

Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K
Age/Gender : 30 Y 6 M 18 D/F
UHID/MR No : CTNA.0000211756
Visit ID : CTNAOPV218733
Ref Doctor : Self

Collected : 08/Mar/2025 08:59AM
Received : 08/Mar/2025 01:28PM
Reported : 08/Mar/2025 07:13PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	10.3	gm%	12-15	Cyanide-free SLS Hemoglobin
PCV	33.40	%	36-46	Fluorescence Flow Cytometry
RBC COUNT	3.93	Million/ul	3.8-4.8	Fluorescence Flow Cytometry
MCV	85	fL	83-101	Calculated
MCH	26.2	pg	27-32	Calculated
MCHC	30.8	g/dL	31.5-34.5	Calculated
R.D.W	14.4	%	11.6-14	Fluorescence Flow Cytometry
TOTAL LEUCOCYTE COUNT (TLC)	5,950	cells/cu.mm	4000-10000	Fluorescence Flow Cytometry
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	51.8	%	40-80	Fluorescence Flow Cytometry
LYMPHOCYTES	39.8	%	20-40	Fluorescence Flow Cytometry
EOSINOPHILS	1.2	%	1-6	Fluorescence Flow Cytometry
MONOCYTES	6.9	%	2-10	Fluorescence Flow Cytometry
BASOPHILS	0.3	%	0-2	Fluorescence Flow Cytometry
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3082.1	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2368.1	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	71.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	410.55	Cells/cu.mm	200-1000	Calculated
BASOPHILS	17.85	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.3		0.78- 3.53	Calculated
PLATELET COUNT	282000	cells/cu.mm	150000-410000	Fluorescence Flow

Page 1 of 15



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



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SIN No: CTR250300850

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)
This test has been performed at Apollo Health & Lifestyle Ltd, Central Reference Laboratory, Chennai

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APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** Ghaziabad (Indrapuram) | **Gujarat:** Ahmedabad (Satellite) | **Punjab:** Amritsar (Court Road) | **Haryana:** Faridabad (Railway Station Road)

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MPV	10.7	FI	8.1-13.9	Cytometry
ERYTHROCYTE SEDIMENTATION RATE (ESR)	11	mm/hour	0-20	Calculated Capillary photometry

PERIPHERAL SMEAR

METHODOLOGY	: Microscopic
RBC MORPHOLOGY	: Mild anisocytosis, 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.
NOTE/ COMMENT	: Please 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

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

Comment:

1. This tests determines ABO & Rh blood groups (testing for other blood group systems not performed) through immunological reaction between RBC antigen & antibody.
2. ABO system also has Subgroups of A, B and rare phenotype as Bombay blood group which requires further testing and required recommendations as per the case will be provided.
3. Rh system in certain individual can have weak or partial Rh D expression which can result in weaker agglutination reactions and hence all Rh D Negative groups need to be further cross verified using Rh Du testing.
4. In case of Newborn - Only forward typing is performed, reverse typing is not performed, since the antibodies are not fully formed. Hence it is recommended to re-test blood grouping after 6 months.
5. In certain cases History of Recent blood transfusion (within 3-4mths), of bone marrow transplantation, certain drugs (especially monoclonal antibody) & certain malignancies may interfere with interpretation of blood grouping.
6. It is always recommended for reconfirmation of the Blood Group along with cross matching before blood transfusion.



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Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K	Collected : 08/Mar/2025 12:22PM
Age/Gender : 30 Y 6 M 18 D/F	Received : 08/Mar/2025 03:43PM
UHID/MR No : CTNA.0000211756	Reported : 08/Mar/2025 05:44PM
Visit ID : CTNAOPV218733	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	108	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. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	82	mg/dL	Non-diabetic <140 ~ Impaired glucose Tolerance 140 - 200 ~ Diabetic >200	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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This test has been performed at Apollo Health and Lifestyle Ltd - RRL ASHOK NAGAR

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ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	120	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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DEPARTMENT OF BIOCHEMISTRY


ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	164	mg/dL	< 200	CHOD-PAD
TRIGLYCERIDES	87	mg/dL	< 150	GPO-PAP
HDL CHOLESTEROL	38	mg/dL	>=40 Desirable	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	126	mg/dL	<130	Calculated
LDL CHOLESTEROL	108.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	17.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.32		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.00		<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	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 40	Low < 35; Borderline Low 35-40		
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220



