



...Your wellness partner

Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

Email: wellness@mediwheel.in, Website: www.mediwheel.in

Tel: +91-11-41195959, Fax: +91-11-29523020

CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Anupa B S** aged **23yr**. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: Bangalore

Date: 11/03/2025

Dr. Nitesh Kumar
M. B. B. S.
BCMR 47093

Name & Signature of

Medical officer

FITNESS CERTIFICATE

NAME: ANUPA	AGE: 23 yrs	
Ht: 162.5 CMS	Wt: 44 KGS	SEX: female

PARAMETERS	MEASUREMENTS
PULSE / BP (supine)	76/m /mt / /mmHg BP 118/80
INSPIRATION	78cm
EXPIRATION	73cms
CHEST CIRCUMFERENCE	Chest expansion 5cms
PREVIOUS ILLNESS	NIL
VISION	Normal vision normal
FAMILY HISTORY	FATHER: - Healthy MOTHER: Healthy

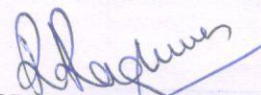
REPORTS: Routine urine & Blood test reports are normal

Blood Sugars are normal

Xray chest & E.C.G are normal

Fit for Employment

DATE: 11/3/2025
 PLACE: Bangalore.


 CONSULTANT PHYSICIAN
Dr. Raghunandan. R.
 M.D. (GEN. Med)
 Consultant Physician
 KMC No: 20226

MEDICAL FITNESS REPORT

I hereby certified that I have physically examined

Mr./Mrs./Dr. ANUPA B. S

On date 11-3-2025 is medically Fit / Unfit to carry on the work.

The Annexed medical reports, Physical & Systemic examination of the employee were taken in to consideration for his/her current status of Health.

Doctor's notes (Overview of the Medical Report's)

- Routine urine and Blood test reports are normal
- Blood Sugars are normal
- E.C.G & chest X-ray are normal

Fit for Employment.

[Signature]
11/3/2025

Doctor's Signature & Seal Stamp
Dr. Raghunandan R.
M.D. (GEN. Med)
Consultant Physician
KMC No: 20226

ID: 2409045
 MS ANUPA B S
 Female 23Years
 T ID : ARCOFEMI HEALTH CARE

11-03-2025 08:52:06 AM
 HR : 72 bpm
 P : 102 ms
 PR : 114 ms
 QRS : 80 ms
 QT/QTcBz : 392/429 ms
 P/QRS/T : 35/90/64 °
 KV5/SV1 : 0.979/0.630 mV



Diagnosis Information:

