

Fwd: Health Check up Booking Confirmed Request(bobS5748),Package Code-PKG10000366, Beneficiary Code-300886

gayathri prathapaneni <p.gayathri5758@gmail.com>

Thu 1/25/2024 8:49 AM

To:Tnagar Apolloclinic <tnagar@apolloclinic.com>

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Mon, Jan 22, 2024, 11:38 AM

Subject: Health Check up Booking Confirmed Request(bobS5748),Package Code-PKG10000366, Beneficiary Code-300886

To: <p.gayathri5758@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959

Dear **Gayathri**,

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 18-01-2024

Hospital Package Name : Mediwheel Full Body Annual Plus

Patient Package Name : Mediwheel Full Body Health Checkup Male Below 40

Name of Diagnostic/Hospital : Apollo Clinic

Address of Diagnostic/Hospital- Apollo Clinic, Door No 11, 4, Sivaprakasam St, opposite to Brilliant Tutorial, Pondy Bazaar, Parthasarathi Puram, T Nagar - 600017

City : Chennai

State :

Pincode : 600017

Appointment Date : 25-01-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am

Booking Status : Booking Confirmed

Member Information

Booked Member Name	Age	Gender
Chaithanya	34 year	Male

Note - Please note to not pay any amount .

Instructions to undergo Health Check:

- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.

- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

Thanks,
Mediwheel Team

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.

Please visit to our [Terms & Conditions](#) for more informaion. This email is recieved because you are register with us [Click here](#) to unsubscribe.

@ 2024 - 25, Arcofemi Healthcare Pvt Limited.(Mediwheel)

AGE: 34

Measurement Results

QRS 92 ms
QT/QTcB 406 / 435 ms
PR 120 ms
P 100 ms
PR/PP 87% / 865 ms
P/QRS/T 35 / 45 / 45 degrees

