry

  
**Dr. Priya Murthy**  
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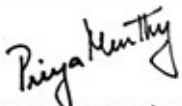
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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	29.00	U/L	<55	IFCC



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Age/Gender : 39 Y 9 M 25 D/M	Received : 27/Jul/2024 12:57PM
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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
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	2.02	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	12.19	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.688	µIU/mL	0.34-5.60	CLIA

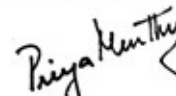
Comment:

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

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

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism

Page 11 of 16

  
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SIN No:SPL24123742

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**DEPARTMENT OF IMMUNOLOGY**

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

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



*Priya Murthy*

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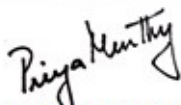
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Test Name	Result	Unit	Bio. Ref. Range	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.320	ng/mL	0-4	CLIA

Comment:

Disclaimer: \*The results determined by assays using different manufacturers or methods may not be comparable.

Manufacturer: BECKMAN COULTER



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DEPARTMENT OF CLINICAL PATHOLOGY

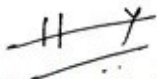
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	PALE YELLOW		PALE YELLOW	Physical measurement
TRANSPARENCY	Clear		CLEAR	Physical measurement
pH	7.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.004		1.002-1.030	Dipstick
<b>BIOCHEMICAL EXAMINATION</b>				
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
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	0	/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

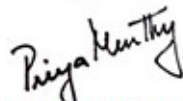
**Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked

Page 14 of 16



Dr. Harshitha Y  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



Dr. Priya Murthy  
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SIN No: UR2394237

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Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA  
Age/Gender : 39 Y 9 M 25 D/M  
UHID/MR No : CJPN.0000096427  
Visit ID : CJPNOPV201908  
Ref Doctor : Dr.SELF  
Emp/Auth/TPA ID : 22S30085

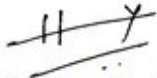
Collected : 27/Jul/2024 08:12AM  
Received : 27/Jul/2024 02:40PM  
Reported : 27/Jul/2024 03:33PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### DEPARTMENT OF CLINICAL PATHOLOGY

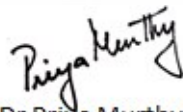
**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324**

and verified by manual methods.

Microscopy findings are reported as an average of 10 high power fields.



Dr. Harshitha Y  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



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



SIN No: UR2394237

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

THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE 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

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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

Patient Name : Mr.KAMARTHI MARIDI RGHUNATHA	Collected : 27/Jul/2024 08:12AM
Age/Gender : 39 Y 9 M 25 D/M	Received : 27/Jul/2024 01:34PM
UHID/MR No : CJPN.0000096427	Reported : 27/Jul/2024 02:37PM
Visit ID : CJNOPV201908	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S30085	

DEPARTMENT OF CLINICAL PATHOLOGY

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

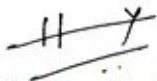
Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

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

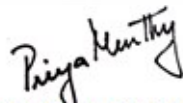
\*\*\* End Of Report \*\*\*

Result/s to Follow:  
PERIPHERAL SMEAR

Page 16 of 16



Dr. Harshitha Y  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



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



SIN No: UF011945

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

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**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

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Karnataka - 560034

 1860 500 7788  
www.apolloclinic.com

<b>Name</b> : Mr. Kamarthi Maridi Rghunatha  <b>Address</b> : blr  <b>Plan</b> : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT	<b>Age</b> : 39 Y  <b>Sex</b> : M	<b>UHID</b> :CJPN.0000096427  <b>OP Number</b> :CJPNOPV201908 <b>Bill No</b> :CJPN-OCR-72914 <b>Date</b> : 27.07.2024 08:06
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	
3	2D ECHO →	
4	LIVER FUNCTION TEST (LFT)	
5	GLUCOSE, FASTING	
6	HEMOGRAM → PERIPHERAL SMEAR	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	EKG	
12	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
13	DENTAL CONSULTATION - 15	
14	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) - OG	
15	URINE GLUCOSE(FASTING)	
16	HbA1c, GLYCATED HEMOGLOBIN	
17	X-RAY CHEST PA - 18	
18	DENT CONSULTATION - OS	
19	FITNESS BY GENERAL PHYSICIAN →	
20	BLOOD GROUP ABO AND RH FACTOR	
21	LIPID PROFILE	
22	BODY MASS INDEX (BMI)	
23	OPHTHAL BY GENERAL PHYSICIAN	
24	ULTRASOUND - WHOLE ABDOMEN - 10	
25	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

