

Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 09:54AM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 10:51AM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	


DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	16.1	g/dL	13-17	Spectrophotometer
PCV	44.20	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.59	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	96.3	fL	83-101	Calculated
MCH	35.1	pg	27-32	Calculated
MCHC	36.4	g/dL	31.5-34.5	Calculated
R.D.W	14.3	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,910	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	63.2	%	40-80	Electrical Impedance
LYMPHOCYTES	27.6	%	20-40	Electrical Impedance
EOSINOPHILS	1.6	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	1.2	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5631.12	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2459.16	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	142.56	Cells/cu.mm	20-500	Calculated
MONOCYTES	570.24	Cells/cu.mm	200-1000	Calculated
BASOPHILS	106.92	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.29		0.78- 3.53	Calculated
PLATELET COUNT	360000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm/hour	0-15	Capillary photometry
PERIPHERAL SMEAR				

RBCs: Are normocytic normochromic

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


Dr. Varsha Narayanan
 M.B.B.S., M.D (Pathology)
 Consultant Pathologist



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: CHL241005422

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
 Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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PLATELETS: Appear adequate in number.

HEMOPARASITES: Negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Kindly correlate clinically.



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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



Varsha

Dr. Varsha Narayanan
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	94	mg/dL	70-110	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.



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SIN No: CHI 241005421
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Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 12:30PM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 01:45PM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 03:36PM
Visit ID : CMAROPV877719	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	102	mg/dL	70-140	GOD - POD

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.



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SIN No: CHI 241005603
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Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 11:26AM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 12:39PM
Visit ID : CMAROPV877719	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	123	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. Low HbA1c in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.

4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)



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SIN No: CHI 241005423
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DEPARTMENT OF BIOCHEMISTRY


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

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	258	mg/dL	0-199	CHE/CHO/POD
TRIGLYCERIDES	332	mg/dL	60-145	Glycerol Phosphate Oxidase/peroxidase
HDL CHOLESTEROL	35	mg/dL	35-80	Selective Inhibition
NON-HDL CHOLESTEROL	223	mg/dL	<130	Calculated
LDL CHOLESTEROL	156.18	mg/dL	<100	Calculated
VLDL CHOLESTEROL	66.35	mg/dL	<30	Calculated
CHOL / HDL RATIO	7.29		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.61		<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


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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.57	mg/dl	0.2-1.2	Diazotized Sulfanilic
BILIRUBIN CONJUGATED (DIRECT)	0.12	mg/dL	0-0.4	Diazotized Sulfanilic
BILIRUBIN (INDIRECT)	0.45	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	45.9	U/L	0-49	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	27.5	U/L	0-46	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.6		<1.15	Calculated
ALKALINE PHOSPHATASE	49.92	U/L	35-104	IFCC (Kinetic)
PROTEIN, TOTAL	7.00	g/dL	5.7-8.0	Biuret
ALBUMIN	4.45	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.55	g/dL	2.0-3.5	Calculated
A/G RATIO	1.75		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:

1. Hepatocellular Injury:

*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons’s diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

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



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Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	1.10	mg/dL	0.62-1.17	
UREA	18.53	mg/dL	10-50	Urease
BLOOD UREA NITROGEN	8.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.96	mg/dL	3.5-7.2	Uricase
CALCIUM	9.09	mg/dL	8.8-10.2	Arsenazo III
PHOSPHORUS, INORGANIC	3.35	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	142.1	mmol/L	135-145	Direct ISE
POTASSIUM	4.8	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102.8	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.00	g/dL	5.7-8.0	Biuret
ALBUMIN	4.45	g/dL	3.2-4.6	Bromocresol Green
GLOBULIN	2.55	g/dL	2.0-3.5	Calculated
A/G RATIO	1.75		0.9-2.0	Calculated


Dr. Varsha Narayanan
 M.B.B.S., M.D (Pathology)
 Consultant Pathologist



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

SIN No: CHL241005420

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

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)

Address:
 323/100/123, Doddathangur Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


 1860 500 7788
 www.apolloclinic.com

Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 10:31AM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 02:44PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	104.87	U/L	15-73	Glycylglycine Nitoranalide

Result is rechecked. Kindly correlate clinically



Dr.Nisha
M.B.B.S,MD(Pathology)
Consultant Pathologist



SIN No: CHI 241005420
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Karnataka - 560034



Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 10:31AM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 01:08PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	1.18	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.13	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.018	µIU/mL	0.38-5.33	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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

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



Dr. Varsha Narayanan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



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SIN No: CHE241005417

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Address:
323/100/123, Doddathangur Village, Neeladri Main Road,
Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034



