

Patient Name : Mrs.RANJITHA N
 Age/Gender : 31 Y 9 M 26 D/F
 UHID/MR No : CBAS.0000096067
 Visit ID : CBASOPV111426
 Ref Doctor : Self

Collected : 08/Mar/2025 09:33AM
 Received : 08/Mar/2025 01:46PM
 Reported : 08/Mar/2025 05:11PM
 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	12.0	g/dL	12-15	Spectrophotometer
PCV	35.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	5.25	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	68.3	fL	83-101	Calculated
MCH	22.8	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	24.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,120	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	59.2	%	40-80	Flow cytometry
LYMPHOCYTES	33.3	%	20-40	Flow cytometry
EOSINOPHILS	1.5	%	1-6	Flow cytometry
MONOCYTES	5.4	%	2-10	Flow cytometry
BASOPHILS	0.6	%	0-2	Flow cytometry
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3623.04	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2037.96	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	91.8	Cells/cu.mm	20-500	Calculated
MONOCYTES	330.48	Cells/cu.mm	200-1000	Calculated
BASOPHILS	36.72	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.78		0.78- 3.53	Calculated
PLATELET COUNT	361000	cells/cu.mm	150000-410000	Electrical impedance
MPV	7.6	fL	8.1-13.9	Calculated
ERYTHROCYTE SEDIMENTATION RATE (ESR)	38	mm at the end of 1 hour	0-20	Modified Westegren method

PERIPHERAL SMEAR

RBCs: are normocytic normochromic

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



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



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



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

SIN No: BAS250300909

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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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PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

Kindly correlate clinically.



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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

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	A			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

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.



Dr. Ashwin Mathew
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Patient Name : Mrs.RANJITHA N	Collected : 08/Mar/2025 12:31PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 08/Mar/2025 06:12PM
UHID/MR No : CBAS.0000096067	Reported : 08/Mar/2025 07:06PM
Visit ID : CBASOPV111426	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	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:

- 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.
- 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)	89	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.



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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: BAS250301031

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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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	103	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.

- HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1c values is a better indicator of Glycemic control than a single test.
- 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.
- 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.
- 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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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
SIN No: BAS250300910

Apollo Health and Lifestyle Limited

(CIN - U06110TC2000PHG115849)
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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	202	mg/dL	<200	CHO-POD
TRIGLYCERIDES	93	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	53	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	150	mg/dL	<130	Calculated
LDL CHOLESTEROL	130.9	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.82		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	< 0.01		<0.11	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220



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Apollo Health and Lifestyle Limited

(CIN - U061107C2000PH6115819)
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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	0.45	mg/dL	0-1.2	Colorimetric
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.37	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	16	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	91.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.56	g/dL	6.6-8.3	Biuret
ALBUMIN	4.38	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.18	g/dL	2.0-3.5	Calculated
A/G RATIO	1.38		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:

- 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'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.
- 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.
- Synthetic function impairment: *Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.
- Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.



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Consultant Biochemistry



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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	0.69	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
eGFR - ESTIMATED GLOMERULAR FILTRATION RATE	115.31	mL/min/1.73m ²	>60	CKD-EPI FORMULA
UREA	13.60	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	6.4	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.56	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.10	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.83	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	104	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.56	g/dL	6.6-8.3	Biuret
ALBUMIN	4.38	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.18	g/dL	2.0-3.5	Calculated
A/G RATIO	1.38		0.9-2.0	Calculated



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Consultant Biochemistry



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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	13.00	U/L	<38	IFCC



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Patient Name : Mrs.RANJITHA N	Collected : 08/Mar/2025 09:33AM
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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)	1.86	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	10.04	µg/dL	5.48-14.28	
THYROID STIMULATING HORMONE (TSH)	1.764	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 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
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. Govinda Raju N L
MSc, PhD (Biochemistry)
Consultant Biochemistry



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SIN No: BAS250300911

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Address: 32/100/125, Doddabangla Village, Neeladri Main Road, Neeladri Nagar, Electronic city, Bengaluru, Karnataka - 560034