*Physio*

*Weight - 75.70kg.*

*Height = 170cm.*

*BP = 116/80mmHg*

*PR = 68b/min*



Name: Kameswari narasi Raghunatha

Date: 27/7/24

Age: 39 years

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

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Optical

OD: 6/6 N6

OS: 6/6 N6

Colour vision test Normal.

RE: +0.50 / -0.50 X 80

LE: +0.25 / -0.50 X 70

Near: +1.50 add.

No med. to change. the spectacles  
it is same power.

Follow up date:

After 6 months

Doctor Signature



Kannathu Maegi Rglubatha 31/09.

Height : 170cm	Weight : 75-7kg	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 116/84 mmHg

General Examination / Allergies History

Non Vegetarian;  
(Hindu)

No Food Allergy or food intolerance.

Back pain issues.

Clinical Diagnosis & Management Plan

Skq reduction - well in ideal body wt.

D-lisc bok - monthly once.

Neurobion Forte - Daily 1 (for 3 months).

\_\_\_\_\_ -  
come after Rpts.

Recommended to meet Physio therapist

Recommended to HbA1C

Follow up date:

Nandana  
nutician  
Doctor Signature



Corporate Health Checks

3/77

Search for appointments using the search bar below

Search with Mobile No. or Appointment ID

Choose Date

27-07-2024



Patient Details

Patient First Name

Kamarthi Maridi

Patient Last Name

Rghunatha

Patient Mobile Number

8095484435

Patient E-mail ID

lvsubha@gmail.com

Date of Birth

01-02-1985

Gender

male

Client

ARCOFEMI HEALTHCARE LIMITED

Agreement Name

(1) ARCOFEMI MEDIWHEEL MALE AHC CREDIT



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723 0075 1751

ಧರಣ್ ಕರ್ನಾಟಕ  
Raghunatha Kanwarhi Mandi  
ದಿ. ಆರಾಂ / DOB : 02/10/1984  
ಸಿಂಗ / Male



