

Patient Name	: Mrs.C V HARITHA VARMA	Collected	: 26/Oct/2024 09:19AM
Age/Gender	: 35 Y 8 M 1 D/F	Received	: 26/Oct/2024 10:41AM
UHID/MR No	: CMYS.0000057756	Reported	: 26/Oct/2024 11:25AM
Visit ID	: CMYSOPV130891	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S36309		

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



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

SIN No:MYS241001452



Patient Name : Mrs.C V HARITHA VARMA	Collected : 26/Oct/2024 09:19AM
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UHID/MR No : CMYS.0000057756	Reported : 26/Oct/2024 02:02PM
Visit ID : CMYSOPV130891	Status : Final Report
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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	12.8	g/dL	12.5-15	Spectrophotometer
PCV	38.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.65	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	81.7	fL	83-101	Calculated
MCH	27.5	pg	27-32	Calculated
MCHC	33.7	g/dL	31.5-34.5	Calculated
R.D.W	11.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,130	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	60	%	40-80	Electrical Impedance
LYMPHOCYTES	31	%	20-40	Electrical Impedance
EOSINOPHILS	3	%	1-6	Electrical Impedance
MONOCYTES	5	%	2-10	Electrical Impedance
BASOPHILS	1	%	0-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4878	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2520.3	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	243.9	Cells/cu.mm	20-500	Calculated
MONOCYTES	406.5	Cells/cu.mm	200-1000	Calculated
BASOPHILS	81.3	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.94		0.78- 3.53	Calculated
PLATELET COUNT	309000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	30	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

R.B.C: Majority are normocytic normochromic.
W.B.C: Are normal in number,morphology and distribution.
Platelets: Adequate and are seen in singles and clumps.
Hemoparasites: Not seen.

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Dr. PAVAN KUMAR M
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Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

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

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



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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
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



Dr. PAVAN KUMAR M
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Visit ID : CMYSOPV130891	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	86	mg/dl	74-106	GOD, POD

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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Patient Name	: Mrs.C V HARITHA VARMA	Collected	: 26/Oct/2024 11:49AM
Age/Gender	: 35 Y 8 M 1 D/F	Received	: 26/Oct/2024 01:15PM
UHID/MR No	: CMYS.0000057756	Reported	: 26/Oct/2024 04:10PM
Visit ID	: CMYSOPV130891	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, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	109	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.



Dr. PAVAN KUMAR M
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SIN No:MYS241001528



Patient Name : Mrs.C V HARITHA VARMA	Collected : 26/Oct/2024 09:19AM
Age/Gender : 35 Y 8 M 1 D/F	Received : 26/Oct/2024 10:35AM
UHID/MR No : CMYS.0000057756	Reported : 26/Oct/2024 11:27AM
Visit ID : CMYSOPV130891	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S36309	

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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	4.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	82	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)



Dr. PAVAN KUMAR M
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SIN No:MYS241001455



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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	197	mg/dl	0-200	CHOD
TRIGLYCERIDES	62	mg/dl	0-150	GPO, Trinder
HDL CHOLESTEROL	81	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	116	mg/dL	<130	Calculated
LDL CHOLESTEROL	103.39	mg/dL	<100	Calculated
VLDL CHOLESTEROL	12.32	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.42		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.10		<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



Dr. PAVAN KUMAR M
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SIN No:MYS241001448



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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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.37	mg/dl	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.13	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.24	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	23	U/l	0-45	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	25.0	U/l	0-31	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	67.00	U/l	42-98	IFCC (AMP buffer)
PROTEIN, TOTAL	8.20	g/dl	6.4-8.3	Biuret
ALBUMIN	4.40	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.16		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 Patten:*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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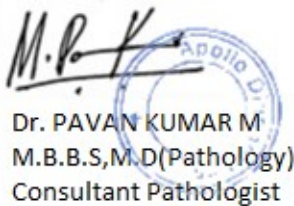


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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.56	mg/dL	0.51-1.04	Enzymatic colorimetric
UREA	17.85	mg/dl	13-43	Urease, UV
BLOOD UREA NITROGEN	8.3	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.30	mg/dL	2.6-6	Uricase
CALCIUM	9.20	mg/dl	8.6-10.3	Arsenazo III
PHOSPHORUS, INORGANIC	3.52	mg/dl	2.7-4.5	Molybdate
SODIUM	141	mmol/L	135-145	Direct ISE
POTASSIUM	4.7	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	109	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	8.20	g/dl	6.4-8.3	Biuret
ALBUMIN	4.40	g/dl	3.5-5.2	Bromcresol Green
GLOBULIN	3.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.16		0.9-2.0	Calculated