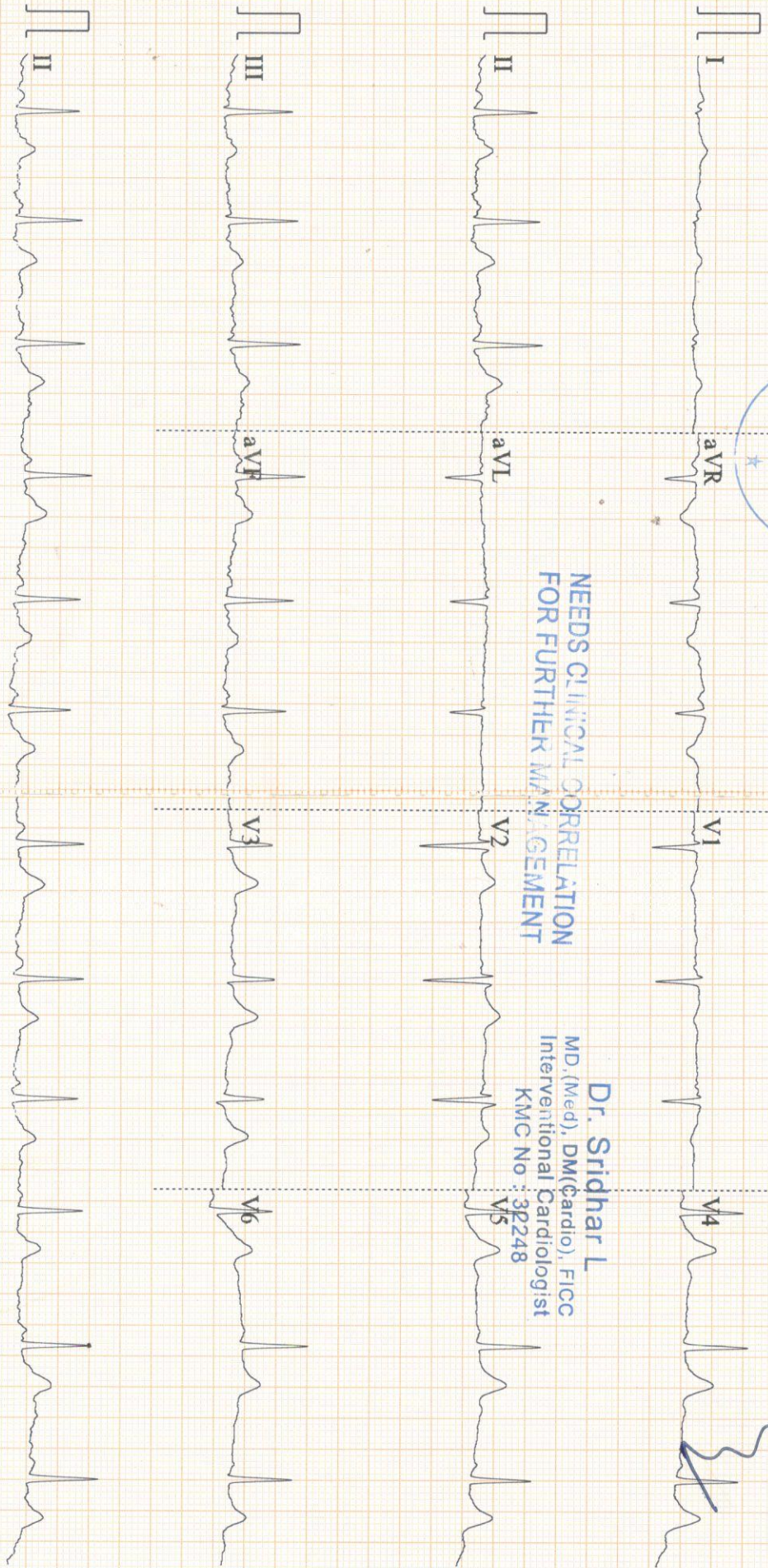
Mr. 22/11
MR

Technician : SATHYA
 Report Confirmed by:

AV + 70°
Normal ECG

NEEDS CLINICAL CORRELATION
 FOR FURTHER MANAGEMENT

Dr. Sridhar L
 MD.(Med), DM(Cardio), FICG
 Interventional Cardiologist
 KMC No : 3P248





Name	: MS.ANUPA B S	TID/SID	: UMR2611215/ 29185897
Age / Gender	: 23 Years / Female	Registered on	: 11-Mar-2025 / 08:18 AM
Ref.By	: -	Collected on	: 11-Mar-2025 / 08:37 AM
Req.No	: BIL5409643	Reported on	: 11-Mar-2025 / 10:45 AM
		Reference	: Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE)

Investigation	Observed Value	Biological Reference Intervals
Physical Examination		
Colour Method:Physical	Pale Yellow	Straw to Yellow
Appearance Method:Physical	Clear	Clear
Chemical Examination		
Reaction and pH Method:pH- Methyl red & Bromothymol blue	5.0	4.6-8.0
Specific gravity Method:Bromothymol Blue	1.015	1.003-1.035
Protein Method:Tetrabromophenol blue	Negative	Negative
Glucose Method:Glucose oxidase/Peroxidase	Negative	Negative
Blood Method:Peroxidase	Negative	Negative
Ketones Method:Sodium Nitroprusside Method	Negative	Negative
Bilirubin Method:Dichloroanilinediazonium	Negative	Negative
Leucocytes Method:3 hydroxy5 phenylpyrrole + diazonium	Negative	Negative
Nitrites Method:Diazonium + 1,2,3,4 tetrahydrobenzo (h) quinolin 3-ol	Negative	Negative
Urobilinogen Method:Dimethyl aminobenzaldehyde	0.2	0.2-1.0 mg/dl
Microscopic Examination		
Pus cells (leukocytes) Method:Microscopy	0-1	2 - 3 /hpf
Epithelial cells Method:Microscopy	2-3	2 - 5 /hpf
RBC (erythrocytes) Method:Microscopy	Absent	Absent
Casts Method:Microscopy	Absent	Occasional hyaline casts may be seen



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TEST REPORT

Crystals	Absent	Phosphate, oxalate, or urate crystals may be seen
Method:Microscopy		
Others	Nil	Nil
Method:Microscopy		

Method: Semi Quantitative test ,For CUE

Reference: Godkar Clinical Diagnosis and Management by Laboratory Methods, First South Asia edition. Product kit literature.