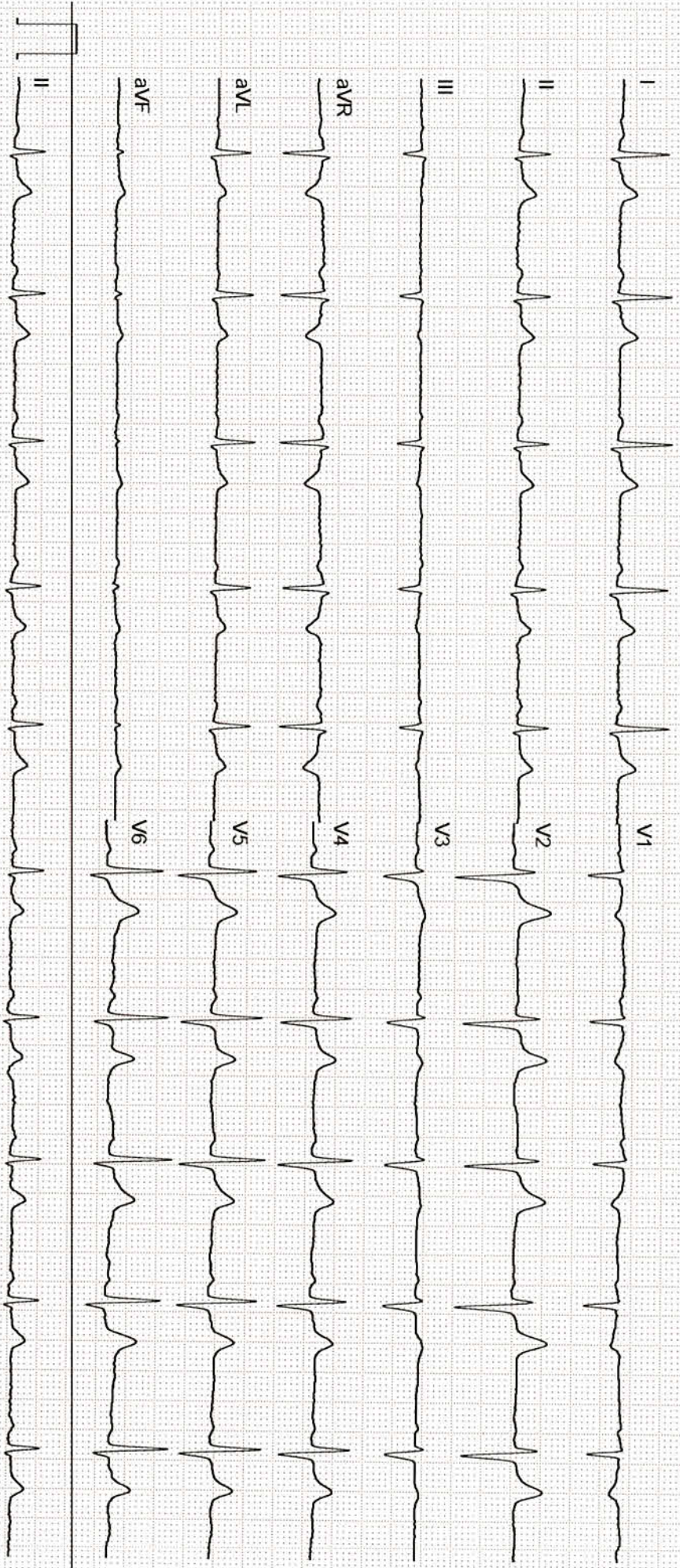


39 Years 170 cm Male  
75.0 kg

QRS	92 ms
QT / QTcBaz	408 / 414 ms
PR	152 ms
P	90 ms
RR / PP	970 / 967 ms
P / QRS / T	31 / 4 / 18 degrees

Normal sinus rhythm  
Cannot rule out Anterior infarct , age undetermined  
Abnormal ECG

Handwritten signature and initials in blue ink.



Unconfirmed



Patient Name	: Mr. Kamarthi Maridi Rghunatha	Age	: 39 Y/M
UHID	: CJPN.0000096427	OP Visit No	: CJPNOPV201908
Conducted By:	: Dr. NAGARAJA MOORTHY	Conducted Date	: 27-07-2024 14:30
Referred By	: SELF		

### 2D ECHO WITH COLOR DOPPLER

AO Diam	3.0cm	LA Diam	: 3.4cm		
IVSd	: 0.9cm	IVSs	: 1.3 cm	LVIDd	: 4.6cm
LVPWS	: 1.3m	EF	: 65%	RVIDd	: 2.0cm
				LVIDs	: 2.2 cm
				LVPWd	: 0.9cm

### 2DVALVES

MITRAL VALVE -----: NORMAL  
 TRICUSPID VALVE-----: NORMAL  
 AORTIC VALVE-----: NORMAL  
 PULMONARY VALVE-----: NORMAL

### CHAMBERS

LEFT ATRIUM-----: NORMAL.  
 RIGHT ATRIUM-----: NORMAL  
 LEFT VENTRICULAR-----: NORMAL  
 RIGHT VENTRICULAR---: NORMAL

### DOPPLER

MV E Vel : 1.0m/s , MV A Vel : 1.0m/s  
 TRICUSPID VALVE : NORMAL  
 PERICARDIUM-----: NORMAL  
 CLOT/VEGETATION-----: NIL

