



नाम शुभंकर मजूमदार  
Name : SHUBHANKAR MAJUMDAR  
कर्मचारी कूट. क्र. ७२२१८  
E. C. No. 72218

*Shubhankar*

धारक के हस्ताक्षर

*[Signature]*  
जारीकर्ता प्राधिकारी

206337  
41 Years

MR. SHUBHANKAR, MAJUMDAR  
Male

21/03/2024 09:09:43 AM

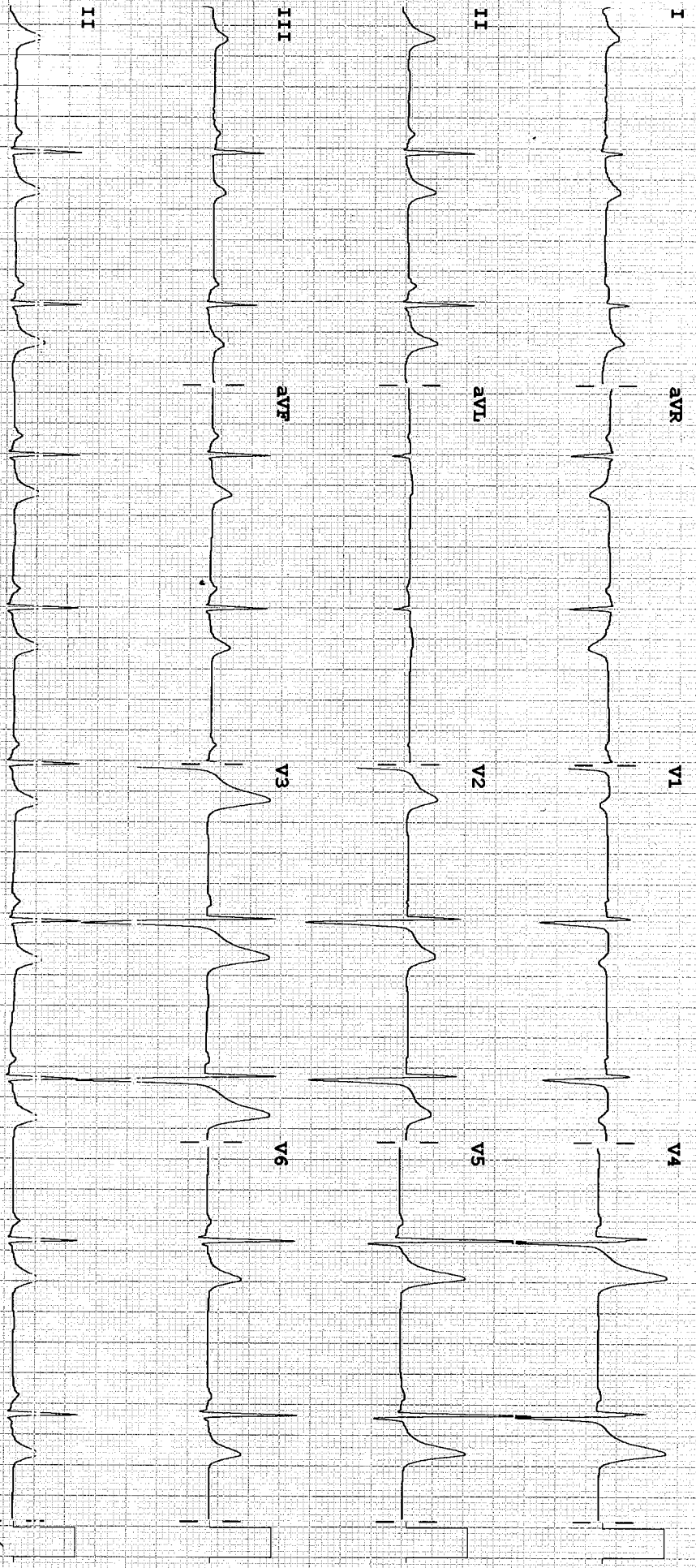
APOLLO CLINIC T NAGAR

Rate 58 Sinus *Brachycardia*  
PR 149 Consider left ventricular hypertrophy.  
QRS 76 ST elev, probable normal early repol pattern.  
QTc 379  
QT 373  
T 52  
P 76  
QRS 72  
T 52  
--AXIS--  
12 Lead; Standard Placement



- ABNORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

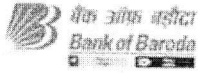
F 50~0.50-100 Hz W

PH100B CL

P?

PHILIPS

REORDER M3708A



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. MAJUMDAR SHUBHANKAR |
| EC NO.                          | 72218                   |
| DESIGNATION                     | HEAD CASHIER "E" _II    |
| PLACE OF WORK                   | DIBRUGARH,NALIAPOOL     |
| BIRTHDATE                       | 22-06-1982              |
| PROPOSED DATE OF HEALTH CHECKUP | 21-03-2024              |
| BOOKING REFERENCE NO.           | 23M72218100103204E      |

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 **20-03-2024** 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))

Established Patient: No

**Vitals**

| Date                | Pulse<br>(Beats/min) | B.P<br>(mmHg)  | Resp<br>(Rate/min) | Temp<br>(F) | Height<br>(cms) | Weight<br>(Kgs) | Body Fat<br>Percentage<br>(%) | Visceral<br>Fat Level<br>(%) | Body<br>Age<br>(Years) | BMI   | Waist<br>Circum<br>(cms) | Hip<br>(cms) | Waist<br>(cms) | Waist &<br>Hip<br>Ratio | User      |
|---------------------|----------------------|----------------|--------------------|-------------|-----------------|-----------------|-------------------------------|------------------------------|------------------------|-------|--------------------------|--------------|----------------|-------------------------|-----------|
| 21-03-2024<br>14:44 | Beats/min            | 110/70<br>mmHg | Rate/min           | F           | 161<br>cms      | 51.6<br>Kgs     | %                             | %                            | Years                  | 19.91 | cms                      | cms          | cms            |                         | AHLL09366 |

Established Patient: No

**Vitals**

| Date                | Pulse<br>(Beats/min) | B.P<br>(mmHg)  | Resp<br>(Rate/min) | Temp<br>(F) | Height<br>(cms) | Weight<br>(Kgs) | Body Fat<br>Percentage<br>(%) | Visceral<br>Fat Level<br>(%) | Body<br>Age<br>(Years) | BMI   | Waist<br>Circum<br>(cms) | Hip<br>(cms) | Waist<br>(cms) | Waist &<br>Hip<br>Ratio | User      |
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Name: Mr. Shubhankar Majumdar  
Age/Gender: 41 Y/M  
Address: CHENNAI  
Location: CHENNAI, TAMIL NADU  
Doctor:  
Department: GENERAL  
Rate Plan: T NAGAR\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. MEENAKSHI S

MR No: CTNA.0000206337  
Visit ID: CTNAOPV196233  
Visit Date: 21-03-2024 09:12  
Discharge Date:  
Referred By: SELF

**Doctor's Signature**

Established Patient: No

**Vitals**

| Date                | Pulse<br>(Beats/min) | B.P<br>(mmHg)  | Resp<br>(Rate/min) | Temp<br>(F) | Height<br>(cms) | Weight<br>(Kgs) | Body Fat<br>Percentage<br>(%) | Visceral<br>Fat Level<br>(%) | Body<br>Age<br>(Years) | BMI   | Waist<br>Circum<br>(cms) | Hip<br>(cms) | Waist<br>(cms) | Waist &<br>Hip<br>Ratio | User      |
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Location: CHENNAI, TAMIL NADU  
Doctor:  
Department: GENERAL  
Rate Plan: T NAGAR\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. VASANTHI SACHIDHANAND

MR No: CTNA.0000206337  
Visit ID: CTNAOPV196233  
Visit Date: 21-03-2024 09:12  
Discharge Date:  
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**Doctor's Signature**



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|              |                           |                |                    |
|--------------|---------------------------|----------------|--------------------|
| Patient Name | : Mr. Shubhankar Majumdar | Age            | : 41 Y/M           |
| UHID         | : CTNA.0000206337         | OP Visit No    | : CTNAOPV196233    |
| Reported By: | : Dr. HARI K              | Conducted Date | : 21-03-2024 12:16 |
| Referred By  | : SELF                    |                |                    |

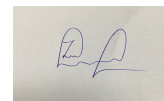
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### **ECG REPORT**

#### **Impression:**

SINUS BRADYCARDIA.

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



Dr. HARI K

Name: Mr. Shubhankar Majumdar  
Age/Gender: 41 Y/M  
Address: CHENNAI  
Location: CHENNAI, TAMIL NADU  
Doctor:  
Department: GENERAL  
Rate Plan: T NAGAR\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. HARI K

MR No: CTNA.0000206337  
Visit ID: CTNAOPV196233  
Visit Date: 21-03-2024 09:12  
Discharge Date:  
Referred By: SELF

**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

**SYSTEMIC REVIEW**

**HT-HISTORY**

**PHYSICAL EXAMINATION**

**SYSTEMIC EXAMINATION**

**IMPRESSION**

**RECOMMENDATION**

**Doctor's Signature**

Name: Mr. Shubhankar Majumdar  
Age/Gender: 41 Y/M  
Address: CHENNAI  
Location: CHENNAI, TAMIL NADU  
Doctor:  
Department: GENERAL  
Rate Plan: T NAGAR\_06042023  
Sponsor: ARCOFEMI HEALTHCARE LIMITED  
Consulting Doctor: Dr. REKHA SANJAY

MR No: CTNA.0000206337  
Visit ID: CTNAOPV196233  
Visit Date: 21-03-2024 09:12  
Discharge Date:  
Referred By: SELF

**HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS**

**SYSTEMIC REVIEW**

**HT-HISTORY**

**PHYSICAL EXAMINATION**

**SYSTEMIC EXAMINATION**

**IMPRESSION**

**RECOMMENDATION**

**Doctor's Signature**

Patient Name : Mr. Shubhankar Majumdar Age : 41 Y/M  
UHID : CTNA.0000206337 OP Visit No : CTNAOPV196233  
Conducted By: : Dr. ASHA MAHILMARAN Conducted Date : 21-03-2024 18:21  
Referred By : SELF

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## CARDIOLOGY

### CARDIAC STRESS TEST – (TMT)

Angina Pectoria:  
NO

Previous MI:  
NO

PTCA:  
NO

CABG:  
NO

HTN:  
NO

DM:  
NO

Smoking:  
NO

Obesity:  
NO

Lipidemia:  
NO

Resting ECG Supine:  
NORMAL SINUS RHYTHM NORMAL ECG.

Standing:  
NORMAL SINUS RHYTHM NORMAL ECG .

Protocol Used:  
BRUCE

Monitoring Leads:

Patient Name : Mr. Shubhankar Majumdar Age : 41 Y/M  
UHID : CTNA.0000206337 OP Visit No : CTNAOPV196233  
Conducted By: : Dr. ASHA MAHILMARAN Conducted Date : 21-03-2024 18:21  
Referred By : SELF

---

12 LEADS

Grade Achieved:  
100 %

% HR / METS:  
17.20

Reason for Terminating Test:  
FATIGUE

Total Exercise Time:  
13.40

Symptoms and ECG Changes during Exercise:  
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

0 mts:  
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

3 mts:  
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

6 mts:  
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

**INTERPRETATION:**

Rhythm:  
NORMAL

S.T. Segment :  
NORMAL

III Blood Pressure Response :  
NORMAL

|               |                           |                |                    |
|---------------|---------------------------|----------------|--------------------|
| Patient Name  | : Mr. Shubhankar Majumdar | Age            | : 41 Y/M           |
| UHID          | : CTNA.0000206337         | OP Visit No    | : CTNAOPV196233    |
| Conducted By: | : Dr. ASHA MAHILMARAN     | Conducted Date | : 21-03-2024 18:21 |
| Referred By   | : SELF                    |                |                    |

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IV Fitness Response :  
EXCELLENT

Impression:

Cardiac stress analysis is **NEGATIVE** for inducible myocardial ischaemia at good work load and 100 % of maximum heart rate response.

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



Dr. ASHA  
MAHILMARAN

**Patient Name** : Mr. Shubhankar Majumdar

**Age/Gender** : 41 Y/M

**UHID/MR No.** : CTNA.0000206337

**OP Visit No** : CTNAOPV196233

**Sample Collected on** :

**Reported on** : 22-03-2024 12:46

**LRN#** : RAD2274664

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 72218

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**DEPARTMENT OF RADIOLOGY**

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**X-RAY CHEST PA**

Both lung fields and hila are normal .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

Normal study.



**Dr. RASHEED ARAFATH HIDAYATHULLAH**  
**MBBS, DNB (RD)**  
Radiology



**Patient Name** : Mr. Shubhankar Majumdar

**Age/Gender** : 41 Y/M

**UHID/MR No.** : CTNA.0000206337

**OP Visit No** : CTNAOPV196233

**Sample Collected on** :

**Reported on** : 21-03-2024 12:32

**LRN#** : RAD2274664

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 72218

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## DEPARTMENT OF RADIOLOGY

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### ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of focal or diffuse pathology.  
Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.  
Wall thickness appear normal.

Pancreas and spleen appear normal. Spleen measures 7.6 cms.  
Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy. Diaphragmatic movements are satisfactory.  
There is no evidence of sub diaphragmatic pathology or pleural effusion.  
Aorta and IVC appear normal.

Right kidney measures 9.4 cms.  
Left kidney measures 9.0 cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Prostate measures 3.3 x 3.1 x 2.1 cms ( volume 11 cc ) and shows normal echopattern.  
Seminal vesicles appear normal.  
Bladder is normal in contour. Both iliac fossae appear normal.

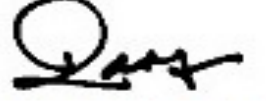
### IMPRESSION:

**NORMAL STUDY.**

**Patient Name** : Mr. Shubhankar Majumdar

**Age/Gender** : 41 Y/M

---



**Dr. RASHEED ARAFATH HIDAYATHULLAH**  
MBBS, DNB (RD)  
Radiology

|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:05AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 02:07PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF HAEMATOLOGY**

**PERIPHERAL SMEAR , WHOLE BLOOD EDTA**

|                |  |
|----------------|--|
| METHODOLOGY    | : Microscopic.   |
| RBC MORPHOLOGY | : Predominantly normocytic normochromic RBC's noted.                     |
| WBC MORPHOLOGY | : Normal in number, morphology and distribution. No abnormal cells seen. |
| PLATELETS      | : Adequate in number.  |
| PARASITES      | : No haemoparasites seen.  |
| IMPRESSION     | : Normocytic normochromic blood picture.                                 |
| NOTE/ COMMENT  | : Please correlate clinically.   |



**Dr THILAGA**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240076024

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

**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

Address:  
D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennai.600 102,  
Phone - 044-26224504 / 05



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

**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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| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name                                   | Result      | Unit          | Bio. Ref. Range | Method                         |
|---|-------------|---------------|-----------------|--------------------------------|
| <b>HEMOGRAM , WHOLE BLOOD EDTA</b>          |             |               |                 |                                |
| <b>HAEMOGLOBIN</b>                          | 14          | g/dL          | 13-17           | Spectrophotometer              |
| PCV   | 40.30       | %             | 40-50           | Electronic pulse & Calculation |
| RBC COUNT                                   | 4.56        | Million/cu.mm | 4.5-5.5         | Electrical Impedance           |
| MCV   | 88.3        | fL            | 83-101          | Calculated                     |
| MCH   | 30.7        | pg            | 27-32           | Calculated                     |
| MCHC  | <b>34.7</b> | g/dL          | 31.5-34.5       | Calculated                     |
| R.D.W                                       | 13.7        | %             | 11.6-14         | Calculated                     |
| TOTAL LEUCOCYTE COUNT (TLC)                 | 6,600       | cells/cu.mm   | 4000-10000      | Electrical Impedance           |
| <b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>  |             |               |                 |                                |
| NEUTROPHILS                                 | 57.3        | %             | 40-80           | Electrical Impedance           |
| LYMPHOCYTES                                 | 29.8        | %             | 20-40           | Electrical Impedance           |
| EOSINOPHILS                                 | 3.3         | %             | 1-6             | Electrical Impedance           |
| MONOCYTES                                   | 9.2         | %             | 2-10            | Electrical Impedance           |
| BASOPHILS                                   | 0.4         | %             | <1-2            | Electrical Impedance           |
| <b>ABSOLUTE LEUCOCYTE COUNT</b>             |             |               |                 |                                |
| NEUTROPHILS                                 | 3781.8      | Cells/cu.mm   | 2000-7000       | Calculated                     |
| LYMPHOCYTES                                 | 1966.8      | Cells/cu.mm   | 1000-3000       | Calculated                     |
| EOSINOPHILS                                 | 217.8       | Cells/cu.mm   | 20-500          | Calculated                     |
| MONOCYTES                                   | 607.2       | Cells/cu.mm   | 200-1000        | Calculated                     |
| BASOPHILS                                   | 26.4        | Cells/cu.mm   | 0-100           | Calculated                     |
| Neutrophil lymphocyte ratio (NLR)           | 1.92        |               | 0.78- 3.53      | Calculated                     |
| <b>PLATELET COUNT</b>                       | 156000      | cells/cu.mm   | 150000-410000   | Electrical impedance           |
| <b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b> | 9           | mm/hour       | 0-15            | Capillary photometry           |
| <b>PERIPHERAL SMEAR</b>                     |             |               |                 |                                |

METHODOLOGY : Microscopic.

Page 2 of 17



**Dr THILAGA**  
M.B.B.S.,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240076024

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**DEPARTMENT OF HAEMATOLOGY**

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|----------------|--|
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| WBC MORPHOLOGY | : Normal in number, morphology and distribution. No abnormal cells seen. |
| PLATELETS      | : Adequate in number.  |
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| IMPRESSION     | : Normocytic normochromic blood picture.                                 |
| NOTE/ COMMENT  | : Please correlate clinically.   |



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D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennai.600 102,  
Phone - 044-26224504 / 05



**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)



|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:05AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 03:37PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF HAEMATOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

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

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY



**Dr THILAGA**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:BED240076024

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:33AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 12:04PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name                            | Result | Unit  | Bio. Ref. Range | Method     |
|--------------------------------------|--------|-------|-----------------|------------|
| <b>GLUCOSE, FASTING , NAF PLASMA</b> | 90     | 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.



**DR. R. SRIVATSAN**  
M.D.(Biochemistry)



SIN No:PLF02129362

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|                 |                          |              |                               |
|-----------------|--------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.SHUBHANKAR MAJUMDAR | Collected    | : 21/Mar/2024 12:33PM         |
| Age/Gender      | : 41 Y 8 M 29 D/M        | Received     | : 21/Mar/2024 04:15PM         |
| UHID/MR No      | : CTNA.0000206337        | Reported     | : 21/Mar/2024 05:21PM         |
| Visit ID        | : CTNAOPV196233          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF                | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 72218                  |              |                               |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name   | Result | Unit  | Bio. Ref. Range | Method     |
|---|--------|-------|-----------------|------------|
| <b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)</b> | 84     | 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.R.SRIVATSAN**  
M.D.(Biochemistry)



SIN No:PLP1434594

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:05AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 02:19PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name   | Result | Unit  | Bio. Ref. Range | Method     |
|---|--------|-------|-----------------|------------|
| <b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b> |        |       |                 |            |
| HBA1C, GLYCATED HEMOGLOBIN                            | 5.1    | %     |                 | HPLC       |
| ESTIMATED AVERAGE GLUCOSE (eAG)                       | 100    | 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.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- 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. R. SRIVATSAN**  
M.D.(Biochemistry)



SIN No:EDT240034853

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:35AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 01:25PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name                    | Result     | Unit  | Bio. Ref. Range | Method                         |
|------------------------------|------------|-------|-----------------|--------------------------------|
| <b>LIPID PROFILE , SERUM</b> |            |       |                 |                                |
| TOTAL CHOLESTEROL            | <b>202</b> | mg/dL | <200            | CHO-POD                        |
| TRIGLYCERIDES                | 90         | mg/dL | <150            | GPO-POD                        |
| HDL CHOLESTEROL              | 44         | mg/dL | 40-60           | Enzymatic<br>Immuno-inhibition |
| NON-HDL CHOLESTEROL          | <b>158</b> | mg/dL | <130            | Calculated                     |
| LDL CHOLESTEROL              | <b>140</b> | mg/dL | <100            | Calculated                     |
| VLDL CHOLESTEROL             | 18         | mg/dL | <30             | Calculated                     |
| CHOL / HDL RATIO             | 4.59       |       | 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      |
| ATHEROGENIC INDEX(AIP) | <0.11                               | 0.12 – 0.20     | >0.21     |           |

**Note:**

- 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.

Page 8 of 17



DR. R. SRIVATSAN  
M.D.(Biochemistry)



SIN No:SE04669107

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|                 |                          |              |                               |
|-----------------|--------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.SHUBHANKAR MAJUMDAR | Collected    | : 21/Mar/2024 09:14AM         |
| Age/Gender      | : 41 Y 8 M 29 D/M        | Received     | : 21/Mar/2024 11:35AM         |
| UHID/MR No      | : CTNA.0000206337        | Reported     | : 21/Mar/2024 01:25PM         |
| Visit ID        | : CTNAOPV196233          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF                | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

- 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.
- 7) Triglycerides and HDL-cholesterol in Atherogenic index (AIP) reflect the balance between the atherogenic and protective lipoproteins. Clinical studies have shown that AIP (log (TG/HDL) & values used are in mmol/L) predicts cardiovascular risk and a useful measure of response to treatment (pharmacological intervention).



**DR. R. SRIVATSAN**  
M.D.(Biochemistry)



SIN No:SE04669107

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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:35AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 01:25PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name                                | Result | Unit  | Bio. Ref. Range | Method             |
|--|--------|-------|-----------------|--------------------|
| <b>LIVER FUNCTION TEST (LFT) , SERUM</b> |        |       |                 |                    |
| BILIRUBIN, TOTAL                         | 0.87   | mg/dL | 0.3-1.2         | DPD                |
| BILIRUBIN CONJUGATED (DIRECT)            | 0.13   | mg/dL | <0.2            | DPD                |
| BILIRUBIN (INDIRECT)                     | 0.74   | mg/dL | 0.0-1.1         | Dual Wavelength    |
| ALANINE AMINOTRANSFERASE (ALT/SGPT)      | 21     | U/L   | <50             | IFCC               |
| ASPARTATE AMINOTRANSFERASE (AST/SGOT)    | 28.0   | U/L   | <50             | IFCC               |
| ALKALINE PHOSPHATASE                     | 72.00  | U/L   | 30-120          | IFCC               |
| PROTEIN, TOTAL                           | 7.70   | g/dL  | 6.6-8.3         | Biuret             |
| ALBUMIN                                  | 4.30   | g/dL  | 3.5-5.2         | BROMO CRESOL GREEN |
| GLOBULIN                                 | 3.40   | g/dL  | 2.0-3.5         | Calculated         |
| A/G RATIO                                | 1.26   |       | 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 > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's'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 10 of 17



**DR.R.SRIVATSAN**  
M.D.(Biochemistry)



SIN No:SE04669107

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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)



|                 |                          |              |                               |
|-----------------|--------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.SHUBHANKAR MAJUMDAR | Collected    | : 21/Mar/2024 09:14AM         |
| Age/Gender      | : 41 Y 8 M 29 D/M        | Received     | : 21/Mar/2024 11:35AM         |
| UHID/MR No      | : CTNA.0000206337        | Reported     | : 21/Mar/2024 01:25PM         |
| Visit ID        | : CTNAOPV196233          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF                | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 72218                  |              |                               |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name   | Result | Unit   | Bio. Ref. Range | Method                   |
|---|--------|--------|-----------------|--------------------------|
| <b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b> |        |        |                 |                          |
| CREATININE  | 0.76   | mg/dL  | 0.72 – 1.18     | JAFFE METHOD             |
| UREA  | 37.00  | mg/dL  | 17-43           | GLDH, Kinetic Assay      |
| BLOOD UREA NITROGEN   | 17.3   | mg/dL  | 8.0 - 23.0      | Calculated               |
| URIC ACID   | 5.50   | mg/dL  | 3.5–7.2         | Uricase PAP              |
| CALCIUM   | 9.60   | mg/dL  | 8.8-10.6        | Arsenazo III             |
| PHOSPHORUS, INORGANIC                                       | 2.60   | mg/dL  | 2.5-4.5         | Phosphomolybdate Complex |
| SODIUM  | 138    | mmol/L | 136–146         | ISE (Indirect)           |
| POTASSIUM   | 4.3    | mmol/L | 3.5–5.1         | ISE (Indirect)           |
| CHLORIDE  | 105    | mmol/L | 101–109         | ISE (Indirect)           |
| PROTEIN, TOTAL  | 7.70   | g/dL   | 6.6-8.3         | Biuret                   |
| ALBUMIN   | 4.30   | g/dL   | 3.5-5.2         | BROMO CRESOL GREEN       |
| GLOBULIN  | 3.40   | g/dL   | 2.0-3.5         | Calculated               |
| A/G RATIO   | 1.26   |        | 0.9-2.0         | Calculated               |



**DR. R. SRIVATSAN**  
M.D.(Biochemistry)



SIN No:SE04669107

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**APOLLO CLINICS NETWORK**

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|                                       |  |
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| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:35AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 12:24PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF BIOCHEMISTRY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name  | Result | Unit | Bio. Ref. Range | Method |
|--|--------|------|-----------------|--------|
| <b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b> | 15.00  | U/L  | <55             | IFCC   |



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|                                       |  |
|---------------------------------------|--|
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| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:45AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 12:38PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name  | Result | Unit   | Bio. Ref. Range | Method |
|--|--------|--------|-----------------|--------|
| <b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b> |        |        |                 |        |
| TRI-iodothyronine (T3, TOTAL)                      | 1.25   | ng/mL  | 0.7-2.04        | CLIA   |
| THYROXINE (T4, TOTAL)                              | 10.33  | µg/dL  | 5.48-14.28      | CLIA   |
| THYROID STIMULATING HORMONE (TSH)                  | 0.940  | 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   | 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  |
| 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  |



**DR. R. SRIVATSAN**  
M.D.(Biochemistry)



SIN No: SPL24051081

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|                 |                          |              |                               |
|-----------------|--------------------------|--------------|-------------------------------|
| Patient Name    | : Mr.SHUBHANKAR MAJUMDAR | Collected    | : 21/Mar/2024 09:14AM         |
| Age/Gender      | : 41 Y 8 M 29 D/M        | Received     | : 21/Mar/2024 11:45AM         |
| UHID/MR No      | : CTNA.0000206337        | Reported     | : 21/Mar/2024 12:38PM         |
| Visit ID        | : CTNAOPV196233          | Status       | : Final Report                |
| Ref Doctor      | : Dr.SELF                | Sponsor Name | : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID | : 72218                  |              |                               |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**



**DR.R.SRIVATSAN**  
M.D.(Biochemistry)



SIN No:SPL24051081

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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:14AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 11:45AM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 12:31PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
| Emp/Auth/TPA ID : 72218               |  |

**DEPARTMENT OF IMMUNOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name  | Result | Unit  | Bio. Ref. Range | Method |
|--|--------|-------|-----------------|--------|
| <b>TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM</b> | 0.340  | ng/mL | 0-4             | CLIA   |



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|                                       |  |
|---------------------------------------|--|
| Patient Name : Mr.SHUBHANKAR MAJUMDAR | Collected : 21/Mar/2024 09:13AM            |
| Age/Gender : 41 Y 8 M 29 D/M          | Received : 21/Mar/2024 04:47PM             |
| UHID/MR No : CTNA.0000206337          | Reported : 21/Mar/2024 05:39PM             |
| Visit ID : CTNAOPV196233              | Status : Final Report                      |
| Ref Doctor : Dr.SELF                  | Sponsor Name : ARCOFEMI HEALTHCARE LIMITED |
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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - PAN INDIA - FY2324**

| Test Name  | Result     | Unit | Bio. Ref. Range  | Method                     |
|--|------------|------|------------------|----------------------------|
| <b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>      |            |      |                  |                            |
| <b>PHYSICAL EXAMINATION</b>                          |            |      |                  |                            |
| COLOUR   | PALE STRAW |      | PALE YELLOW      | Visual                     |
| TRANSPARENCY   | CLEAR      |      | CLEAR            | Visual                     |
| pH   | 5.5        |      | 5-7.5            | DOUBLE INDICATOR           |
| SP. GRAVITY  | 1.020      |      | 1.002-1.030      | Bromothymol Blue           |
| <b>BIOCHEMICAL EXAMINATION</b>                       |            |      |                  |                            |
| 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         |
| <b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b> |            |      |                  |                            |
| PUS CELLS  | 2-4        | /hpf | 0-5              | Microscopy                 |
| EPITHELIAL CELLS                                     | 1-2        | /hpf | <10              | MICROSCOPY                 |
| RBC  | NIL        | /hpf | 0-2              | MICROSCOPY                 |
| CASTS  | ABSENT     |      | 0-2 Hyaline Cast | MICROSCOPY                 |
| CRYSTALS   | ABSENT     |      | ABSENT           | MICROSCOPY                 |

Page 16 of 17



**Dr. MARQUESS RAJ**  
M.D, DipRCPATH, D.N.B (PATH)  
Consultant Pathologist

SIN No:UR2310935

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|---------------------------------------|--|
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**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - TMT - 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 \*\*\*



**Dr THILAGA**  
M.B.B.S,M.D(Pathology)  
Consultant Pathologist

SIN No:UF011236

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