Patient Name : Mrs.RANJITHA N	Collected : 08/Mar/2025 09:33AM
Age/Gender : 31 Y 9 M 26 D/F	Received : 08/Mar/2025 03:04PM
UHID/MR No : CBAS.0000096067	Reported : 08/Mar/2025 03:14PM
Visit ID : CBASOPV111426	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED


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	1.005		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	0	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0	/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. Rajalakshmi D
 M.B.B.S,M.D
 Consultant Pathologist



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



Patient Name	: Mrs.RANJITHA N	Collected	: 08/Mar/2025 09:33AM
Age/Gender	: 31 Y 9 M 26 D/F	Received	: 08/Mar/2025 03:04PM
UHID/MR No	: CBAS.0000096067	Reported	: 08/Mar/2025 03:14PM
Visit ID	: CBASOPV111426	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

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


Dr. Rajalakshmi D
M.B.B.S, M.D
Consultant Pathologist


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



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

Address:
 Apollo Health and Lifestyle Laboratory, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034




Patient Name : Mrs.RANJITHA N	Collected : 08/Mar/2025 09:33AM
Age/Gender : 31 Y 9 M 26 D/F	Received : 08/Mar/2025 03:04PM
UHID/MR No : CBAS.0000096067	Reported : 08/Mar/2025 04:43PM
Visit ID : CBASOPV111426	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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. Rajalakshmi D
 M.B.B.S, M.D
 Consultant Pathologist


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



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

SIN No: BAS250300905

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

Address:
 Apollo Health and Lifestyle Limited, 10th Floor, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034



Patient Name : Mrs.RANJITHA N	Collected : 08/Mar/2025 01:16PM
Age/Gender : 31 Y 9 M 26 D/F	Received : 09/Mar/2025 05:18PM
UHID/MR No : CBAS.0000096067	Reported : 11/Mar/2025 07:00PM
Visit ID : CBASOPV111426	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

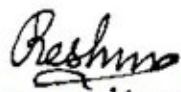
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

LBC PAP SMEAR , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	GRL0001-CY3508/25
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 and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	FUNGAL ELEMENTS MORPHOLOGICALLY CONSISTENT WITH CANDIDA
IV	INTERPRETATION	CANDIDIASIS

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 ***



Dr. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist

Page 14 of 14
CAP
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Apollo Health and Lifestyle Limited

Apollo Health and Lifestyle Limited, Global Reference Laboratory Hyderabad

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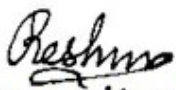
APOLLO CLINICS NETWORK
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Patient Name : Mrs.RANJITHA N
Age/Gender : 31 Y 9 M 26 D/F
UHID/MR No : CBAS.0000096067
Visit ID : CBASOPV111426
Ref Doctor : Self

Collected : 08/Mar/2025 01:16PM
Received : 09/Mar/2025 05:18PM
Reported : 11/Mar/2025 07:00PM
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. Reshma Stanly
M.B.B.S, DNB(Pathology)
Consultant Pathologist



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SIN No: BAS250301049

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

Address:
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Neeladri Nagar, Electronic city, Bengaluru,
Karnataka- 560034

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Patient Name	: Mrs. RANJITHA N	Age	: 31Yrs 9Mths 23Days
UHID	: CBAS.0000096067	OP Visit No.	: CBASOPV111426
Printed On	: 08-03-2025 01:51 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: --		

DEPARTMENT OF RADIOLOGY

ULTRASOUND-WHOLE ABDOMEN

Liver: appears normal in size (14.7 cm) and **increased** in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echo-pattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Right kidney appear normal in size 9.7x1.3 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

Left kidney appear normal in size 9.1x1.2 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size with anteverted position and measuring 7.5x3.1x4.0 cm. **Posterior wall intramural seedling fibroid measuring 1.6x1.4 cm.** Endometrial echo-complex appears normal and measures 0.9 cm.

Both ovaries appear normal in size, shape and echotexture.