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



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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.23	mg/dL	0-1.2	Diazo
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	0-0.2	Diazo
BILIRUBIN (INDIRECT)	0.15	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	10	U/L	10-35	IFCC with Pyridoxal Phosphate
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	10-50	IFCC with Pyridoxal Phosphate
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.8		<1.15	Calculated
ALKALINE PHOSPHATASE	63.00	U/L	35-104	IFCC
PROTEIN, TOTAL	7.20	g/dL	6.4-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	Bromo Cresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.4		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, Wilson's diseases, Cirrhosis, but the increase is usually not >2. Note- If both SGPT and SGOT are within reference range then AST:ALT (De Ritis ratio) does not have any clinical significance.
2. Cholestatic Pattern:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin (Direct) and GGT elevated- helps to establish hepatic origin.
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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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.68	mg/dL	0.5-0.9	Jaffe
eGFR - ESTIMATED GLOMERULAR FILTRATION RATE	116.90	mL/min/1.73m ²	>60	CKD-EPI FORMULA
UREA	14.00	mg/dL	13-43	Calculated
BLOOD UREA NITROGEN	6.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.90	mg/dL	3.5-7.2	Uricase
CALCIUM	9.00	mg/dL	8.6-10	NM-Bapta
PHOSPHORUS, INORGANIC	3.80	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	134	mmol/L	136-145	ISE (Indirect)
POTASSIUM	6.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	100	mmol/L	98-107	ISE (Indirect)
PROTEIN, TOTAL	7.20	g/dL	6.4-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	Bromo Cresol Green
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.4		0.9-2.0	Calculated



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Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K
 Age/Gender : 30 Y 6 M 18 D/F
 UHID/MR No : CTNA.0000211756
 Visit ID : CTNAOPV218733
 Ref Doctor : Self

Collected : 08/Mar/2025 08:59AM
 Received : 08/Mar/2025 02:13PM
 Reported : 08/Mar/2025 06:11PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	5.73	U/L	6-42	IFCC



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



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

SIN No: CTR250300846

Apollo Health and Lifestyle Limited (CIN - U85110TG2800PL6115819)
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Address: Apollo Reference Laboratory, Chennai
 5th Floor, 280, Anna Avenue, Anna Nagar East, Chennai.600 102,
 Phone - 044-26224504 / 05

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** Ghaziabad (Indrapuram) | **Gujarat:** Ahmedabad (Satellite) | **Punjab:** Amritsar (Court Road) | **Haryana:** Faridabad (Railway Station Road)



Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K	Collected : 08/Mar/2025 08:59AM
Age/Gender : 30 Y 6 M 18 D/F	Received : 08/Mar/2025 02:36PM
UHID/MR No : CTNA.0000211756	Reported : 08/Mar/2025 05:26PM
Visit ID : CTNAOPV218733	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-iodothyronine (T3, TOTAL)	135	ng/dL	84.6-202	ECLIA
THYROXINE (T4, TOTAL)	7.16	µg/dL	5.12-14.06	ECLIA
THYROID STIMULATING HORMONE (TSH)	4.840	µIU/mL	0.270-4.20	ECLIA

Comment:

For Pregnant Women	Bio Ref Range for TSH in µIU/mL
9 – 12 Weeks	0.18 – 2.99
First trimester	0.33 – 4.59
Second trimester	0.35 – 4.10
Third trimester	0.21 – 3.15

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 Treatment.
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



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



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SIN No: CTR250300852

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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



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



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Collected : 08/Mar/2025 08:59AM
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 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	Scattering of light
TRANSPARENCY	CLEAR		CLEAR	Scattering of light
pH	6.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.003		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NORMAL		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	1	/hpf	< 10	Automated Image based microscopy
RBC	0	/hpf	0-2	Automated Image based microscopy
CASTS	NEGATIVE	/lpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	NEGATIVE	/hpf	Occasional-Few	Automated Image based 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 THILAGA
 M.B.B.S.,M.D(Pathology)
 Consultant Pathologist