Dr. PAVAN KUMAR M
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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
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	26.00	U/l	0-38	IFCC



Dr. PAVAN KUMAR M
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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)	1.22	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.21	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.600	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

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Dr. PAVAN KUMAR M
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SIN No:MYS241001451

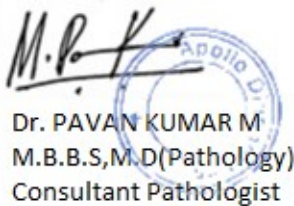


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DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
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Dr. PAVAN KUMAR M
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SIN No:MYS241001451



Patient Name : Mrs.C V HARITHA VARMA	Collected : 26/Oct/2024 09:19AM
Age/Gender : 35 Y 8 M 1 D/F	Received : 26/Oct/2024 01:12PM
UHID/MR No : CMYS.0000057756	Reported : 26/Oct/2024 02:21PM
Visit ID : CMYSOPV130891	Status : Final Report
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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	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical Measurement
pH	5.5		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	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	3 - 5	/hpf	<10	Microscopy
RBC	NIL	/hpf	0-2	Microscopy
CASTS	NIL		0-2 Hyaline Cast	Microscopy
CRYSTALS	ABSENT		ABSENT	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.



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Age/Gender : 35 Y 8 M 1 D/F	Received : 26/Oct/2024 01:13PM
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Visit ID : CMYSOPV130891	Status : Final Report
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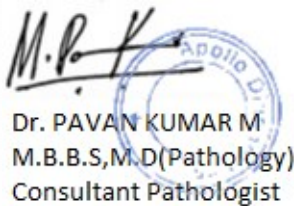
DEPARTMENT OF CLINICAL PATHOLOGY

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

*** End Of Report ***



Dr. PAVAN KUMAR M
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SIN No:MYS241001454




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Visit ID : CMYSOPV130891
Ref Doctor : Self
Emp/Auth/TPA ID : 22S36309

Collected : 26/Oct/2024 09:19AM
Received : 26/Oct/2024 01:13PM
Reported : 26/Oct/2024 01:58PM
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. PAVAN KUMAR M
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No: MYS241001454



Patient Name	: Mrs. C V HARITHA VARMA	Age	: 35Yrs 8Mths 5Days
UHID	: CMYS.0000057756	OP Visit No.	: CMYSOPV130891
Printed On	: 29-10-2024 11:37 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22S36309		

DEPARTMENT OF RADIOLOGY

ULTRASOUND WHOLE ABDOMEN

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 9.1cm with parenchymal thickness of 1.1cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 9.3cm with parenchymal thickness of 1.2cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 10x4.5x5.7cm with ET = 10mm. It is normal in size, outline and echotexture. **Two small well defined hypoechoic lesions are**

noted in intramural location of anterior wall of uterus largest measuring ~1.4x0.8 cm ,

Rt. OVARY: It measures 2.8x1.2cm. It is normal. No mass lesion seen.

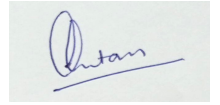
Lt. OVARY: It measures 2.7x1.7 cm. It is normal. No mass lesion seen.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION:

Two small intramural uterine fibroids

---End Of The Report---



Dr.CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Patient Name	: Mrs. C V HARITHA VARMA	Age	: 35Yrs 8Mths 2Days
UHID	: CMYS.0000057756	OP Visit No.	: CMYSOPV130891
Printed On	: 26-10-2024 07:56 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36309		

DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 78 beats per minutes.

Impression:

NORMAL RESTING ECG.

---End Of The Report---

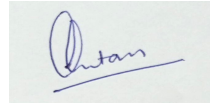
Dr. GURU PRASAD B V
MBBS, PGDCC
69949
Cardiology

Patient Name	: Mrs. C V HARITHA VARMA	Age	: 35Yrs 8Mths 15Days
UHID	: CMYS.0000057756	OP Visit No.	: CMYSOPV130891
Printed On	: 08-11-2024 07:42 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S36309		

DEPARTMENT OF RADIOLOGY

CLIENT SKIP THE CHEST X RAY .