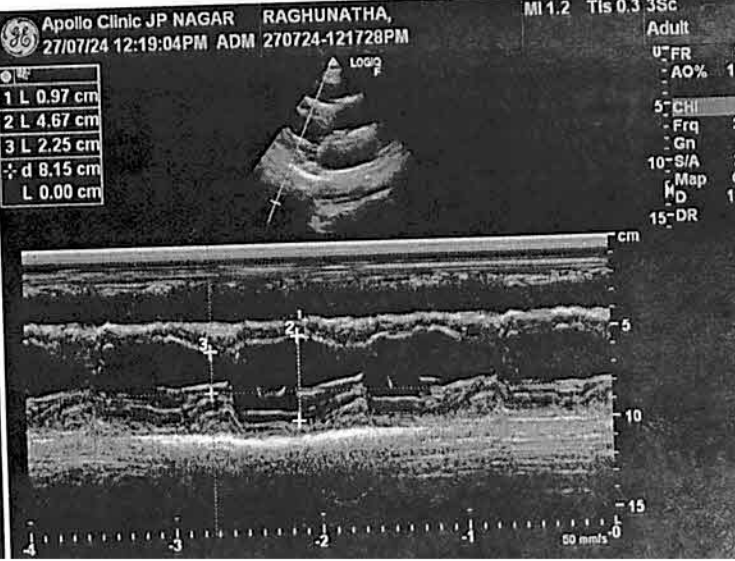
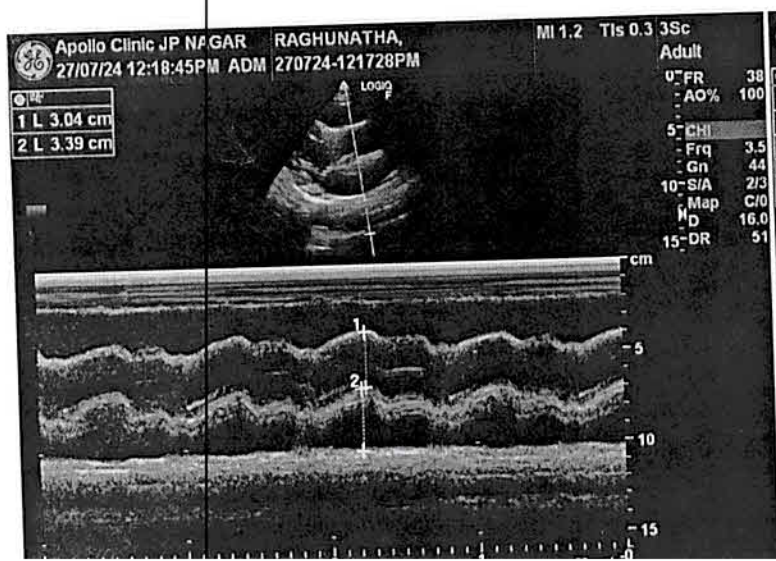
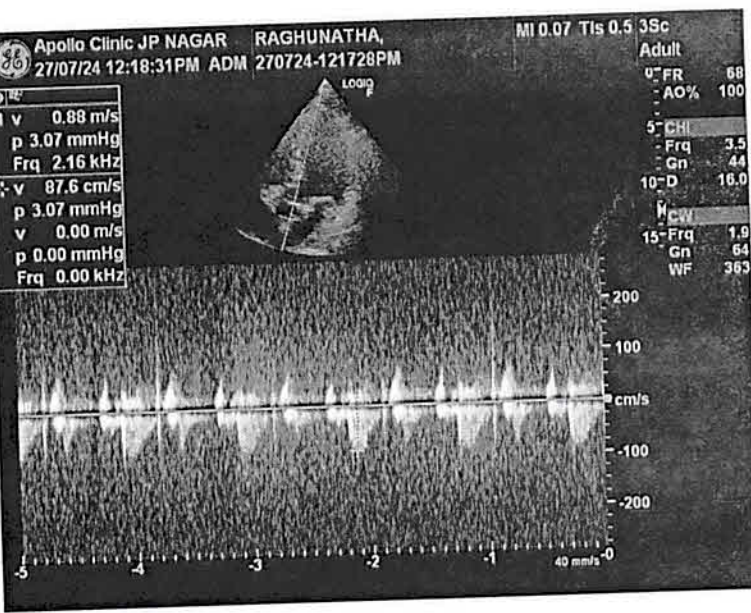