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Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K
Age/Gender : 30 Y 6 M 18 D/F
UHID/MR No : CTNA.0000211756
Visit ID : CTNAOPV218733
Ref Doctor : Self

Collected : 08/Mar/2025 08:59AM
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Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Page 13 of 15



Dr THILAGA
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Patient Name : Mrs.NAGA GANGA VENKATA RAMANAMMA K
Age/Gender : 30 Y 6 M 18 D/F
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

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



Dr THILAGA
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Patient Name	: Mrs.NAGA GANGA VENKATA RAMANAMMA K	Collected	: 08/Mar/2025 10:58AM
Age/Gender	: 30 Y 6 M 18 D/F	Received	: 08/Mar/2025 12:49PM
UHID/MR No	: CTNA.0000211756	Reported	: 08/Mar/2025 04:15PM
Visit ID	: CTNAOPV218733	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

LBC PAP SMEAR , CERVICAL SAMPLE

	CYTOLOGY NO.	LBC-1085/2025
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial & intermediate squamous cells noted.Inflammation present.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

***** End Of Report *****

Page 15 of 15



Dr THILAGA
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Consultant Pathologist



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APOLLO CLINICS NETWORK

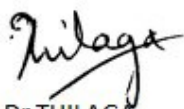
Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | **Andhra Pradesh:** Vizag (Seethamma Peta) | **Karnataka:** Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | **Mysore** (VV Mohalla) | **Tamilnadu:** Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | **Maharashtra:** Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | **Uttar Pradesh:** Ghaziabad (Indrapuram) | **Gujarat:** Ahmedabad (Satellite) | **Punjab:** Amritsar (Court Road) | **Haryana:** Faridabad (Railway Station Road)



Patient Name	: Mrs.NAGA GANGA VENKATA RAMANAMMA K	Collected	: 08/Mar/2025 10:58AM
Age/Gender	: 30 Y 6 M 18 D/F	Received	: 08/Mar/2025 12:49PM
UHID/MR No	: CTNA.0000211756	Reported	: 08/Mar/2025 04:15PM
Visit ID	: CTNAOPV218733	Status	: Final Report
Ref Doctor	: Self	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 THILAGA
M.B.B.S, M.D (Pathology)
Consultant Pathologist



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

SIN No: CTR250300980

Apollo Health and Lifestyle Limited

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 **1860 500 7788**

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Patient Name	: Mrs. NAGA GANGA VENKATA RAMANAMMA KEDARISSETTI	Age	: 30Yrs 6Mths 15Days
UHID	: CTNA.0000211756	OP Visit No.	: CTNAOPV218733
Printed On	: 08-03-2025 01:58 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: --		

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 7.3 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 9.1 cms.
Left kidney measures 10.1 cms.

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

Bladder is normal in contour.
Uterus is anteverted and measures 8.4 x 4.2 x 4.1 cms.
It shows normal endometrial and myometrial echoes.
Endometrium thickness measures 6 mm.
Cervix and vagina appears normal.

Right ovary measures 3.5 x 2.0 cms.

Left ovary measures 2.7 x 2.1 cms.

Both ovaries are normal in size and echotexture.

Both the parametria are free. No mass lesion seen in the pelvis.

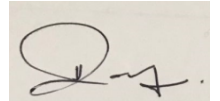
Both iliac fossae appear normal.

IMPRESSION:

NORMAL STUDY.

Note : Please bring your old report for the next visit.

---End Of The Report---



Dr.RASHEED HIDAYATHULLAH
MBBS, DNB (RD)
78271
Radiology

Patient Name : Mrs. NAGA GANGA VENKATA
RAMANAMMA KEDARISETTI Age : 30Yrs 6Mths 15Days

UHID : CTNA.0000211756 OP Visit No. : CTNAOPV218733

Printed On : 08-03-2025 01:13 PM Advised/Pres Doctor : --

Department : Cardiology Qualification : --

Referred By : Self Registration No. : --

Employer Id : --

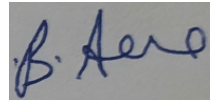
DEPARTMENT OF CARDIOLOGY

Impression:

NORMAL SINUS RHYTHM

NORMAL ECG.

