

Patient Name : Mr.SACHIN VERMA	Collected : 29/Jul/2023 11:24AM
Age/Gender : 40 Y 7 M 11 D/M	Received : 29/Jul/2023 04:52PM
UHID/MR No : CPIM.0000111911	Reported : 29/Jul/2023 06:39PM
Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOI1553	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	16.5	g/dL	13-17	Spectrophotometer
PCV	49.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.07	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	97.1	fL	83-101	Calculated
MCH	32.5	pg	27-32	Calculated
MCHC	33.5	g/dL	31.5-34.5	Calculated
R.D.W	13.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,220	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	56.7	%	40-80	Electrical Impedance
LYMPHOCYTES	31.4	%	20-40	Electrical Impedance
EOSINOPHILS	2.3	%	1-6	Electrical Impedance
MONOCYTES	9.3	%	2-10	Electrical Impedance
BASOPHILS	0.3	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2959.74	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1639.08	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	120.06	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	485.46	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	15.66	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	255000	cells/cu.mm	150000-410000	Electrical impedance

ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN.



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Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

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



Patient Name : Mr.SACHIN VERMA	Collected : 29/Jul/2023 11:24AM
Age/Gender : 40 Y 7 M 11 D/M	Received : 29/Jul/2023 04:54PM
UHID/MR No : CPIM.0000111911	Reported : 29/Jul/2023 06:24PM
Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBO11553	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , SODIUM FLUORIDE PLASMA	93	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	126	mg/dL	70-140	HEXOKINASE
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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.

Ref: Marks medical biochemistry and clinical approach

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	108	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING 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. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.SACHIN VERMA	Collected : 29/Jul/2023 11:24AM
Age/Gender : 40 Y 7 M 11 D/M	Received : 29/Jul/2023 04:51PM
UHID/MR No : CPIM.0000111911	Reported : 29/Jul/2023 07:58PM
Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOI1553	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.65	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.52	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	81.4	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	48.5	U/L	<50	IFCC
ALKALINE PHOSPHATASE	87.31	U/L	30-120	IFCC
PROTEIN, TOTAL	7.41	g/dL	6.6-8.3	Biuret
ALBUMIN	4.03	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.38	g/dL	2.0-3.5	Calculated
A/G RATIO	1.19		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.68	mg/dL	0.72 – 1.18	Modified Jaffe, Kinetic
UREA	27.23	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	12.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.81	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.52	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.31	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	133	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.1	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	96.85	mmol/L	101–109	ISE (Indirect)



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Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOI1553	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
ALKALINE PHOSPHATASE , SERUM	87.31	U/L	30-120	IFCC
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	35.49	U/L	<55	IFCC



Patient Name : Mr.SACHIN VERMA	Collected : 29/Jul/2023 11:24AM
Age/Gender : 40 Y 7 M 11 D/M	Received : 29/Jul/2023 04:55PM
UHID/MR No : CPIM.0000111911	Reported : 29/Jul/2023 06:47PM
Visit ID : CPIMOPV147520	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : UBOI1553	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY PLUS ANNUAL CHECK ADVANCED HC MALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	0.93	ng/mL	0.7-2.04	CLIA
Thyroxine (T4, TOTAL)	9.81	µg/dL	6.09-12.23	CLIA
Thyroid Stimulating Hormone (TSH)	2.243	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

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



Patient Name : Mr. SACHIN VERMA

UHID : CPIM.0000111911

Reported on : 29-07-2023 17:17

Adm/Consult Doctor :

Age : 40 Y M

OP Visit No : CPIMOPV147494

Printed on : 29-07-2023 18:58

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Observation:-

Both lung fields are clear.

Both C-P angles are clear.

Cardiac size appear normal.

Hila and pulmonary vessels are within normal limits.

Both the domes of diaphragm are normal.

Thoracic cage and soft tissues are within normal limits.

Impression

Study is within normal limits.