Patient Name	: Mr.CHATNA VENKATA KISHORE	Collected	: 26/Oct/2024 08:56AM
Age/Gender	: 40 Y 3 M 22 D/M	Received	: 26/Oct/2024 10:31AM
UHID/MR No	: CMAR.0000364573	Reported	: 26/Oct/2024 01:08PM
Visit ID	: CMAROPV877719	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S36278		

DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--



Varsha

Dr. Varsha Narayanan
M.B.B.S., M.D (Pathology)
Consultant Pathologist

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 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034



Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 01:49PM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 02:21PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
TOTAL PROSTATIC SPECIFIC ANTIGEN (tPSA) , SERUM	0.460	ng/mL	0-4	CLIA

Priya Murthy

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



Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 12:32PM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 01:12PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	5.5		5-7.5	Double Indicator
SP. GRAVITY	1.010		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
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Leucocyte Esterase
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	Microscopy
OTHERS	NIL			Microscopy

Comment:

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.



Dr. Varsha Narayanan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: CHE241005416

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APOLLO CLINICS NETWORK

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Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034



Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 02:07PM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 03:36PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD



Dr.Nisha
M.B.B.S,MD(Pathology)
Consultant Pathologist



SIN No: CHI 241005419

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Neeladri Nagar, Electronic city, Bengaluru,
Karnataka - 560034



Patient Name : Mr.CHATNA VENKATA KISHORE	Collected : 26/Oct/2024 08:56AM
Age/Gender : 40 Y 3 M 22 D/M	Received : 26/Oct/2024 10:58AM
UHID/MR No : CMAR.0000364573	Reported : 26/Oct/2024 01:09PM
Visit ID : CMAROPV877719	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36278	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*** End Of Report ***



Dr. Varsha Narayanan
M.B.B.S.,M.D(Pathology)
Consultant Pathologist



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

SIN No: CHE241005418

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APOLLO CLINICS NETWORK

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 Karnataka - 560034

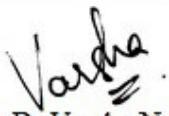


Patient Name : Mr.CHATNA VENKATA KISHORE
Age/Gender : 40 Y 3 M 22 D/M
UHID/MR No : CMAR.0000364573
Visit ID : CMAROPV877719
Ref Doctor : Self
Emp/Auth/TPA ID : 22S36278

Collected : 26/Oct/2024 08:56AM
Received : 26/Oct/2024 10:58AM
Reported : 26/Oct/2024 01:09PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr. Varsha Narayanan
M.B.B.S., M.D (Pathology)
Consultant Pathologist



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SIN No: CHL241005418

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Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

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

Patient Name	: Mr. Chatna venkata kishore	Age	: 40Yrs 3Mths 23Days
UHID	: CMAR.0000364573	OP Visit No.	: CMAROPV877719
Printed On	: 26-10-2024 05:44 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S36278		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN MALE

LIVER: Appears enlarged in size (16.2cm), and shows diffuse increase in echopattern. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Partially distended.No definite calculi identified in this state of distension . No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size and shows normal echopattern. No focal parenchymal lesions identified.

PANCREAS: Head and body appears normal. Rest obscured by bowel gas.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 10.5cm and parenchymal thickness measures 1.4cm.

Left kidney measures 10.4cm and parenchymal thickness measures 1.6cm.

URINARY BLADDER: Partially distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern. It measures 3.6x3.1x2.8cm.vol - 17cc

No free fluid or lymphadenopathy is seen.

Visualized bowel loops appears normal.

IMPRESSION:

HEPATOMEGALY WITH GRADE I FATTY INFILTRATION.

NO OTHER SIGNIFICANT ABNORMALITY DETECTED.

Suggested clinical correlation and further evaluation if needed.

Report disclaimer :

1. Not all diseases/ pathologies can be detected in USG due to certain technical limitation , obesity, bowel gas , patient preparation and organ location .
2. USG scan being an investigation with technical limitation has to be correlated clinically; this report is not valid for medicolegal purpose
3. please note: non obstructing ureteric calculi; small renal/ ureteric calculi may not always be detected on USG; a CT KUB is advised if symptoms persist .
4. Printing mistakes should immediately be brought to notice for correction.
5. This is USG Abdomen screening.

---End Of The Report---



Dr. NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
85518
Radiology

Patient Name	: Mr. Chatna venkata kishore	Age	: 40Yrs 3Mths 23Days
UHID	: CMAR.0000364573	OP Visit No.	: CMAROPV877719
Printed On	: 26-10-2024 01:27 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22S36278		

DEPARTMENT OF CARDIOLOGY

2D ECHO& COLOUR DOPPLER

DIMENSIONS	VALUES	VALUES(RANGE)	DIMENSIONS	VALUES	VALUES(RANGE)
AO(ed)	30mm	25 - 37 mm	IVS(ed)	10mm	06 - 11 mm
LA(es)	34mm	19 - 40 mm	LVPW(ed)	10mm	06 - 11 mm
RVID(ed)	17mm	07 - 21 mm	EF	60 %	(50 - 70 %)
LVID(ed)	44mm	35 - 55 mm	%FD	30%	(25 - 40%)
LVID(es)	22mm	24 - 42 mm			

MORPHOLOGICAL DATA

Situs	Solitus
Cardiac position	Levocardia
Systemic veins	Normal
Pulmonary veins	Normal
Mitral valve	Normal
Aortic Valve	Normal
Tricuspid Valve	Normal
Pulmonary Valve	Normal
Right Ventricle	Normal
Left Ventricle	Normal
Interatrial Septum	Intact
Interventricular Septum	Intact
Pulmonary Artery	Normal
Aorta	Normal
Right Atrium	Normal
Left Atrium	Normal

LV – RWMA	No RWMA at rest.
LV – FUNCTION	Normal systolic function
Pericardium	Normal Study
Doppler Studies	Normal
Doppler Summary	Normal
Rhythm	Sinus
	Normal cardiac chambers
	Normal valves
	Normal LV Systolic function
IMPRESSION	No pulmonary hypertension
	No RWMA at rest
	Normal pericardium,
	No intracardiac masses / thrombi

---End Of The Report---



Dr.KAPIL RANGAN
MBBS,MD,DM (CARDIOLOGY)
KMC NO.88625
Cardiology

Patient Name	: Mr. Chatna venkata kishore	Age	: 40Yrs 3Mths 23Days
UHID	: CMAR.0000364573	OP Visit No.	: CMAROPV877719
Printed On	: 26-10-2024 10:50 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36278		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

For clinical correlation.

---End Of The Report---



Dr.NAVEEN KUMAR K
MBBS, DMRD Radiology, (DNB)
85518
Radiology



भारत सरकार

GOVERNMENT OF INDIA



చైత్ర వెంకట కిశోర్

Chaitra Venkata Kishore

పుట్టిన తేదీ / DOB: 04 / 07 / 1984

పురుషుడు / MALE



6821 4535 4879

ఆధార్-సామాన్యమానమిడి హక్కు

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mr. Chaitra Venkata Kishore on 26/10/2021

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 	<input checked="" type="checkbox"/>
<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>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 _____ recommended</p>	
<ul style="list-style-type: none"> • Unfit 	


 Dr. _____
Medical Officer

This certificate is not meant for medico-legal purposes

Name : Mr. Chatna Venkata Kishore

Age : 40Y 3M 22D

UHID : CMAR.0000364573

Address : Whitefield Bangalore Karnataka INDIA 560066

sex : Male



Plan : ARCOFEMI MEDIWHEEL MALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CMAROPV877719

Bill No: CMAR-OCR-132451

Date: Oct 26th, 2024, 8:48 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324		
1	DENTAL CONSULTATION → Room 8	Consultation	<input type="checkbox"/>
2	PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)	Biochemistry	<input type="checkbox"/>
3	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
4	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
5	ULTRASOUND - WHOLE ABDOMEN → 2ND ROOM 4	Ultrasound Radiology	<input type="checkbox"/>
6	OPHTHAL BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
7	ENT CONSULTATION	Consultation	<input type="checkbox"/>
8	DIET CONSULTATION	Consultation	<input type="checkbox"/>
9	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
10	2 D ECHO	Cardiology	<input type="checkbox"/>
11	X-RAY CHEST PA → Room 5	X Ray Radiology	<input type="checkbox"/>
12	ECG → Room 7	Cardiology	<input type="checkbox"/>
13	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
14	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
15	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
16	HEMOGRAM + PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
17	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
18	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
19	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	URINE GLUCOSE (POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
22	URINE GLUCOSE (FASTING)	Clinical Pathology	<input type="checkbox"/>
23	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	Biochemistry	<input type="checkbox"/>
24	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>

wt - 91 kg
 HT - 173 cm
 BP - 140/110 mmHg
 pulse - 48 bpm

1a venkata kish
54573

Male

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 78 ms
QT / QTcBaz : 340 / 392 ms
PR : 140 ms
P : 114 ms
RR / PP : 746 / 750 ms
P / QRS / T : 46 / 54 / 45 degrees

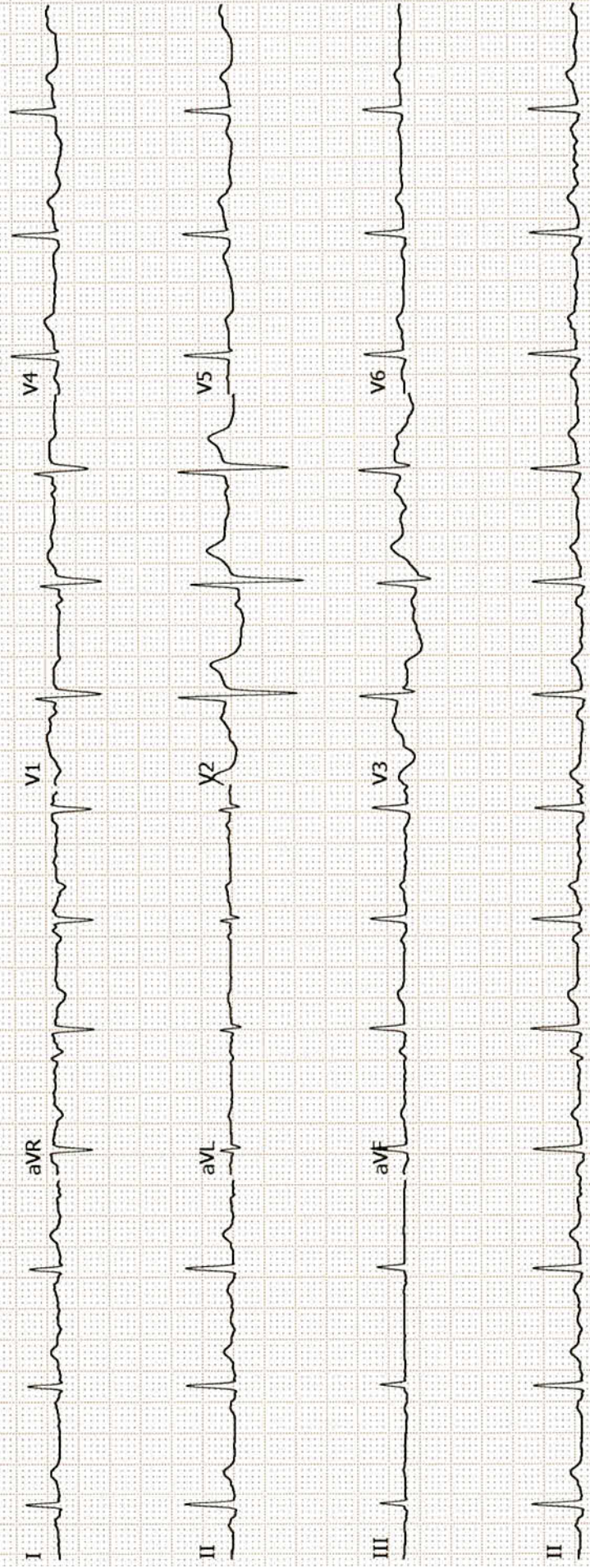
Normal sinus rhythm
Normal ECG

26.10.2024 11:45:49
APOLLO MEDICAL CENTRE
KUNDALAHALLI
BANGALORE

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

80 bpm
-- / -- mmHg



DEPARTMENT OF OPHTHALMOLOGY

Employee Name: Mr Chaitra Venkatar	Date: 26. 10. 24
Employee No:	Sex: M
Age: 40y	Systemic illness: Nil

Examination	RE	LE
Anterior Segment	Normal/Abnormal	Normal/Abnormal
Vision Distance	6/24	6/24
Near vision	N6	N6
Colour (Ishihara)	Normal/Abnormal	Normal/Abnormal
Refractive Error	Present/Absent	Present/Absent
New Glass power	-0.50 / 2.00 x 180	± / 2.25 x 180 - 6/6
Add Power	-	-
Glass If any	To Continue / Change	To Continue / Change
IOP (mm of Hg)	Normal/Abnormal	Normal/Abnormal
Posterior Segment	Normal/Abnormal	Normal/Abnormal
Impression	Normal/Refractive Error/Presbyopic BE/Others	

Advice/Comments
① Eyewisk forte 1° - 1° x 1 month

Signature of Consultant & Optometrist
Dr. Mridula. V. Anamath
 MBBS, MS (Ophthalmology)
 KMC No. 95103
 - 6 months