Interpretation

12SL - Interpretation:
Normal sinus rhythm ✓
Normal ECG

aVR

aVL

aVF

V1

V2

V3

V4

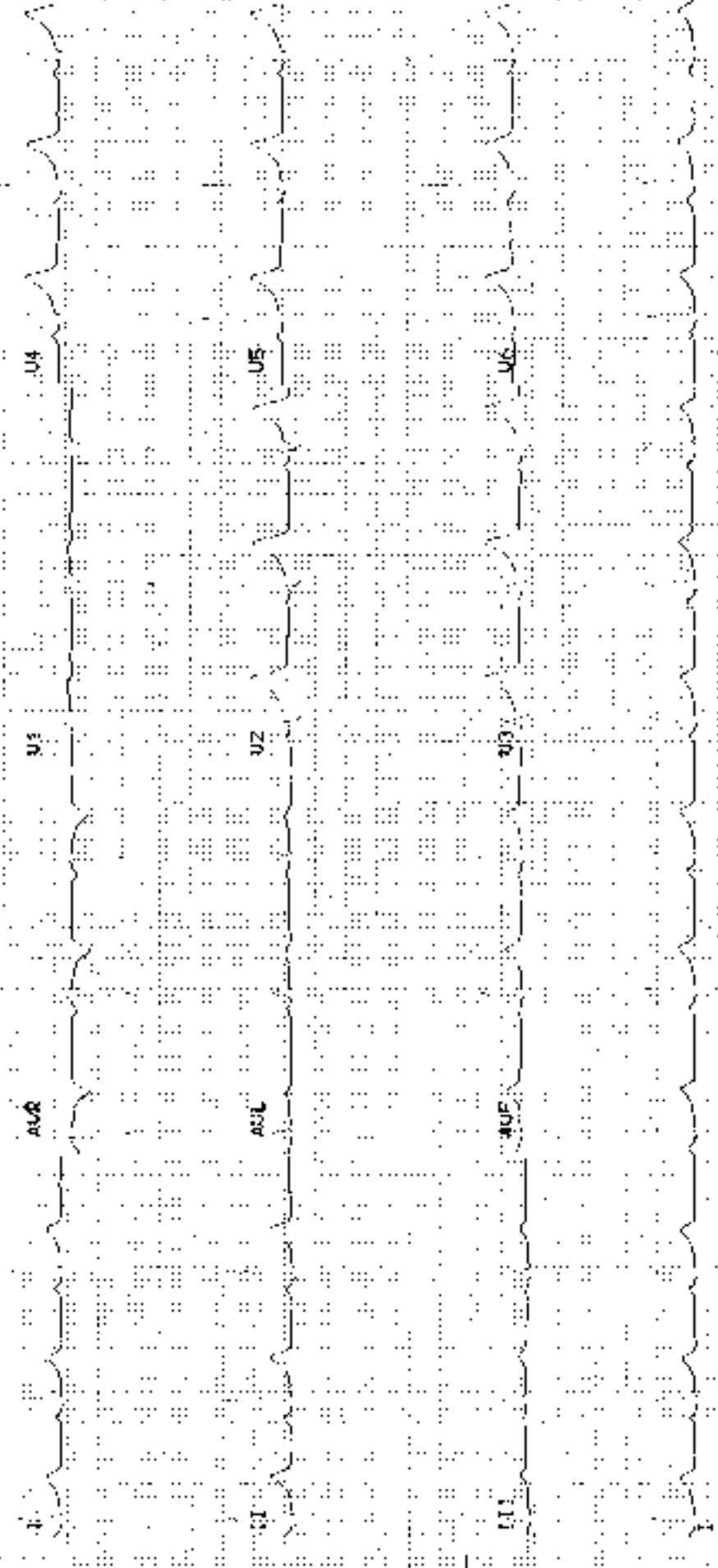
V5

V6

III 490 μV

aVF

Unconfirmed report



आयकर विभाग
INCOME TAX DEPARTMENT
भारत सरकार
GOVT. OF INDIA

PRATHAPANENI GAYATHRI
KRISHNA MURTHY PRATHAPANENI

27/05/1993

Permanent Account Number
CUSPP5770J

Gayathri
Signature



భారత ప్రభుత్వం
GOVERNMENT OF INDIA

డా. చైతన్య
P Chaitanya

జన్మ సంవత్సరం Year of Birth: 1989
లింగం: Male

4070 8955 5168

ఆధార్ - సామాన్యని హక్కు



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Chaithanya P on 26/1/24

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<ul style="list-style-type: none"> • Fit with restrictions / recommendations <p>Though following restrictions have been revealed, in my opinion, these are not Impediments to the job.</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>However the employee should follow the advice/medication that has been Communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after _____</p> <p>.....recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. B. ARUNA
 Medical Officer, MRCGP DESRH
 The Apollo Clinic (Location)
 APOLLO MEDICAL CENTER
 No: 1114 Sivagopalasami Street
 Chennai - 600017
 Ph No: 044 - 24341066/2433-5315/156/18/19

This certificate is not meant for medico-legal purposes.

Physical Examination			
Name Mr / Mrs / Miss	Mr. Chaitanya P		
Age / Gender	34y	Male / Female	DATE OF CHECK UP
HEIGHT	183	Cms	
WEIGHT	85.5	Kgs	
BLOOD PRESSURE (If above 140/90 need 3 readings)	1)	110/80	Cm/Hg
	2)		
	3)		
HR	25.5		
WHR	86		
HR	96		
AP/HR RATIO	0.89	Min	
RESPIRATORY RATE	18	Min	
FULS F	76		
CHEST	INSPIRATION	Ins:	Cms
	EXPIRATION	Exp:	Cms

OPHTHAL EXAMINATION					COLOUR VISION		
VISION	FAR VISION RIGHT	FAR VISION LEFT	NEAR VISION RIGHT	NEAR VISION LEFT	RIGHT	LEFT	
WITHOUT GLASS							
WITH GLASS							
REMARKS IF ANY							

APOLLO MEDICAL CENTRE
 11/4, Sivaprasadam Street, Pondy Bazaar
 T. Nagar, Chennai - 600 017.
 Phone: 044 - 2434 1066 / 95001 66355

Mr. Chaitanya 34/m.

25.1.24.