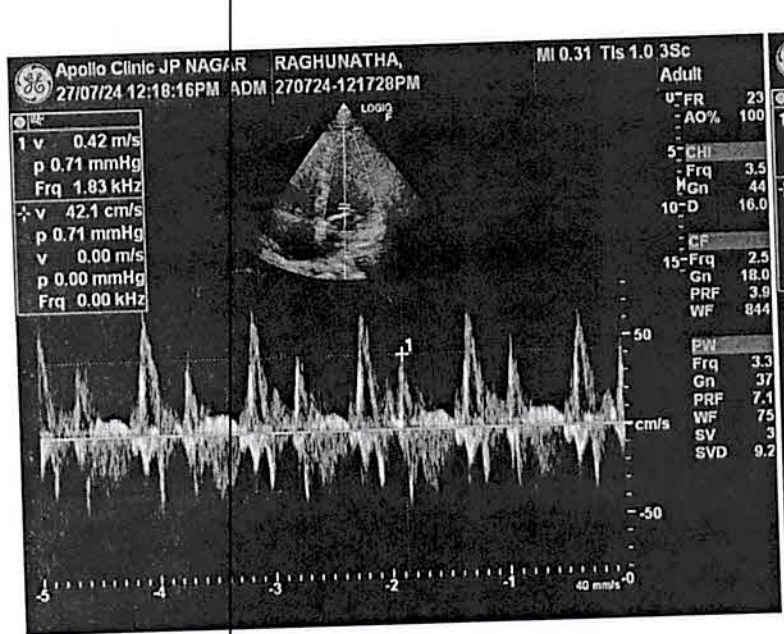
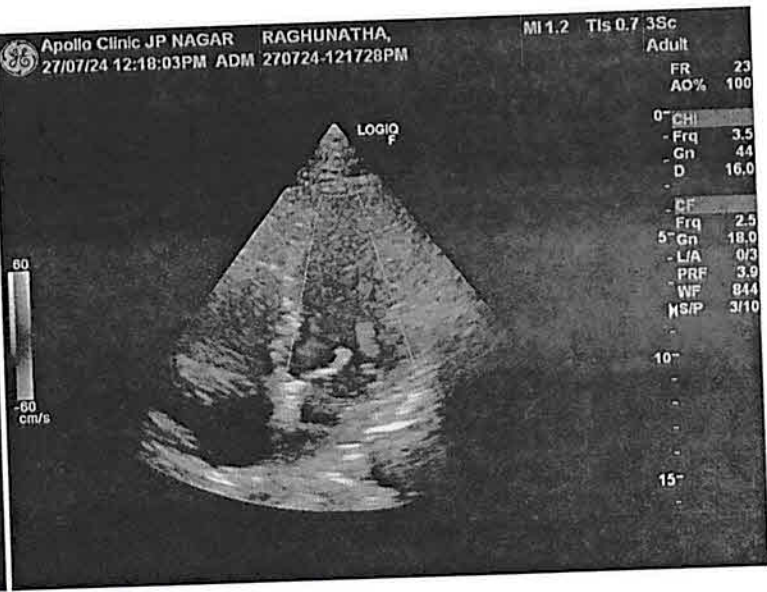
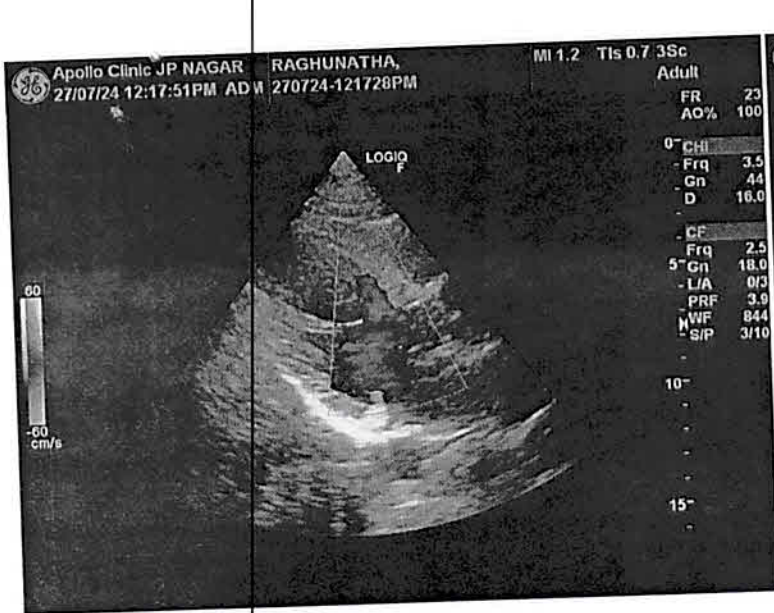
### IMPRESSION