---End Of The Report---



Dr.CHETAN HOLEPPAGOL
MBBS, DNB(RADIO DIAGNOSIS)
90037
Radiology

Patient	Mrs. C V HARITHA VARMA	Doctor	PRAVEEN R	Appt ID	CMYSAPT1178
Age/Gender	35Y Female	Qualification	MBBS, MS (ENT)	Consult Date	27 Oct 2024
UHID	CMYS.0000057756	Reg. No.	66012	Order Bill ID	CMYS-OCR-24554
				Visit Display ID	CMYSOPV130891

VITALS

Weight : 78Kgs	Height : 157Cms
Pulse : 80 BPM	Spo2 : 97%
BP : 120 / 80 MmHg	Respiratory Rate : 25 BPM
Temperature : 96.3 °F	

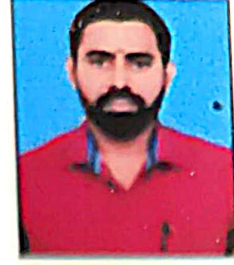
PRAVEEN R
Doctor's Signature

Apollo Health and Lifestyle Limited

(CIN-U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7* Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

Ph No: 040-4904 7777 | www.apollohl.com | Email ID:enquiry@apollohl.com



नाम
Name **C.V.Mahesh Varma**

E.C. No. **162879**

[Handwritten signature]

[Handwritten signature]

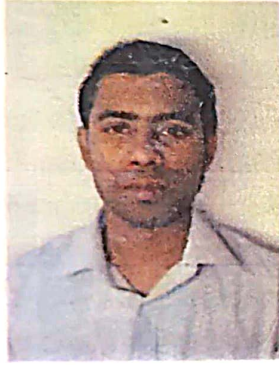
जारीकर्ता प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder



भारत प्रभुत्वम्

GOVERNMENT OF INDIA



సి. వి.మహేష్ వర్మ
C. V. Mahesh Varma

పుట్టిన సంవత్సరం/Year of Birth: 1985
పురుషుడు / Male



4043 6270 4739

ఆధార్ - సామాన్యుని హక్కు



भारत सरकार

GOVERNMENT OF INDIA



సి వి హరిత వర్మ

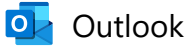
C V Haritha Varma

పుట్టిన తేదీ/ DOB: 25/02/1989

స్త్రీ / FEMALE



6840 1254 1085



Fwd: Health Check up Booking Confirmed Request(22S36309),Package Code-PKG10000377, Beneficiary Code-302162

From Mahesh Varma <maheshvarma212@gmail.com>
Date Sat 26-10-2024 09:05
To Mysore Apolloclinic <mysore@apolloclinic.com>

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

From: **Mediwheel** <wellness@mediwheel.in>
Date: Wed, 23 Oct 2024, 12:50
Subject: Health Check up Booking Confirmed Request(22S36309),Package Code-PKG10000377, Beneficiary Code-302162
To: <maheshvarma212@gmail.com>
Cc: <customercare@mediwheel.in>

011-41195959

Dear **Mahlesh VARMA**,

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

Hospital Package Name : Mediwheel Full Body Health Annual Plus Check
Name of Diagnostic/Hospital : Apollo clinic - VV Mohalla
Address of Diagnostic/Hospital- : Apollo Clinic, [23, Kalidasa Road, VV Mohalla, Mysore - 570002](#)
City : Mysore
State : Karnataka
Pincode : 570002
Appointment Date : 26-10-2024
Confirmation Status : Booking Confirmed
Preferred Time : 09:00 AM - 09:30 AM
Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
C V HARITHA VARMA	35 year	Female

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

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

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

For Women:

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

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

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

Thanks,
Mediwheel Team
Please Download Mediwheel App

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

Please visit to our [Terms & Conditions](#) for more informaion. [Click here](#) to unsubscribe.

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

Bp → 110/80. HGT → 153
wt → 55.9

Name : Mrs. C V HARITHA VARMA
Address : Mysore Mysore Karnataka INDIA 570001
Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

Age : 35Y 8M 1D
sex : Female

UHID : CMYS.0000057756



OP No: CMYSOPV130891
Bill No: CMYS-OCR-24554
Date: Oct 26th, 2024, 9:11 AM

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

Nirami

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. C.V. Harithavarma on 26/10/24.

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

	Tick
<ul style="list-style-type: none"> • Medically Fit 	<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. Review after _____ recommended • Unfit 	

Dr. T. Mubud
Medical Officer

This certificate is not meant for medico-legal purposes

Apollo Clinic
4th Floor,
Kaldasa Road, Mysore - 02
Ph : 0821-4006040/41

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

26/10/24.