Interpretation:

The complete urinalysis provides a number of measurements which look for abnormalities in the urine. Abnormal results from this test can be indicative of a number of conditions including kidney disease, urinary tract infection or elevated levels of substances which the body is trying to remove through the urine . A urinalysis test can help identify potential health problems even when a person is asymptomatic. All the abnormal results are to be correlated clinically.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Kavya SN

Dr.Kavya S N
Consultant Pathologist
KMC NO : 84851





Name : **MS.ANUPA B S** TID/SID : UMR2611215/ 29185896
Age / Gender : 23 Years / Female Registered on : 11-Mar-2025 / 08:18 AM
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Req.No : BIL5409643 Reported on : 11-Mar-2025 / 11:06 AM
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TEST REPORT

DEPARTMENT OF HEMATOPATHOLOGY

Blood Grouping ABO And Rh Typing

Parameter	Results
Blood Grouping (ABO)	B
Rh Typing (D)	POSITIVE

Method: Hemagglutination Tube Method by Forward & Reverse Grouping

Reference: Kit literature

Interpretation: The ABO grouping and Rh typing test determines blood type grouping (A,B, AB, O) and the Rh factor (positive or negative). A person's blood type is based on the presence or absence of certain antigens on the surface of their red blood cells and certain antibodies in the plasma. A,B,H antigens are not fully developed at birth, increase gradually in strength and become fully expressed around 1 year of age. It is mandatory to repeat blood grouping at/after one year of age for new born babies &/or done on cord blood

Note: All individuals carry other blood group system antigens in addition to ABO and Rh. Antibody screening is recommended to all individuals before blood transfusion to detect any unexpected antibodies.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Kavya SN

Dr.Kavya S N
Consultant Pathologist
KMC NO : 84851





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TEST REPORT

DEPARTMENT OF HEMATOPATHOLOGY

Erythrocyte Sedimentation Rate (ESR)

Investigation	Observed Value	Biological Reference Intervals
ESR 1st Hour Method:Modified Westergren	4	<=20 mm/hour

Complete Blood Count (CBC)

Investigation	Observed Value	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	11.0	11.5-16.0 g/dL
Packed Cell Volume Method:Derived from Impedance	33.3	34-48 %
Red Blood Cell Count. Method:Impedance Variation	4.29	4.2-5.4 Mill/Cumm
Mean Corpuscular Volume Method:Derived from Impedance	77.5	78-100 fL
Mean Corpuscular Hemoglobin Method:Derived from Impedance	25.7	27-32 pg
Mean Corpuscular Hemoglobin Concentration Method:Derived from Impedance	33.2	31.5-36 g/dL
Red Cell Distribution Width - CV Method:Derived from Impedance	15.9	11.5-16.0 %
Red Cell Distribution Width - SD Method:Derived from Impedance	41.6	39-46 fL
Total WBC Count. Method:Impedance Variation	5350	4000-11000 cells/cumm
Neutrophils Method:Impedance Variation, Flowcytometry	50.9	40-75 %
Lymphocytes Method:Microscopy	37.3	20-45 %
Eosinophils Method:Impedance Variation,Method_Desc= Flow Cytometry	1.5	01-06 %
Monocytes Method:Impedance Variation, Flowcytometry	10.0	01-10 %
Basophils. Method:Impedance Variation,Method_Desc= Flow Cytometry	0.3	00-02 %



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TEST REPORT

Absolute Neutrophils Count.	2723	1500-6600 cells/cumm
Method:Calculated		
Absolute Lymphocyte Count	1996	1500-3500 cells/cumm
Method:Calculated		
Absolute Eosinophils count.	80	40-440 cells/cumm
Method:Calculated		
Absolute Monocytes Count.	535	<1000 cells/cumm
Method:Calculated		
Absolute Basophils count.	16	<200 cells/cumm
Method:Calculated		
Platelet Count.	2.58	1.4-4.4 lakhs/cumm
Method:Impedance Variation		
Mean Platelet Volume.	7.5	8.0-13.3 fL
Method:Derived from Impedance		
Plateletcrit.	0.19	0.18-0.28 %
Method:Derived from Impedance		

Method: Automated Hematology Analyzer, Microscopy

Reference: Dacie and Lewis Practical Hematology, 12th Edition

Interpretation: A Complete Blood Picture (CBP) is a screening test which can aid in the diagnosis of a variety of conditions and diseases such as anemia, leukemia, bleeding disorders and infections. This test is also useful in monitoring a person's reaction to treatment when a condition which affects blood cells has been diagnosed. All the abnormal results are to be correlated clinically.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Kavya SN