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

General Examination / Allergies
History

No specific diet compla...

ay / z: Sw: (F) hard war
(R) mild war.

Neose: Dsc.

Thr: clear.

Th: Heavily noseul.

d - Blc war.

APOLLO MEDICAL CENTRE

11/4, Annalakshmi Street, Pondy Bazaar,
T. Nagar, Chennai - 600 017.

Follow up date:

Phone: 044 - 2434 1066 / 95001 66355

Doctor Signature & Stamp

Convenient & reliable. Complete diagnostic services for the entire family. All under one roof.

In case of emergency, Please call 1066 or come directly to emergency room of the hospital

Apollo Health and Lifestyle Limited


To book an appointment

 **1860 500 7788**

OPHTHALMOLOGY

Name CHAITHAWYA.P	Date 25/01/24
Age 34	UHID No. 204812
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	

OPHTHAL FITNESS CERTIFICATE

	RE	LE
DV-UCVA :	16/60	16/60
DV-BCVA :	$\pm 10.50 \times 180$ 16/6	$\pm 10.25 \times 90$ 16/6
NEAR VISION :	NG	NG
ANTERIOR SEGMENT :		NG
IOP :		
FIELDS OF VISION :		
E O M :		
COLOUR VISION :	Normal	
FUNDUS :		Normal
IMPRESSION :		
ADVICE :		ON 14/02/24

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
25-01-2024 15:14	Beats/min	110/80 mmHg	Rate/min	F	183 cms	85.5 Kgs	%	%	Years	25.53	cms	96 cms	86 cms		AHLL09366

Established Patient: No

Vitals

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
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Vitals

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Name: Mr. CHAITHANYA P
Age/Gender: 34 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. T DEVI SHANMUGA PRIYA

MR No: CTNA.0000204812
Visit ID: CTNAOPV191769
Visit Date: 25-01-2024 08:57
Discharge Date:
Referred By: SELF

Doctor's Signature

Patient Name : Mr. CHAITHANYA P Age : 34 Y/M
UHID : CTNA.0000204812 OP Visit No : CTNAOPV191769
Reported By: : Dr. ARUNA BABBURI Conducted Date : 25-01-2024 11:26
Referred By : SELF

ECG REPORT

Impression:

NORMAL SINUS RHYTHM

NORMAL ECG.

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



Dr. ARUNA BABBURI

Name: Mr. CHAITHANYA P
Age/Gender: 34 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.0000204812
Visit ID: CTNAOPV191769
Visit Date: 25-01-2024 08:57
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. CHAITHANYA P	Age	: 34 Y/M
UHID	: CTNA.0000204812	OP Visit No	: CTNAOPV191769
Conducted By:	: Dr. KIRUBAKARAN .	Conducted Date	: 25-01-2024 13:24
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.7 CM
LA (es)	3.1 CM
LVID (ed)	4.4 CM
LVID (es)	2.9 CM
IVS (Ed)	0.9 CM
LVPW (Ed)	0.9 CM
EF	68.00%
%FD	38.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

INTER ATRIAL SEPTUM INTACT

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

Patient Name	: Mr. CHAITHANYA P	Age	: 34 Y/M
UHID	: CTNA.0000204812	OP Visit No	: CTNAOPV191769
Conducted By:	: Dr. KIRUBAKARAN .	Conducted Date	: 25-01-2024 13:24
Referred By	: SELF		

DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

E/A-E: 0.9m/sec A: 0.8m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO 0.6m/sec

VELOCITY ACROSS THE AV UPTO 1.4m/sec

IMPRESSION:

NO REGIONAL WALL MOTION ABNORMALITIES

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

NORMAL LEFT VENTRICULAR IN SIZE

NO : PE/PAH

DONE BY
NIRMALA

Patient Name : Mr. CHAITHANYA P
UHID : CTNA.0000204812
Conducted By: : Dr. KIRUBAKARAN .
Referred By : SELF

Age : 34 Y/M
OP Visit No : CTNAOPV191769
Conducted Date : 25-01-2024 13:24



Dr.KIRUBAKARAN.