Printed on:29-07-2023 17:17

---End of the Report---



Dr. KIRAN PRALHAD SUDHARE
MBBS, DMRD
Radiology

Patient Name : Mr. SACHIN VERMA
UHID : CPIM.0000111911
Reported on : 29-07-2023 12:07
Adm/Consult Doctor :
Age : 40 Y M
OP Visit No : CPIMOPV147494
Printed on : 29-07-2023 12:12
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and **bright** echotexture. No focal lesion is seen. PV and CBD normal.

No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Prostate is normal in size and echo texture. No evidence of necrosis/calcification seen.

IMPRESSION:-

GRADE II FATTY LIVER.

Patient Name : Mr. SACHIN VERMA
UHID : CPIM.0000111911
Reported on : 29-07-2023 12:07
Adm/Consult Doctor :

Age : 40 Y M
OP Visit No : CPIMOPV147494
Printed on : 29-07-2023 12:12
Ref Doctor : SELF

(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.

Printed on:29-07-2023 12:07

---End of the Report---



Dr. KUNDAN MEHTA
MBBS, DMRE (RADIOLOGY)
Radiology

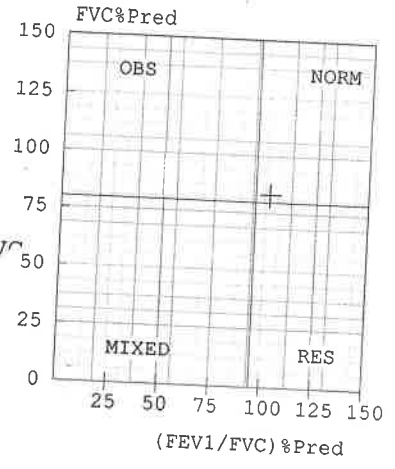
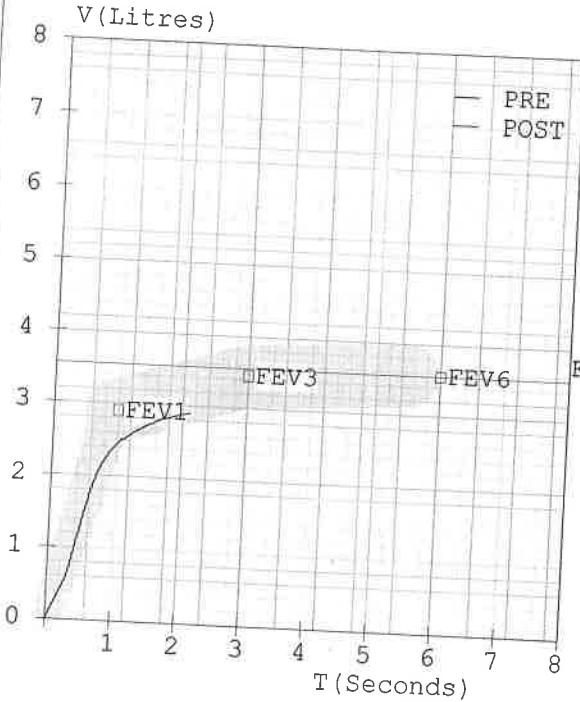
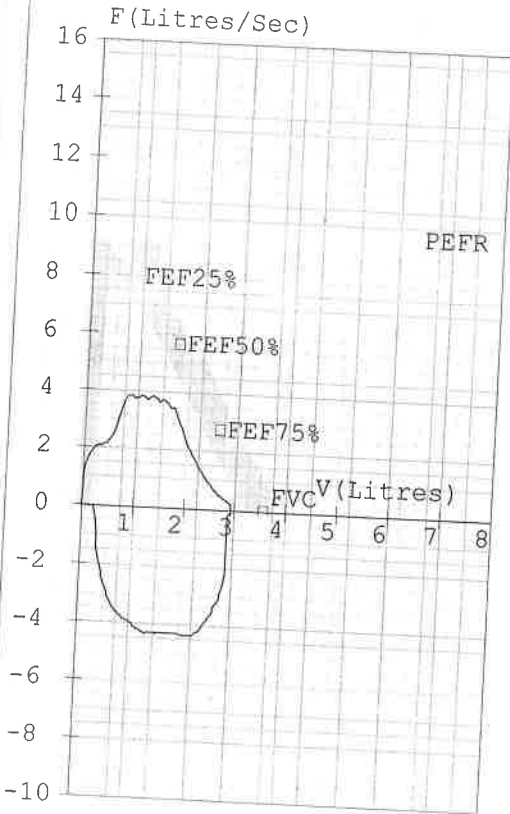
Apollo Clinic