Dr.Kavya S N
Consultant Pathologist
KMC NO : 84851





Name : **MS.ANUPA B S** TID/SID : UMR2611215/
Age / Gender : 23 Years / Female Registered on : 11-Mar-2025 / 08:18 AM
Ref.By : - Collected on :
Req.No : BIL5409643 Reported on : 11-Mar-2025 / 12:11 PM
Reference : Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CARDIOLOGY

Physical Examination (BP, HT, WT, BMI)

Investigation	Observed Value
BP	118/80
Weight	44 Kg
Height	162.5 cm
BMI	16.66
Pulse	76

#46,27th Cross, 3rd Main Road, Jayanagar, 7th Block, Bengaluru08049364444, 98863 48863 GST:29AAICT7175N1ZE

--- End Of Report ---

Doctor





Name	: MS.ANUPA B S	TID/SID	: UMR2611215/ 29185899
Age / Gender	: 23 Years / Female	Registered on	: 11-Mar-2025 / 08:18 AM
Ref.By	: -	Collected on	: 11-Mar-2025 / 08:37 AM
Req.No	: BIL5409643	Reported on	: 11-Mar-2025 / 10:20 AM
		Reference	: Arcofemi Health Care Ltd -

TEST REPORT

DEPARTMENT OF CLINICAL CHEMISTRY I

Alanine Aminotransferase (ALT/SGPT)

Investigation	Observed Value	Biological Reference Interval
Alanine Aminotransferase ,(ALT/SGPT)	12	<=33 U/L

Method: IFCC without pyridoxal phosphate activation

Interpretation: This test measures levels of Alanine Aminotransferase (ALT) in the blood. ALT is an enzyme found in the cells of the liver. Increased levels of ALT are typically produced when the liver is damaged. ALT testing is often done to monitor treatment for liver disease or when a person is experiencing symptoms of liver disorders.

Reference: Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics.

Bilirubin Total , Serum

Investigation	Observed Value	Biological Reference Interval
Total Bilirubin.	0.61	Neonates: <=15.0 mg/dL Adults: <=1.2 mg/dL

Method:Spectrophotometry, Diazo method

Interpretation: This test measures total Bilirubin levels in the blood. Bilirubin is a waste product from the breakdown of old red blood cells which is processed by the liver for removal from the body. Abnormally high bilirubin levels are often indicative of liver disease. High bilirubin levels can be caused by a number of conditions including hepatitis, cirrhosis, alcoholism, cholangitis, infectious mononucleosis, anorexia and anemia. Due to the variety of conditions which can affect bilirubin levels, results often need to be interpreted along with additional tests.

Blood Urea Nitrogen (BUN)

Investigation	Observed Value	Biological Reference Interval
Blood Urea Nitrogen.	9.1	6-20 mg/dL

Method:Kinetic, Urease - GLDH, Calculated

Interpretation: Urea is a waste product formed in the liver when protein is metabolized. Urea is released by the liver into the blood and is carried to the kidneys, where it is filtered out of the blood and released into the urine. Since this is a continuous process, there is usually a small but stable amount of urea nitrogen in the blood. However, when the kidneys cannot filter wastes out of the blood due to disease or damage, then the level of urea in the blood will rise. The blood urea nitrogen (BUN) evaluates kidney function in a wide range of circumstances, to diagnose kidney disease, and to monitor people with acute or chronic kidney dysfunction or failure. It also may be used to evaluate a person's general health status as well.

Reference: Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics

Creatinine, Serum

Investigation	Observed Value	Biological Reference Interval
Creatinine.	0.57	0.5-1.1 mg/dL

Method:Spectrophotometry, Jaffe - IDMS Traceable



Name	: MS.ANUPA B S	TID/SID	: UMR2611215/ 29185898P
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TEST REPORT

Interpretation:

Creatinine is a nitrogenous waste product produced by muscles from creatine. Creatinine is majorly filtered from the blood by the kidneys and released into the urine, so serum creatinine levels are usually a good indicator of kidney function. Serum creatinine is more specific and more sensitive indicator of renal function as compared to BUN because it is produced from muscle at a constant rate and its level in blood is not affected by protein catabolism or other exogenous products. It is also not reabsorbed and very little is secreted by tubules making it a reliable marker. Serum creatinine levels are increased in pre renal, renal and post renal azotemia, active acromegaly and gigantism. Decreased serum creatinine levels are seen in pregnancy and increasing age.

Biological reference interval changed; Reference: Tietz Textbook of Clinical Chemistry & Molecular Diagnostics, Fifth Edition.