NORMAL VALVES AND CHAMBERS  
 NORMAL LV SYSTOLIC FUNCTION  
 NO CLOT /VEGETATION/EFFUSION/PAH  
 NO REGIONAL WALL MOTION ABNORMALITIES

  
 DR. NAGARAJA MOORTHY, MD, DM

CONSULTANT CARDIOLOGIST





**Patient Name** : Mr. Kamarthi Maridi Rghunatha

**Age/Gender** : 39 Y/M

**UHID/MR No.** : CJPN.0000096427

**OP Visit No** : CJPNOPV201908

**Sample Collected on** :

**Reported on** : 27-07-2024 10:39

**LRN#** : RAD2389188

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 22S30085

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**DEPARTMENT OF RADIOLOGY**

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**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.

**CONCLUSION :**

No obvious abnormality seen.

**Dr. KUSUMA JAYARAM**  
MBBS,DMRD  
Radiology

<b>Patient Name</b>	: Mr. Kamarthi Maridi Rghunatha	<b>Age/Gender</b>	: 39 Y/M
<b>UHID/MR No.</b>	: CJPN.0000096427	<b>OP Visit No</b>	: CJPNOPV201908
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 27-07-2024 08:47
<b>LRN#</b>	: RAD2389188	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 22S30085		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**LIVER** : Normal in size and echotexture. No focal lesion seen.

No intra hepatic biliary / venous radicular dilation.

CBD and Main Portal vein appear normal.

**GALL BLADDER** : Well distended. **Polyp seen measuring~4.4mm.** Wall Thickness is normal.

**SPLEEN** : Normal in size and echotexture. No focal lesion was seen.

**PANCREAS** : Normal to the visualized extent.

**KIDNEYS** : Both kidneys are normal in size, shape and outlines Cortico medullary delineation is maintained. No Hydronephrosis / No calculi.

Right kidney measures:10.4 x 1.3 cm.

Left kidney measures : 9.8 x 1.6 cm.

**URINARY BLADDER** : Well distended. Normal in internal contents. Wall thickness is normal.

**PROSTATE**: Normal in size and echotexture.

Volume-23 cc.

No free fluid is seen in the peritoneum. No lymphadenopathy.

### **IMPRESSION : GALL BLADDER POLYP .**

Please Note :No preparation done before scanning.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.





**Patient Name** : Mr. Kamarthi Maridi Rghunatha

**Age/Gender** : 39 Y/M

---

**Dr. AKSHAY A RESHMI**  
MBBS, MD (Radiology)  
Radiology

Patient Name : Mr. Kamarthi Maridi Rghunatha  
UHID : CJPN.0000096427  
Conducted By: :  
Referred By : SELF

Age : 39 Y/M  
OP Visit No : CJPNOPV201908  
Conducted Date :

Patient Name : Mr. Kamarthi Maridi Rghunatha  
UHID : CJPN.0000096427  
Conducted By :  
Referred By : SELF

Age : 39 Y/M  
OP Visit No : CJPNOPV201908  
Conducted Date :

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