Nigdi Pune -411044

Patient: MR SACHIN VERMA
 Refd. By:
 Pred.Eqns: RECORDERS
 Date : 29-07-2023 12:34 PM

Age : 40 Years
 Height : 172 Cms
 Weight : 86 Kgs
 ID: 267HJHJHJ

Gender : Male
 Smoker : NO
 Eth. Corr: 100
 Temp : 36 degrees



FVC Results						
Parameter		Pred	M. Pre%Pred	M. Post %Pred	%Imp	
FVC	(L)	03.55	02.93	083	-----	---
FEV1	(L)	02.91	02.44	084	-----	---
FEV1/FVC	(%)	81.97	83.28	102	-----	---
FEF25-75	(L/s)	03.98	03.07	077	-----	---
PEFR	(L/s)	08.99	03.78	042	-----	---
FIVC	(L)	-----	02.69	---	-----	---
FEV.5	(L)	-----	01.37	---	-----	---
FEV3	(L)	03.44	02.93	085	-----	---
PIFR	(L/s)	-----	04.35	---	-----	---
FEF75-85	(L/s)	-----	01.13	---	-----	---
FEF.2-1.2	(L/s)	06.99	02.78	040	-----	---
FEF 25%	(L/s)	07.95	03.40	043	-----	---
FEF 50%	(L/s)	05.67	03.61	064	-----	---
FEF 75%	(L/s)	02.75	01.61	059	-----	---
FEV.5/FVC	(%)	-----	46.76	---	-----	---
FEV3/FVC	(%)	96.90	100.00	103	-----	---
FET	(Sec)	-----	02.23	---	-----	---
ExplTime	(Sec)	-----	00.15	---	-----	---
Lung Age	(Yrs)	040	046	115	-----	---
FEV6	(L)	03.55	-----	---	-----	---
FIF25%	(L/s)	-----	03.91	---	-----	---
FIF50%	(L/s)	-----	04.29	---	-----	---
FIF75%	(L/s)	-----	04.13	---	-----	---

Pre Medication Report Indicates
 Early Small Airway Obstruction as FEF 25-75 %Pred or PEFR %Pred < 70
 Spirometry within normal limits as (FEV1/FVC)%Pred >95 and FVC%Pred >80.

Apollo Clinic,
Nigdi, Pune - 411044.

Date - 29.07.23

Patient Name *Sachin Verma*

UHID:

Age / Sex: *40 yrs / M*

EYE CHECK UP

COMPLETE

PREMEDICAL/OTHER

	RIGHT EYE	LEFT EYE
Far Vision	<i>6/6</i>	<i>6/6</i>
Near Vision	<i>NG</i>	<i>NG</i>
Anterior Segment Pupil	<i>WNL</i>	<i>WNL</i>
Color Vision	<i>WNL</i>	<i>WNL</i>
Family History/Medical History	<i>NA</i>	<i>NA</i>

Sumedh

IMPRESSION:-

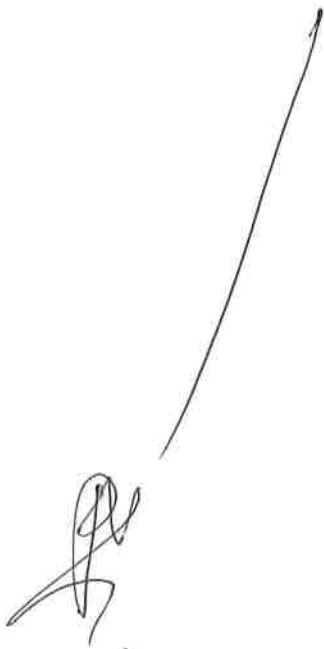
[Signature]
OPTOMETRIST

P/E. Stain + car + f

Adv scaling & polishing.

caries c → / 6

Adv composite filling.



28

Date : 29-07-2023

Department : GENERAL

MR NO : CPIM.0000111911

Doctor :

Name : Mr. SACHIN VERMA

Registration No :

Age/ Gender : 40 Y / Male

Qualification :

Consultation Timing: 09:15

HT - 173cm
WT - 85.1kg
BP - 110/80.

BALENCE DIET

Name : Mr. Sachin

Energy : 1500-1600 kcal.

CHO : 200-250 gm.

Age/Sex : 40 yrs / male.

Protein : 60-65 gm

Fat : 10-15 gms.

Food Groups	Food Allowed	Food Restricted
Cereals	Whole Wheat, Jawar, Bajra, Ragi, Qinova and Their Products	Maida and Maida Products
Pulses	All Dals, Pulses & Legumes , Soyabean	NIL
Milk & Milk Products	Toned Milk, Curd, Buttermilk, Paneer – Made of toned Milk Use Cow milk removed cream	Buffalo's milk, Khoa, Cheese, Cream & Their Products
Vegetables	All leafy and other vegetables Mashroom and Salad	NIL
Non- Veg	Egg White, Chicken (without Skin), Fish (Grilled/Steamed/Boiled)	Red Meat Like Mutton, Organ Meats like liver, Kidney, Brain, Egg Yolk, Shell Fish, Prawans, Lobstarts, Ham, Becon, Sausages, Pork & Beef
Oil & Fats	Rotate the type of oil every month 600 250ml/month/per person	Vanaspati, Margarine, Fried Foods- Samosa, Vadapav, Papad, Pickle
Sugars	Limited Sugars, Jaggary, Honey, Jelly, Sweets, Cakes, Pastries, Cold Drinks, Jam, Ice Cream etc.	
Others	Homemade Soups, (Unstrained), Roasted Chana, Roasted Makhana, Roasted Jowar, almond Water(Unsweetnes), Buttermilk	Preserved Foods, Bakery Items, Pickles, Junk Foods

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

INTRODUCTION :

- Use oil ⁶⁰⁰ 750ml/ month per person
- Water Intake – 3-3.5 lit/day
- Include foods like Garlic, Onion, Ginger, and Coriander in food Preparation.
- Avoid ~~Over~~ Consumption of ghee, Butter, and oil
- Consume Plenty of fluid, stay hydrated.



MOUPIYA PATRA
Moupiya Patra
M.Sc (Nutrition&Dietetics),CDE

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

01/8/2023

Mr. Sachin
40 yrs/m.

Height : 173	Weight : 85-1	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies History

no any find along

Cal to RDA
Low fat Diet

Cal - 1500-1600 kcal
Prot - 60-65 gm
fat - 10-15 gm
CHO - 200 gm - 250 gm

fibre - 30-35 gm/day

Clinical Diagnosis & Management Plan

NO any major injury

out side - (A-P)
water intake - (1 lit)
exercise - (NIL)

Unhealthy meal pattern
NO fix times

Adv

Salad and larty veg
boiled egg white
water - 3-3.5 lit/day
2-3 hr frequently diet
oil - 600ml/day month

Follow up date: 22/8/2023

Tg ↑
nit ↓ forms table
ground - the fatty thing

wt logs

(Signature)
MOUJALI PATRA
Clinical Nutritionist
Apollo Clinic, Nigdi

Doctor Signature