Glucose Fasting (FBS)

Investigation	Observed Value	Biological Reference Interval
Glucose Fasting Method:Hexokinase	84	Normal: <100 mg/dL Impaired FG: 100-125 mg/dL Diabetes mellitus: >=126 mg/dL

Interpretation: It measures the Glucose levels in the blood with a prior fasting of 9-12 hours. The test helps screen a symptomatic/ asymptomatic person who is at risk for Diabetes. It is also used for regular monitoring of glucose levels in people with Diabetes.

Reference: American Diabetes Association. Standards of Medical Care in Diabetes-2022

Glucose Post Prandial (PPBS)

Investigation	Observed Value	Biological Reference Interval
Glucose Post Prandial Method:Hexokinase	78	Normal : <140 mg/dL Impaired PG: 140-199 mg/dL Diabetes mellitus: >=200 mg/dL

Note The discordant post prandial blood glucose values levels are observed in some of the conditions related to defective absorption, insufficient dietary intake, endocrine disorders, hypoglycemic drug overdose and reactive hypoglycemia etc.

Interpretation: This test measures the blood sugar levels 2 hours after a normal meal. Abnormally high blood sugars 2 hours after a meal reflect that the body is not producing sufficient insulin which is indicative of Diabetes.

Reference: American Diabetes Association. Standards of Medical Care in Diabetes-2020.

* Sample processed at Regional Reference Laboratory, Tenet Diagnostics, Bangalore

--- End Of Report ---

Debleena Thakur



PLEASE SCAN QR CODE
TO VERIFY THE REPORT ONLINE



Name : **MS.ANUPA B S**
Age / Gender : 23 Years / Female
Ref.By : -
Req.No : BIL5409643

TID/SID : UMR2611215/
Registered on : 11-Mar-2025 / 08:18 AM
Collected on :
Reported on :
Reference : Arcofemi Health Care Ltd -

TEST REPORT

Dr Debleena Thakur
Consultant Pathologist
KMC NO : 89765





PLEASE SCAN QR CODE

Name : Ms . ANUPA B S
Age/Gender : 23 Years/Female
Ref By :
Reg.No : BIL5409643

TID : UMR2611215
Registered On : 11-Mar-2025 08:18 AM
Reported On : 11-Mar-2025 10:53 AM
Reference : Arcofemi Health Care Ltd
- Medi Whe

Clinical details: General checkup

X – RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

IMPRESSION:

No significant abnormality seen.

Radiographer: Rani

Typist: Deepak B K

*** End Of Report ***

Dr Mahesh M S
Consultant Radiologist

TENET DIAGNOSTICS

Customer Name	Mrs. Anupa	Customer ID	5409693
Age & Gender	22/F	Visit Date	11/02/2025

Eye Screening

✓
~~With spectacles~~ / without spectacles (strike out whichever is not applicable)

	Right Eye	Left Eye
Near Vision	105	105
Distance Vision	6/6	6/6
Colour Vision	Normal	Normal

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Observation / Comments: OK

No Refractive Error
 Review after 2 year


Dr. ASMA BEGUM, D.O.M.S.
 KMC Reg. No: 36502
THIRUMALA OPTICAL CENTRE
 # 8, Ground Floor, 4 & 5 Main Road,
 Kothanur Dinne Main Road,
 J.P. Nagar 8th Phase, Bengaluru-560 078

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India

ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrollment No.: 0821/90942/35856

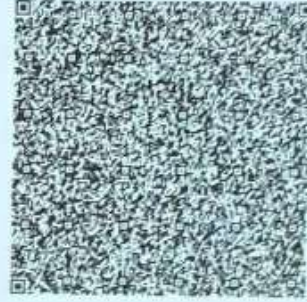
To
ಅನುಪ ಬಿ ಎಸ್
Anupa B S
D/O: Srinivas B N,
Budachikoppa, Asanabalu,
VTC: Begar,
PO: Begar,
Sub District: Sringeri, District: Chickmagalur,
State: Karnataka,
PIN Code: 577120,
Mobile: 9483493674

24/05/2015

27359281



MF273592812FI



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

4932 7932 8553

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



ಭಾರತ ಸರ್ಕಾರ

Government of India



ಅನುಪ ಬಿ ಎಸ್
Anupa B S
ಜನ್ಮ ದಿನಾಂಕ / DOB : 15/03/2001
ಸ್ತ್ರೀ / Female

24/05/2015

QUAD CAMERA

4932 7932 8553

by Anvitha

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು