

Name : Mr. C H Bhargav

Age: 32 Y

Sex: M

Address: BANGALORE

Plan

: ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN

INDIA OP AGREEMENT

UHID:CINR.0000163507

6 T.N.B. 0.0 0.0 16 3 5 0.7 *

OP Number:CINROPV220481 **Bill No :**CINR-OCR-94477

Date : 29.02.2024 11:57

Sno	Serive Type/ServiceName	Department
l	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN IND	A - FY2324
	ØAMMA GLUTAMYL TRANFERASE (GGT)	
2	2 DECHO // M	
<u>جر</u>	LIVER FUNCTION TEST (LFT)	
كسيا	CLUCOSE, FASTING	
,	HEMOGRAM + PERIPHERAL SMEAR	
~	DIET CONSULTATION	
Ź	COMPLETE URINE EXAMINATION	
{	BURME GLUCOSE(POST PRANDIAL)	
9	PERIPHERAL SMEAR	
	DECG S	
اِ	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
	DENTAL CONSULTATION (1)	
	3 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
1.	4 URINE GLUCOSE(FASTING)	
	SHIBATE, GLYCATED HEMOGLOBIN	
ŀ	6 X-RAY CHEST PA (O	
1	7 ENT CONSULTATION	
1	8 FITNESS BY GENERAL PHYSICIAN	
_	9 BLOOD GROUP ABO AND RH FACTOR	
	OLIPID PROFILE	
2	1 BODY MASS INDEX (BMI)	
رب2	2 OPTHAL BY GENERAL PHYSICIAN	
9	3 ULTRASOUND - WHOLE ABDOMEN	
2	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	



Department

: GENERAL

MR NO

: CINR 0000163507

Doctor

Name

Mr. C H Bhargav

Registration No

Age/ Gender

/ Male 32 Y

Qualification

Consultation Timing:

11:57

BMI: -Waist Circum: 1/1/ Weight: Height: Pulse : Co Resp: Temp:

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

Apollo Clinic, Indiranagar

#2012, 1st Floor, 100 Feet Road, HAL 2nd Stage, Indiranagar - 560038

Phone: (080) 2521 4614/15

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: 1860 500 7788 : www.apolloclinic.com