---End Of The Report---



Dr.ARUNA BABBURI
MBBS,MRCGP,DFSRH

Cardiology

Patient Name	: Mrs. NAGA GANGA VENKATA RAMANAMMA KEDARISSETTI	Age	: 30Yrs 6Mths 15Days
UHID	: CTNA.0000211756	OP Visit No.	: CTNAOPV218733
Printed On	: 08-03-2025 01:48 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: --		

DEPARTMENT OF CARDIOLOGY

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.3CM
LA (es)	3.4CM
LVID (ed)	4.7CM
LVID (es)	2.8 CM
IVS (Ed)	1.0CM
LVPW (Ed)	0.8CM
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

DOPPLER STUDIES

PWD: A>E AT MITRAL INFLOW

E/A-0.9m/sec A-0.7m/sec

VELOCITY ACROSS THE PULMONIC VALVE UPTO 1.0m/sec

VELOCITY ACROSS THE AV UPTO 1.2m/sec

IMPRESSION:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR FUNCTION

NORMAL LEFT VENTRICULAR IN SIZE

NO : PE/PAH

DONE BY

ANURADHA

---End Of The Report---



Dr.KIRUBAKARAN .
MBBS, MD, DNB(CARDIOLOGY)
69220
Cardiology

Patient Name : Mrs. NAGA GANGA VENKATA
RAMANAMMA KEDARISSETTI Age : 30Yrs 6Mths 17Days
UHID : CTNA.0000211756 OP Visit No. : CTNAOPV218733
Printed On : 10-03-2025 08:32 AM Advised/Pres Doctor : --
Department : Radiology Qualification : --
Referred By : Self Registration No. : --
Employer Id : --

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lung fields and hila are normal .

Both costophrenic and cardiophrenic angles are clear .

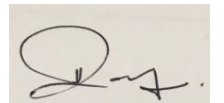
Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

Normal study.

---End Of The Report---

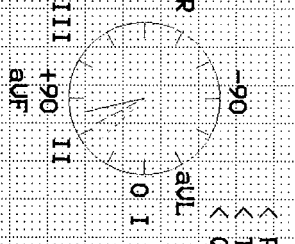


Dr.RASHEED HIDAYATHULLAH
MBBS, DNB (RD)
78271
Radiology

AGE: 30

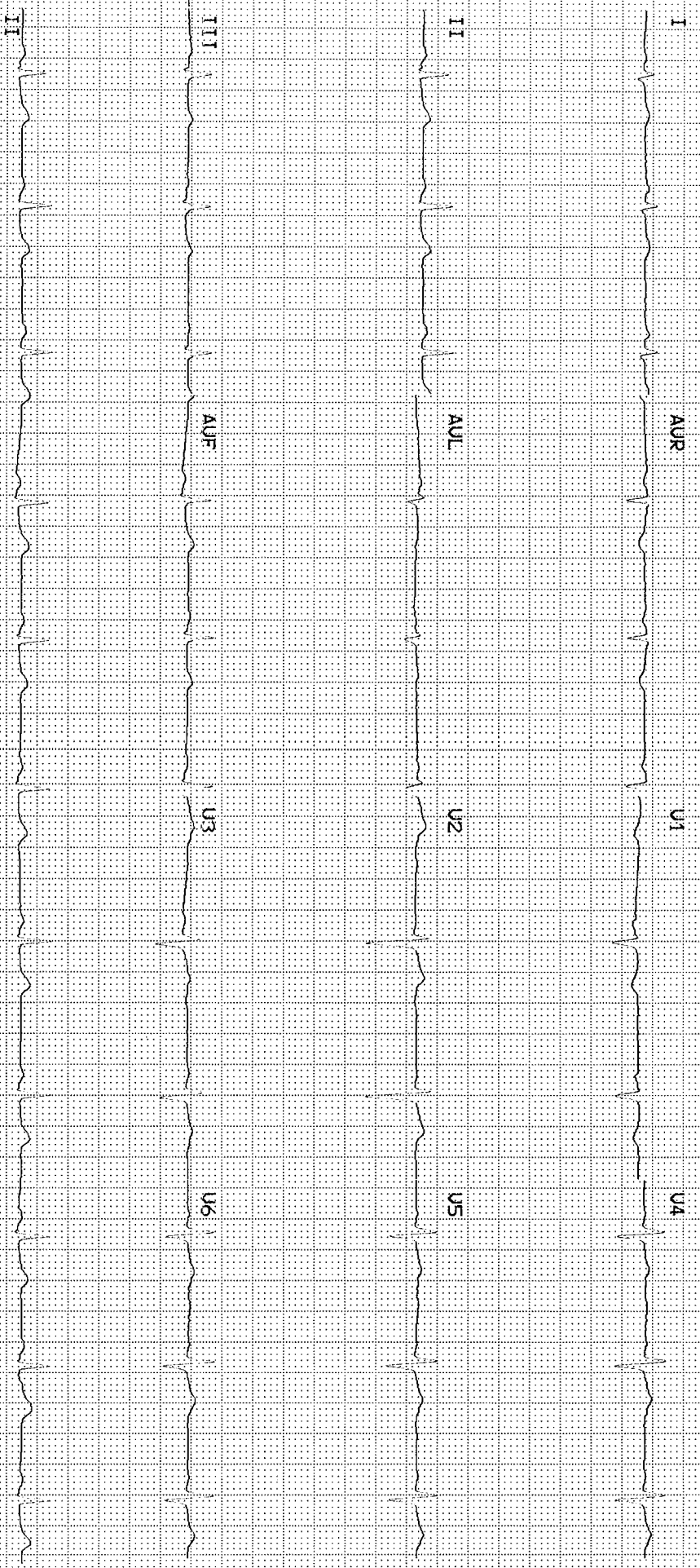
Measurement Results:



QRS : 94 ms
QT/QTcB : 412 / 428 ms
PR : 140 ms
P : 106 ms
RR/PP : 896 / 920 ms
P/ORS/T : 46 / 76 / 62 degrees



Interpretation:
12SL - Interpretation:
Normal sinus rhythm
Low voltage QRS
Borderline ECG

Unconfirmed report.



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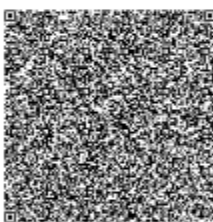
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 2727/30072/09081

Download Date: 03/06/2021
 To
 కేదరిశెట్టి నాగ గంగా వెంకట రమణమ్మ
 KEDARISETTI NAGA GANGA VENKATA RAMANAMMA
 D/O,Kedarasetty Venkata Nageswararao
 2-84
 Palteru
 Mangavaram
 Visakhapatnam Andhra Pradesh - 531126
 7306527763

Signature Not Verified



Issue Date: 19/10/2019



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :


XXXX XXXX 2954
VID : 9138 6486 9996 2582

నా ఆధార్, నా గుర్తింపు







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 కేదరిశెట్టి నాగ గంగా వెంకట రమణమ్మ
 KEDARISETTI NAGA GANGA VENKATA
 RAMANAMMA
 విశాఖపట్నం - 531126
 ఆంధ్ర ప్రదేశ్ - 531126
 Address:

Issue Date: 04/07/2021

సమాచారం



- ఆధార్ ఒక గుర్తింపు మాత్రమే పౌరసత్వం కాదు
- సురక్షితమైన క్యూఆర్ కోడ్ / ఆఫ్లైన్ ఎక్స్ ఎం ఎల్ / ఆన్లైన్ ప్రామాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.
- ఇది ఎలక్ట్రానిక్ పద్ధతిలో వ్రాయబడిన లేఖ.

INFORMATION

- **Aadhaar** is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML Authentication.
- This is electronically generated letter.

- ఆధార్ దేశవ్యాప్తంగా చెల్లుబాటు అవుతుంది.
- వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలను సులువుగా పొందటానికి ఆధార్ మీకు సహాయపడుతుంది.
- ఎల్లప్పుడూ మీ మొబైల్ నెంబర్ మరియు ఇమెయిల్ ఐడిని ఆధార్ లో అప్ డేట్ చేసి ఉంచండి
- ఎమ్. ఆధార్ అప్ ఉపయోగించండి - మీ ఆధార్ ను ఎల్లప్పుడూ మీ స్మార్ట్ ఫోన్ లో ఉంచండి.