Patient Name : Mr. CHAITHANYA P
UHID : CTNA.0000204812
Conducted By: : Dr. KIRUBAKARAN .
Referred By : SELF

Age : 34 Y/M
OP Visit No : CTNAOPV191769
Conducted Date : 25-01-2024 13:24

Patient Name	: Mr. CHAITHANYA P	Age	: 34 Y/M
UHID	: CTNA.0000204812	OP Visit No	: CTNAOPV191769
Conducted By:	: Dr. KIRUBAKARAN .	Conducted Date	: 25-01-2024 13:24
Referred By	: SELF		

Patient Name	: Mr. CHAITHANYA P	Age	: 34 Y/M
UHID	: CTNA.0000204812	OP Visit No	: CTNAOPV191769
Conducted By:	: Dr. KIRUBAKARAN .	Conducted Date	: 25-01-2024 13:24
Referred By	: SELF		

Name: Mr. CHAITHANYA P
Age/Gender: 34 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.0000204812
Visit ID: CTNAOPV191769
Visit Date: 25-01-2024 08:57
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. CHAITHANYA P
Age/Gender: 34 Y/M
Address: CHENNAI
Location: CHENNAI, TAMIL NADU
Doctor:
Department: GENERAL
Rate Plan: T NAGAR_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. VASANTHI SACHIDHANAND

MR No: CTNA.0000204812
Visit ID: CTNAOPV191769
Visit Date: 25-01-2024 08:57
Discharge Date:
Referred By: SELF

Doctor's Signature

Patient Name : Mr. CHAITHANYA P

Age/Gender : 34 Y/M

UHID/MR No. : CTNA.0000204812

OP Visit No : CTNAOPV191769

Sample Collected on :

Reported on : 26-01-2024 10:44

LRN# : RAD2216196

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : bobS5748

DEPARTMENT OF RADIOLOGY

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. CHAITHANYA P	Age/Gender	: 34 Y/M
UHID/MR No.	: CTNA.0000204812	OP Visit No	: CTNAOPV191769
Sample Collected on	:	Reported on	: 25-01-2024 12:55
LRN#	: RAD2216196	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS5748		

DEPARTMENT OF RADIOLOGY

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 9.3 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 10 cms.
Left kidney measures 10.9 cms.

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

Prostate measures 3.0 x 2.5 x 2.5 cms (volume 9 cc) and shows normal echopattern.
Seminal vesicles appear normal.
Bladder is normal in contour. Both iliac fossae appear normal.

IMPRESSION:

Patient Name : Mr. CHAITHANYA P

Age/Gender : 34 Y/M

NORMAL STUDY.



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

Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 11:03AM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 12:10PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

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:BED240017985

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 - U85110TG2006PLC115819)
Regd. Office: 1-11-60/52, Ashoka Baghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 018 |
www.apollohsl.com | Email ID: enquiry@apollohsl.com, Ph No: 844-8904 7777, Fax No: 8864 7744

ADDRESS:
B No.70, F - Block, 2nd Avenue, Ashok Nagar ERM, Chennai 600 032,
Phone - 844 2624804 / 95

1860 500 7788
www.apolloclinic.com

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 11:03AM
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Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	14.2	g/dL	13-17	Spectrophotometer
PCV	41.70	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.89	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	85.2	fL	83-101	Calculated
MCH	29	pg	27-32	Calculated
MCHC	34	g/dL	31.5-34.5	Calculated
R.D.W	13.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,300	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	53.4	%	40-80	Electrical Impedance
LYMPHOCYTES	35.0	%	20-40	Electrical Impedance
EOSINOPHILS	3.3	%	1-6	Electrical Impedance
MONOCYTES	7.3	%	2-10	Electrical Impedance
BASOPHILS	1.0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3364.2	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2205	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	207.9	Cells/cu.mm	20-500	Calculated
MONOCYTES	459.9	Cells/cu.mm	200-1000	Calculated
BASOPHILS	63	Cells/cu.mm	0-100	Calculated
PLATELET COUNT	203000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	2	mm/hour	0-15	Capillary photometry
PERIPHERAL SMEAR				

METHODOLOGY : Microscopic.