OPTHAL PRESCRIPTION

PATIENT NAME: MAR	CH	Bhargau	DATE: 29/2/24
1111D NO. + 6 7 - 1 - 1			

OPTOMETRIST NAME: Ms.Swathi

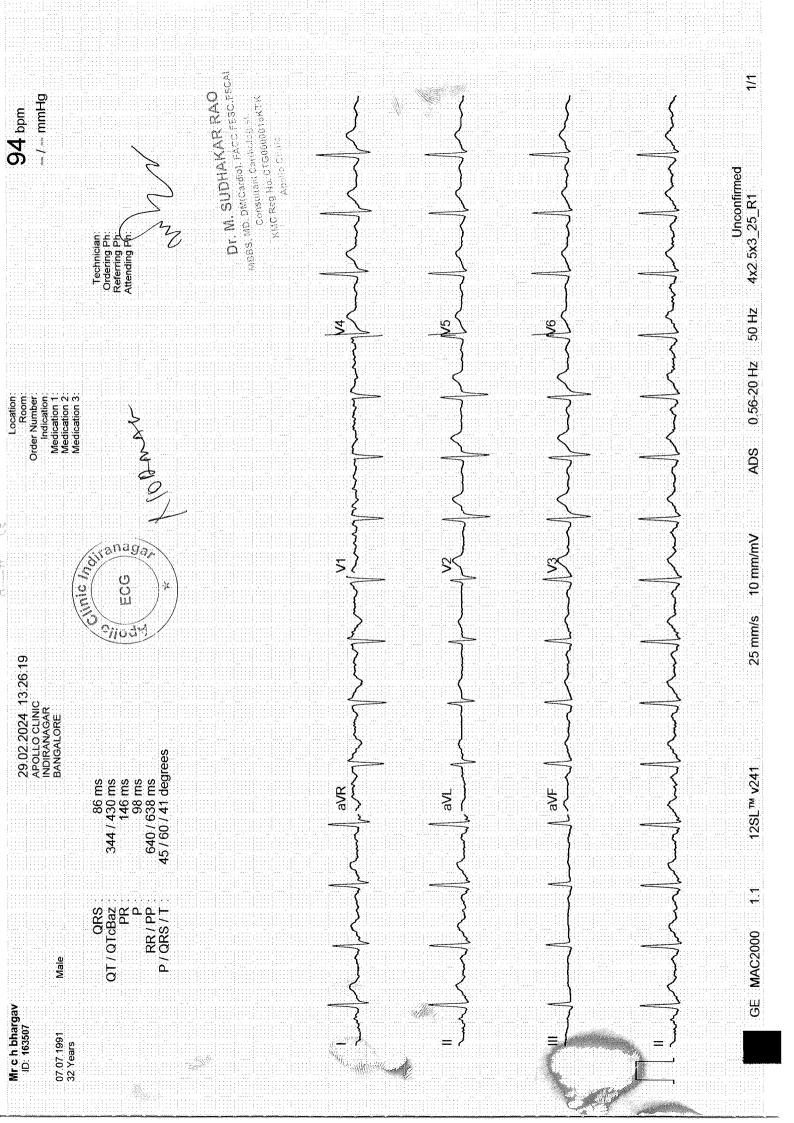
GENDER: M

This is to certify that I have examined

years and findings of his/her eye examination are as follows,

Remarks:

Apollo clinic Indiranagar



Male 176 cm 106 kg 32 yrs Indian 20.02.20.24 2:16:44pm

Meds:

Fest Reason:

Medical History:

Ref. MD: Ordering MD:

Fechnician: Test Type:

Comment

BRUCL: Exercise Time 07:18

Max HR: 160 bpm 85% of max predicted 188 bpm HR at rest: 97

Max BP: 120:80 mmHg Max RPP: 19200 mmHg *bpm

Maximum Workload: 10.00 METS

Max. ST: 40.90 mm, 0.24 mV < in 111; EXERCISE STAGE 3 6:30

Arrhythmia: A:17. PVC:5. PSVC:5

ST HR index: LTL µV bpm

STTIR slope: 1.46 µV/bpm (V6)

HR reserve used: 69%

HR recovery: 24 bpm

VE recovery: 0 VErnin

STURB (CV) Vm 600.0-1888502874 SHTTS

QRS duration; BASELINE, 90 ms. PEAK EX; 84 ms. REC; 88 ms

Reasons for Termination: Target heart rate achieved

Summan

Chest Pain, none. Arrhythmias, none. ST Changes, none. Overall impression: Resting ECC; normal, Functional Capacity, normal, HR Response to Exercise; appropriate. BP Response to Exercise; normal resting BP - appropriate response.

Conclusion: GOOD LEFORT TO LEAN CE

Normal Arry 1881

TREE DARKE VIEW FRANK DARK AZERZY OZ

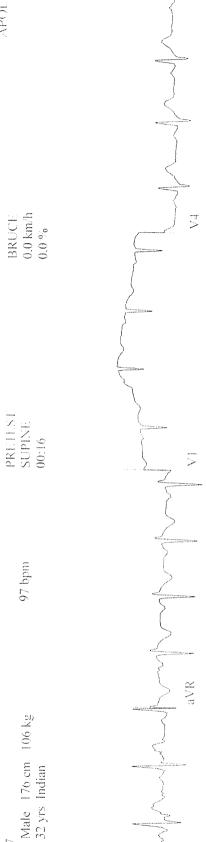
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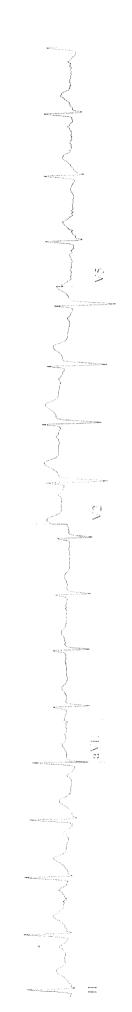
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Evereise Test 12-Lead Report

mr bhargav e h. Patien ID: 94477 29.02.2024 M 2:17:06pm 32









mr bhargax e h,
Patient ID: 94477
29.02.2024 M
2.17.10pm 32

will be dead with Torrow.
When so he begins A seriffy ones and by HRP HRBITA.D.

BRUCE: 0.0 km.h 0.0 % PRETEST STANDING 00:29 95 bpm Male 176 cm 106 kg 32 yrs Indian

Exercise Test. 12-Lead Report 99 bpm

Male 176 cm 106 kg 32 yrs Indian

mr bhargav e h. Patien ID: 94477 29.02.2024 M 2:17:26pm 32

PRETEST HYPERV. 00:36

BRUCE 0.0 km·h 0.0 %

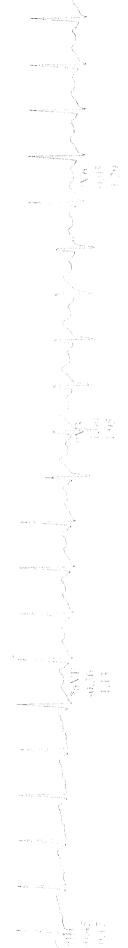
Exercise Test / Linked Medians EXERCISE STAGE 1 02:50 125 bpm Male 176 cm 106 kg 32 yrs Indian Patient IĎ: 94477 29.02.2024 M 2:20:19pm 35 mr bhargay ch,

Lead ST Level (mm) ST Slope (mV.s)

BRUCE 2.7 km/h 10.0 %

APOLLO CLINIC





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of Andrews Vietness Vietnes Johnson Vietness and Michigan

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EXERCISE STAGE 2 05:50 Male 176 cm 106 kg 32 yrs Indian

6.0 10.0 10.0 10.0

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ST Level (mm) ST Slope (mV/s) l.ead

BRUCE 4.0 km/h 12.0 %

Patient ID: 94477 29,02,2024 M 2:23:19pm 32

mr bhargay ch.

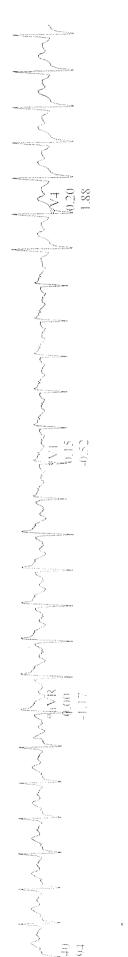
EXERCISE STAGE 3 07:19

Male 176 cm 106 kg 32 yrs Indian

mr bhargay e h. Patient ID: 04477 29,02,2024 M. 2,24,48pm

BRUCE 5.4 km.h

ST Level (mm) ST Slope (mV/s) Lead









Lead ST Level (mm) _ ST Slope (mV.s)

BRUCE 0.0 km/h 0.0 %

our bhargay c h,
Patient ID: 94477
29.02.2024 N
2.25:47pm 33

RECOVERY #1 00:10 Male 176 cm 106 kg 32 yrs Indian

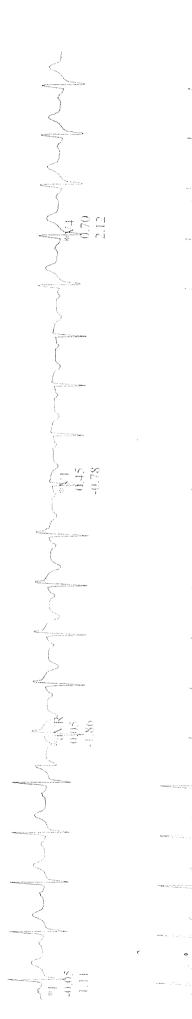
State of Lett. Principle

BRUCE 0.0 km/h 0.0 % Exercise fest. Unked Medians RECOVERY *1 03:00 114 bpm Male 176 cm 106 kg 32 yrs Indian

mr bhargay e b, Patient IID: 94477

29.02.2024 2:27:47pm

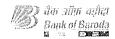
ST Level (mm) ST Slope (mV/s) Lead





75

7



प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited) हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. ALLA PRANAVI
क.कू.संख्या	116515
पदनाम	CREDIT
कार्य का स्थान	BENGALURU,ZO BENGALURU
जन्म की तारीख	15-01-1991
स्वास्थ्य जांच की प्रस्तावित तारीख	29-02-2024
बुकिंग संदर्भ सं.	23M116515100094504E

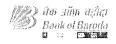
यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 27-02-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय.

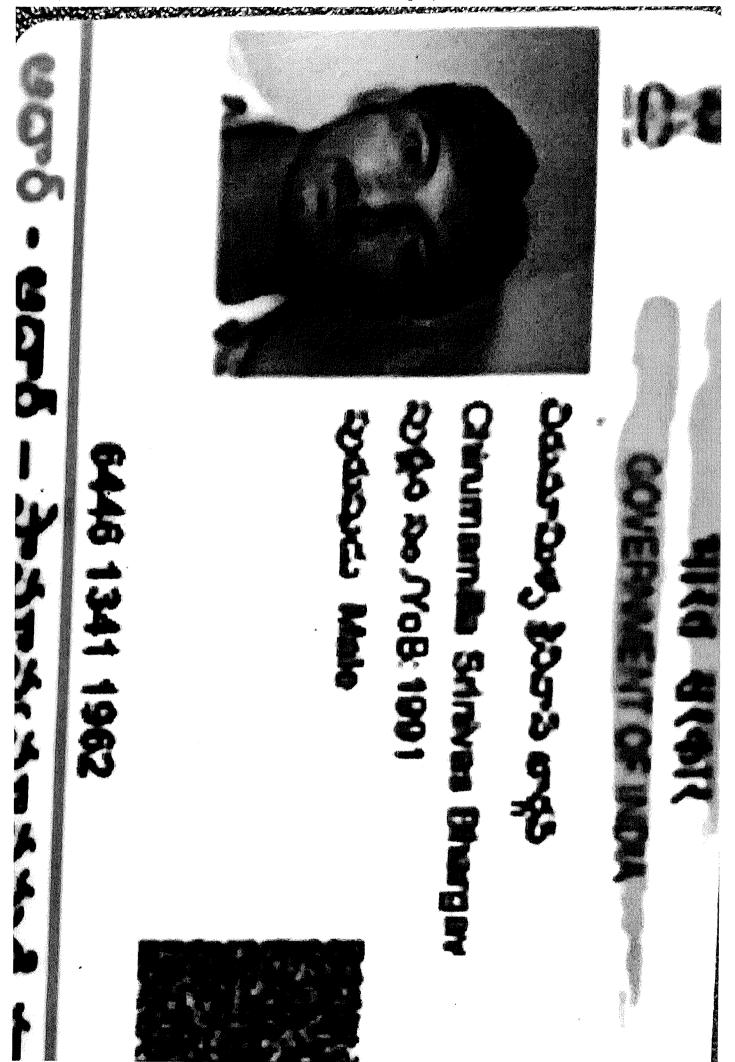
हस्ता/-(मुख्य महाप्रबंधक) मानव संसाधन प्रबंधन विभाग बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years)
	and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation





Patient Name : Mr. C H Bhargav Age/Gender : 32 Y/M

UHID/MR No.

: CINR.0000163507

OP Visit No

: CINROPV220481

Sample Collected on

: RAD2252023

Reported on Specimen

: 29-02-2024 16:06

Ref Doctor

LRN#

: SELF

Emp/Auth/TPA ID : 9066607785

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal.

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

CONCLUSION:

No obvious abnormality seen

Dr. DHANALAKSHMI B MBBS, DMRD

Radiology



Patient Name : Mr. C H Bhargav Age/Gender : 32 Y/M

UHID/MR No. : CINR.0000163507 **OP Visit No** : CINROPV220481

Sample Collected on : Reported on : 29-02-2024 14:06

Ref Doctor : SELF **Emp/Auth/TPA ID** : 9066607785

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, **shape and show mild diffusely increased echogenicity.** No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

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

PANCREAS: 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.

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

PROSTATE: Prostate is normal in size and echo-pattern.

No free fluid or lymphadenopathy is seen.

IMPRESSION:

GRADE I FATTY LIVER.

Dr. DHANALAKSHMI B

MBBS, DMRD

Radiology







Patient Name : Mr.C H BHARGAV Age/Gender : 32 Y 7 M 22 D/M

UHID/MR No : CINR.0000163507 Visit ID : CINROPV220481

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9066607785 Collected : 29/Feb/2024 12:05PM Received : 29/Feb/2024 02:13PM

Reported : 29/Feb/2024 03:45PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	15.2	g/dL	13-17	Spectrophotometer
PCV	45.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.06	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	90	fL	83-101	Calculated
MCH	30.2	pg	27-32	Calculated
MCHC	33.6	g/dL	31.5-34.5	Calculated
R.D.W	12.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,000	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (I	DLC)			
NEUTROPHILS	54.9	%	40-80	Electrical Impedance
LYMPHOCYTES	35	%	20-40	Electrical Impedance
EOSINOPHILS	3.6	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	0.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3843	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2450	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	252	Cells/cu.mm	20-500	Calculated
MONOCYTES	448	Cells/cu.mm	200-1000	Calculated
BASOPHILS	7	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.57		0.78- 3.53	Calculated
PLATELET COUNT	293000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	5	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC WBC WITHIN NORMAL LIMITS

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 1 of 14

SIN No:BED240053395

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

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK









: Mr.C H BHARGAV

Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

: CINR.0000163507

Visit ID

: CINROPV220481

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9066607785 Collected

: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:13PM

Reported Status : 29/Feb/2024 03:45PM

O-----N--

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 2 of 14



SIN No:BED240053395

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

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









: Mr.C H BHARGAV

Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

: CINR.0000163507

Visit ID

: CINROPV220481

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : 9066607785 Collected

: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:13PM

Reported

: 29/Feb/2024 05:05PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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 FACT	OR , WHOLE BLOOD EDTA			
BLOOD GROUP TYPE	В			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Page 3 of 14

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

SIN No:BED240053395

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

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









: Mr.C H BHARGAV

Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

Ref Doctor

: CINR.0000163507

Visit ID

: CINROPV220481

Emp/Auth/TPA ID

: Dr.SELF : 9066607785 Collected

: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:18PM

Reported Status : 29/Feb/2024 02:41PM

O----- N----

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	93	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:

- 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.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS, SODIUM FLUORIDE PLASMA (2 HR)	143	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN),	VHOLE BLOOD EDTA			
HBA1C, GLYCATED HEMOGLOBIN	5.9	%		HPLC

Page 4 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240024120

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

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

Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

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









: Mr.C H BHARGAV

Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

: CINR.0000163507

Visit ID Ref Doctor : CINROPV220481

Emp/Auth/TPA ID

: Dr.SELF : 9066607785 Collected

: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:18PM

Reported

: 29/Feb/2024 02:41PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

ANGOLEMI - MEDIWITELE - 1 OLE BODT ANNOAL 1 EOS MALE - 2D ECHO - 1 AN INDIA - 1 12324							
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)

Page 5 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:EDT240024120

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: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:16PM

Reported

Status

: 29/Feb/2024 02:45PM

O----- N----

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	174	mg/dL	<200	CHO-POD
TRIGLYCERIDES	125	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	44	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	130	mg/dL	<130	Calculated
LDL CHOLESTEROL	105.2	mg/dL	<100	Calculated
VLDL CHOLESTEROL	25	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.96		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

- 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.
- 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.

Page 6 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04645538

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

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

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APOLLO CLINICS NETWORK









: Mr.C H BHARGAV

Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

: CINR.0000163507

Visit ID Ref Doctor : CINROPV220481

Emp/Auth/TPA ID

: Dr.SELF : 9066607785 Collected

: 29/Feb/2024 12:05PM

Received

: 29/Feb/2024 02:16PM : 29/Feb/2024 02:45PM

Reported Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

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

Page 7 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04645538

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APOLLO CLINICS NETWORK









Patient Name : Mr.C H BHARGAV

Age/Gender : 32 Y 7 M 22 D/M

UHID/MR No : CINR.0000163507 Visit ID : CINROPV220481

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9066607785 Collected : 29/Feb/2024 12:05PM Received : 29/Feb/2024 02:16PM

Received : 29/Feb/2024 02:16PM Reported : 29/Feb/2024 02:45PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	0.73	mg/dL	0.3–1.2	DPD				
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD				
BILIRUBIN (INDIRECT)	0.62	mg/dL	0.0-1.1	Dual Wavelength				
ALANINE AMINOTRANSFERASE (ALT/SGPT)	39	U/L	<50	IFCC				
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	30.0	U/L	<50	IFCC				
ALKALINE PHOSPHATASE	41.00	U/L	30-120	IFCC				
PROTEIN, TOTAL	7.55	g/dL	6.6-8.3	Biuret				
ALBUMIN	4.50	g/dL	3.5-5.2	BROMO CRESOL GREEN				
GLOBULIN	3.05	g/dL	2.0-3.5	Calculated				
A/G RATIO	1.48		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 > 1In 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.
- 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 8 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04645538

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APOLLO CLINICS NETWORK









: Mr.C H BHARGAV

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: 32 Y 7 M 22 D/M

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: 9066607785

Collected

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: 29/Feb/2024 02:16PM

Reported Status

: 29/Feb/2024 02:45PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	0.97	mg/dL	0.67-1.17	Jaffe's, Method				
UREA	23.80	mg/dL	17-43	GLDH, Kinetic Assay				
BLOOD UREA NITROGEN	11.1	mg/dL	8.0 - 23.0	Calculated				
URIC ACID	6.92	mg/dL	3.5–7.2	Uricase PAP				
CALCIUM	9.00	mg/dL	8.8-10.6	Arsenazo III				
PHOSPHORUS, INORGANIC	3.06	mg/dL	2.5-4.5	Phosphomolybdate Complex				
SODIUM	136	mmol/L	136–146	ISE (Indirect)				
POTASSIUM	4.5	mmol/L	3.5–5.1	ISE (Indirect)				
CHLORIDE	104	mmol/L	101–109	ISE (Indirect)				
PROTEIN, TOTAL	7.55	g/dL	6.6-8.3	Biuret				
ALBUMIN	4.50	g/dL	3.5-5.2	BROMO CRESOL GREEN				
GLOBULIN	3.05	g/dL	2.0-3.5	Calculated				
A/G RATIO	1.48		0.9-2.0	Calculated				

Page 9 of 14



DR. SHIVARAJA SHETTY M.B.B.S, M.D(Biochemistry) CONSULTANT BIOCHEMIST

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Reported Status : 29/Feb/2024 02:44PM

. ..

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	25.00	U/L	<55	IFCC
TRANSPEPTIDASE (GGT), SERUM				

Page 10 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04645538

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APOLLO CLINICS NETWORK









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: 29/Feb/2024 12:05PM

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: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	7.70	μg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.974	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	Т3	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

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SIN No:SPL24035258

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Reported Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

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

Page 12 of 14



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24035258

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APOLLO CLINICS NETWORK









Patient Name : Mr.C H BHARGAV

Age/Gender : 32 Y 7 M 22 D/M UHID/MR No : CINR.0000163507

Visit ID : CINROPV220481

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 9066607785 Collected : 29/Feb/2024 12:04PM
Received : 29/Feb/2024 04:25PM
Reported : 29/Feb/2024 04:31PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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 YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pН	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		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	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET M	OUNT AND MICROSCOPY	1		
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist Dr Priya Murthy M.B.B.S,M.D(Pathology) Consultant Pathologist Page 13 of 14



SIN No:UR2294072

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Age/Gender

: 32 Y 7 M 22 D/M

UHID/MR No

: CINR.0000163507

Visit ID

: CINROPV220481

Ref Doctor Emp/Auth/TPA ID : Dr.SELF

: 9066607785

Collected

: 29/Feb/2024 12:04PM

Received

: 29/Feb/2024 04:25PM

Reported

: 29/Feb/2024 04:30PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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 ***

Result/s to Follow: PERIPHERAL SMEAR

Dr.Shobha Emmanuel M.B.B.S,M.D(Pathology) Consultant Pathologist

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

Page 14 of 14



SIN No:UF010846

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