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Unique Identification Authority of India

విడుదలనామ: D/O కేదరిశెట్టి వెంకట నాగేశ్వరరావు, 2-84, పాల్టెరు, విశాఖపట్నం, ఆంధ్ర ప్రదేశ్ - 531126
 Address:





Your appointment is confirmed

From noreply@apolloclinics.info <noreply@apolloclinics.info>

Date Mon 3/3/2025 6:47 PM

To sravankumar.solleti@bankofbaroda.co.in <sravankumar.solleti@bankofbaroda.co.in>

Cc Tnagar Apolloclinic <tnagar@apolloclinic.com>; Sreetharan V <sreetharan.v@apolloclinic.com>; Syamsunder M <syamsunder.m@apollohl.com>



Dear NAGA GANGA VENKATA RAMANAMMA KEDARISETTI ,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **Apollo Clinic T Nagar clinic** on **2025-03-08** at **07:45 - 08:00**.

Payment Mode	
Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."

Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

Instructions to be followed for a health check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

For further assistance, please call us on our Help Line #: 1860 500 7788.

**Clinic Address: THE APOLLO MEDICAL CENTRE, 11/4 SIVA PRAKASAM STREET
PONDYBAZZAR T-NAGAR-600017.**

Contact No: (044) 24341066/24335315 - 16 - 18 - 19 .

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,
Apollo Clinic

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination of Mrs. Nagaganga Venkata Ramanamma Kedariseti on 10/3/25

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<input 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. <u>Increased Serum Potassium</u></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>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> • Currently Unfit. Review after <p>.....recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. ARUNA BABBURI
MBBS, MRCP, DFRH
Consultant General Physician
Reg. No. 115908

Dr. Aruna Baburi
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

PHYSICAL EXAMINATION						
NAME	Mrs. Naga Ganga Venkata Ramamma					
AGE / GENDER	30 yrs		MALE/FEMALE		DATE OF CHECK UP	
HEIGHT	160		Cm			
WEIGHT	56.4		Kgs			
BLOOD PRESSURE	100/60		mm/Hg			
BMI	22					
WAIST	68					
HIP	78					
WAIST IP RATION	0.87					
RESPIRATORY RATE	18					
PULSE	72		Min			
CHEST	INSPIRATION					
	EXPIRATION					
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 CENTER
Door No 11/4, Sivaprakasam Street, T.Nagar
Chennai - 600017.
Ph No 044-2434 4066 / 24335315 / 16/18/19

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | Email ID: enquiry@apollohl.com

APOLLO CLINICS NETWORK TAMILNADU

Chennai (Arnanagar | Kotturpuram | Mogappair | T Nagar | Vaiasaravakkam | Velachery)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Naga.

8/3/25.

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

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Gr No specific ear complaints.

Gr: Saus: B/c wax (+)

nose & throat clear.

Δ - B/c Saus wax.

Gr
Saus ear drops (17L)
4'-4'-4'
x 2 days.

Vaccination History

- Influenza Vaccine
- Pneumococcal Conjugate Vaccine
- Shingles Vaccine
- Tdap (Tetanus, Diphtheria, Pertussis) Vaccine
- HPV Vaccine
- Others

APOLLO MEDICAL CENTER
Door No 11, 4, Sivaprakasam Street, T.Nagar
Chennai - 60017.
Ph No 044-24341050, 24335315, 4515119

Follow up date:

Doctor Signature

Book Your Appointment

Whatsapp Number : 7066028648
For appointments call : 1860 500 7788
Website : www.apolloclinic.com

Address:

Door no 11, 4, Sivaprakasam St, Pondy Bazaar,
Parthasarathi Puram, T Nagar, Chennai

OPHTHALMOLOGY

- RAMANAMMA KEDARISETTI

Name NAGARAJAN VENKATA	Date 8/3/25
Age 30	UHID No. 211756
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	

OPHTHAL FITNESS CERTIFICATE

	RE	LE
DV-UCVA :	(6/6)	10/6P)
DV-BCVA :		
NEAR VISION :	NE	NE
ANTERIOR SEGMENT :		
IOP :		
FIELDS OF VISION :		
E O M :		
COLOUR VISION :	Normal	Normal
FUNDUS :		
IMPRESSION :		
ADVICE :	Review	In 1 month