RBC MORPHOLOGY : Predominantly normocytic normochromic RBC's noted.

Page 2 of 17



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M.B.B.S.,M.D(Pathology)
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www.apolloh.com | Email ID: enquiry@apolloh.com, Ph No: 040-4904 7272, Fax No: 4864 7244

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APOLLO CLINICS NETWORK

Telangana: Hyderabad | AS Rao Nagar | Chandu Nagar | Koodapur | Walibanda | Nizampet | Manikonda | Uppal | Anaparthi | Pradipati | Mittag (Sethurama Peta) | Karnataka: Bangalore (Kannanagalli) | Belgaum | Electronic City | Feroz Khan | HSR Layout | Indira Nagar | JP Nagar | Karamcheddi | Karamcoppa | Sarjapur Road | Mysore (VV Bellur) | Tamil Nadu: Chennai | Anna Nagar | Kottapattinam | Mogappair | T Nagar | Velamannaikam | Velachery | Maharashtra: Pune (Aundh) | Higd Pradhikaran | Viman Nagar | Warananthi | Uttar Pradesh: Ghaziabad (Indraprastha) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Harjpur | Faridkot (Railway Station Road)

Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
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Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF HAEMATOLOGY

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

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 11:03AM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 04:08PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
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

Veena Singh

Dr.Veena Singh,
M.D(Pathology)
Consultant Pathologist



SIN No:BED240017985

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:18PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 01:05PM
Visit ID : CTNAOPV191769	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 MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	89	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 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: PLF02094240

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 12:40PM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 04:41PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 05:31PM
Visit ID : CTNAOPV191769	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	89	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
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	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)



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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
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UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 01:01PM
Visit ID : CTNAOPV191769	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	168	mg/dL	<200	CHO-POD
TRIGLYCERIDES	59	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	38	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	130	mg/dL	<130	Calculated
LDL CHOLESTEROL	118.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	11.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.42		0-4.97	Calculated

Comment:

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

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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DEPARTMENT OF BIOCHEMISTRY

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



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.75	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.14	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.61	mg/dL	0.0-1.1	CALCULATED
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	24.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	43.00	U/L	30-120	IFCC
PROTEIN, TOTAL	6.60	g/dL	6.6-8.3	Biuret
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.20	g/dL	2.0-3.5	Calculated
A/G RATIO	2		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 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.

Page 10 of 17



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



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DEPARTMENT OF BIOCHEMISTRY

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

- Correlation with PT (Prothrombin Time) helps.



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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.87	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	29.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	13.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.40	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.30	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.50	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136–146	ISE (Indirect)
POTASSIUM	3.8	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)



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



SIN No:SE04608932

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

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:16PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 12:51PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	8.00	U/L	<55	IFCC



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M.D.(Biochemistry)



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Nagar | J.P. Nagar | Kanchi | Karamangala | Sarjapur Road | Mysore (V.V. Mohalla) | Tamil Nadu: Chennai | Anna Nagar | Kottapattinam | Mogappair | T. Nagar | Yelamanchili | Kerala: Velachery | Maharashtra: Pune (Aundh | Nigdi | Pradhikaran) | Viman Nagar | Warananthi
Uttar Pradesh: Ghaziabad (Indraprastha) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Canton Road) | Haridwar (Railway Station Road)

Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:22PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 02:04PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodOTHYRONINE (T3, TOTAL)	1.11	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	6.47	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.326	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
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SIN No: SPL24011746

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:22PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 02:04PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF IMMUNOLOGY

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



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



SIN No: SPL24011746

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:12AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:58PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 01:31PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE STRAW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	7.0		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
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



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SIN No:UR2268004

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Patient Name : Mr.CHAITHANYA P	Collected : 25/Jan/2024 09:13AM
Age/Gender : 34 Y 2 M 4 D/M	Received : 25/Jan/2024 12:59PM
UHID/MR No : CTNA.0000204812	Reported : 25/Jan/2024 03:05PM
Visit ID : CTNAOPV191769	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS5748	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

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

*** End Of Report ***



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SIN No:UF010279

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