Mrs. C.V. Haritha
Varma
35 yrs.

Dr. J. MUKUND
MBBS, MD (Internal
medicine)

Height: 153	Weight: 55.9	BMI:	Waist Circum:
Temp:	Pulse:	Resp:	B.P: 110/80 mmHg.

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

Routine health check up.

Also early morning sneezing
episodes.

Advice:

Tab. MONTAIR AB 1-0-0 x 10 days

Tab. E BAST-M 0-0-1 x 1 month

Follow up date:

J. Mukund
Doctor Signature

Date : 10/26/2024 Department : Obstetrics & Gynaecology
 Patient Name : Mrs. C V HARITHA VARMA Doctor : Dr. RASHMI B N
 UHID : CMYS.0000057756 Registration No. : 33393
 Age / Gender : 35Yrs 8Mths 1Days / Female Qualification : MBBS, DGO, DNB (GYNAECOLOGY)
 Consultation Timing : 10:46 AM

Height : 153	Weight : 55.9	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

PH → NS.

2H → hypertension +.

ml → 12 hrs.

Pa. - Both F. & M. tube sterilised

mt - regular m. vmp → 11/10/24.

8 cm → 26/10/24.

a small uterine fibroid, both ovaries (N).
- 1.4 x 0.8 cm.

↓

follow up:

adv: regular walk / yoga -
- healthy diet.

Follow up date :

Doctor Signature
Apollo Clinic
 # 23, 1st Floor,
 Kalidasa Road, Mysore - 02
 Ph : 0821-4006040/41

Date : 10/26/2024 Department : ENT
 Patient Name : Mrs. C V HARITHA VARMA Doctor : Dr. PRAVEEN KUMAR R
 UHID : CMYS.0000057756 Registration No. : 66012
 Age / Gender : 35Yrs 8Mths 1Days / Female Qualification : MBBS, MS (ENT)
 Consultation Timing : 10:46 AM

Height : 153	Weight : 55.9	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination /
Allergies History

Clinical Diagnosis & Management Plan

~~Come for regular health check~~

EDN bilateral gm. nose

nose. nasal mucosa pale

and quite a cophary. @

neck @

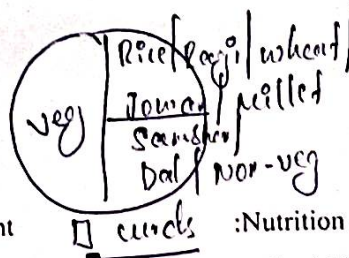
As

- 2wks + Antihistamine

PK

Follow up date :

Doctor Signature
Apollo Clinic
 # 23, 1st Floor,
 Kallidasa Road, Mysore - 02
 Ph : 0821-4006040/41



Date : 10/26/2024 Department : Nutrition & Dietetics
 Patient Name : Mrs. C V HARITHA VARMA Doctor : Miss.MADHURA B P
 UHID : CMYS.0000057756 Registration No. : A104102
 Age / Gender : 35Yrs 8Mths 1Days / Female Qualification : M.Sc. Nutrition and Dietetics
 Consultation Timing : 10:45 AM Ph.D^x

SRLO - 51kg

Height : 153	Weight : 55.9	BMI : 23.8 kg/m ²	Waist Circum : 110 cm
Temp :	Pulse :	Resp :	B.P : 110/80

General Examination / Allergies History

ESR - 30
 LDL - 102.39

Clinical Diagnosis & Management Plan

4th - Uterine fibroids.

- ⇒ Advised balanced diet with fiber rich foods.
- Take small frequent meals, do not skip meals.
- Include all variety of seasonal fruits, vegetables & green leafy vegetables.
- Include nuts like Almonds, walnuts and dry fruits like dried dates & raisins regularly.
- Include seeds like flaxseeds, pumpkin seeds, sesame seeds, sunflower seeds & watermelon seeds - 1 teaspoon each, dry roasted.
- Avoid red meat.
- Avoid alcohol, sugar, too much of salt, softening soda & creams.

Follow up date :

Doctor Signature .B.P

Apollo Clinic 26/10/2024
 # 23, 1st Floor,
 Kaldasa Road, Mysore - 02
 Ph : 0821-4006040/41

Patient Name: Mrs. C V HARITHA VARMA	Date : 26.10.2024	Referring Doctor: Dr. Self
Age / Sex: 35Yrs/Female	UHID No : 057756	Location : OP
ULTRASONOGRAPHY- ABDOMEN & PELVIS		

LIVER: It is normal in size and echotexture. No focal lesions seen. IHBR are not dilated. CBD and Portal vein are normal.

GALL BLADDER: It is well distended and normal. No calculi seen.

SPLEEN: It is normal in size, outline and echopattern. No e/o focal lesions.

PANCREAS: It is normal.

RIGHT KIDNEY: It measures 9.1cm with parenchymal thickness of 1.1cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

LEFT KIDNEY: It measures 9.3cm with parenchymal thickness of 1.2cm. It is normal in size, outline and echotexture. No e/o calculus or hydronephrosis seen.

URINARY BLADDER: It is well distended. The UB wall is normal. No calculi seen.

UTERUS: It is anteverted and measures 10x4.5x5.7cm with ET= 10mm. It is normal in size, outline and echotexture. No mass lesion. **Two small well defined hypoechoic lesions are noted in intramural location of anterior wall of uterus largest measuring ~1.4x0.8 cm ,**

Rt. OVARY: It measures 2.8x1.2cm. It is normal. No mass lesion seen.

Lt. OVARY: It measures 2.7x1.7 cm. It is normal. No mass lesion seen.

OTHERS: No e/o free fluid in the abdomen. No e/o lymphadenopathy. No e/o gut wall thickening. No mass lesion seen in the abdomen.

IMPRESSION:

Two small intramural uterine fibroids

Handwritten Signature
Dr. Karthik H V MDRD , DNB
Consultant Radiologist.

Apollo Health and Lifestyle Limited

(CIN: U85110TG2000PLC115819)
Regd Office: 110-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient's Name : Mrs. Haritha Varma	Age & sex : 35Yrs /Female
Date : 26.10.2024	UHID No :57756

2D ECHOCARDIOGRAPHY STUDY

Impression:

- Normal chamber volumes
- Normal left ventricular function. EF 60%
- No regional wall motion abnormality
- Normal valves
- No clots. No pericardial effusion

Findings

Left Ventricle:	Normal
Right Ventricle	Normal
Left Atrium	Normal
Right Atrium	Normal
Aorta	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Valves	Normal
Pericardium	Normal
Doppler	Normal


Dr. C.B. KESHAVAMURTHY MD, DM, DNB
CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

(CIN U85110TG2000PLC115819)
Regd Office: 1-10-60-62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph. No: (040) 4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient's Name : Mrs. Haritha Varma	Age & sex : 35Yrs /Female
Date : 26.10.2024	UHID No :57756

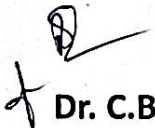
Measurements

AO : 2.25 cm
 LA : 2.69 cm

 RV : 1.60 cm
 LVIDd : 3.64 cm
 LVIDs : 2.50 cm
 IVSd : 1.17 cm
 IVSs : 1.25 cm
 PWd : 1.06 cm
 PWs : 1.28 cm
 EF : 60.0 %
 FS : 31.0 %

Doppler

MV	TV	AV	PV
E: 0.85 m/s	E 0.56 m/s	V max 1.10 m/s	V max 1.04 m/s
A: 0.67 m/s	A 0.44 m/s		
MR Nil	TR Nil	AR Nil	PR Nil


Dr. C.B. KESHAVAMURTHY MD, DM, DNB
CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

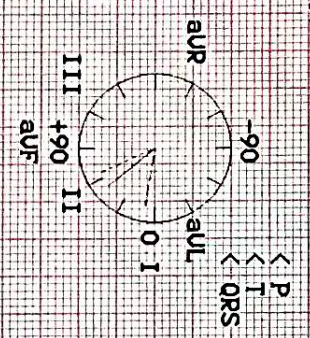
ICIN UBS110TG2000PLC115819)
 Regd Office 1 10-60 62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016
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 Koramangala | Sarjapur Road | Mysore (VV Mohalla)
 Online appointments. www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

AGE: 35
 Measurement Results:
 QRS : 82 ms
 QT/QTcB : 346 / 430 ms
 PR : 116 ms
 P : 86 ms
 RR/PP : 648 / 645 ms
 P/QRS/T : 65 / 50 / 10 degrees
 QTd/QTcBD : 60 / 75 ms
 Sokolow : 1.7 mV
 NK : 13



NO: Interpretation:

Apollo Clinic
 # 23, 1st Floor,
 Kalladasa Road, Mysore - 02
 Ph : 0821-4006040/41

Unconfirmed report.