Right ovary measuring 3.4x2.3 cm and left ovary measuring 3.0x2.3 cm.

No evidence of any adnexal pathology noted.

- No thickened or tender bowel loops. No mass lesion. No ascites / pleural effusion.

Moderate gaseous distension of visualized bowel loops.

IMPRESSION:-

GRADE I FATTY LIVER.

SEEDLING FIBROID UTERUS..

Suggested clinical correlation.

The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.

---End Of The Report---



Dr. V K PRANAV VENKATESH

MBBS,MD

103609

Radiology

Patient	Mrs. RANJITHA N	Appt ID	CBASAPT4539
Age/Gender	31Y Female	Consult Date	10 Mar 2025
UHID	CBAS.0000096067	Order Bill ID	CBAS-OCR-67492
		Visit Display ID	CBASOPV111426

VITALS

Weight : 60Kgs	Height : 155Cms
Pulse : 87 BPM	Spo2 : 99%
BP : 96 / 63 MmHg	Respiratory Rate : 15 BPM
Temperature : 98.6 °F	

Patient Name	: Mrs. RANJITHA N	Age	: 31Yrs 9Mths 23Days
UHID	: CBAS.0000096067	OP Visit No.	: CBASOPV111426
Printed On	: 08-03-2025 05:30 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: --		

DEPARTMENT OF CARDIOLOGY

ECG

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is Normal
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:-

NORMAL RESTING ECG.

NOTE:-KINDLY TAKE A PHOTOCOPY OF THE GRAPH FOR FUTURE REFERENCE IF NEEDED

---End Of The Report---



Dr. Vishal Kumar H
MBBS, DIP. Cardiology
KMC 121069
Cardiology

Patient Name : Mrs. RANJITHA N Age : 31Yrs 9Mths 23Days
UHID : CBAS.0000096067 OP Visit No. : CBASOPV111426
Printed On : 08-03-2025 05:30 PM Advised/Pres Doctor : --
Department : Cardiology Qualification : --
Referred By : Self Registration No. : --
Employer Id : --

DEPARTMENT OF CARDIOLOGY

2D Echo cardiography

Chambers

Left Ventricle: Normal, No RWMA'S,

Left Atrium: Normal

Right Ventricle: Normal

Right Atrium: Normal

Septa

IVS: Intact

IAS: Intact

Valves

Mitral Valve: Normal

Tricuspid Valve: Normal

Aortic Valve: Tricuspid, Normal Mobility

Pulmonary Valve: Normal

Great Vessels

Aorta: Normal

Pulmonary Artery: Normal

Pericardium: Normal

Doppler echocardiography

Mitral Valve E 0.95 m/sec A 0.53 m/sec No MR

Tricuspid Valve E 0.42 m/sec A 0.28 m/sec No TR

Aortic Valve Vmax 1.18 m/sec No AR

Pulmonary Valve Vmax 0.81 m/sec No PR

Diastolic Dysfunction



M-Mode Measurements

Parameter	Observed Value	Normal Range	
Aorta	2.4	2.6-3.6	cm
left Atrium	3.1	2.7-3.8	cm
Aortic Cusp Separation	1.4	1.4-1.7	cm
IVS - Diastole	0.8	0.9-1.1	cm
left Ventricle-Diastole	4.0	4.2-5.9	cm
Posterior wall-Diastole	1.0	0.9-1.1	cm
IVS-Systole	1.2	1.3-1.5	cm
left Ventricle-Systole	2.4	2.1-4.0	cm
Posterior wall-Systole	1.0	1.3-1.5	cm
Ejection Fraction	60	≥ 50	%
Fractional shortening	30	≥ 20	%
Right Ventricle	2.1	2.0-3.3	cm

Impression -

Normal Sized Cardiac Chambers

No RWMA,S

Normal LV and RV Systolic Function, LVEF 60%

Normal valves

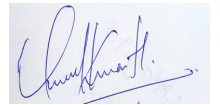
No Pericardial Effusion/Vegetation/Clot

DR. VISHAL KUMAR H.

MBBS DIP(CARDIOLOGY)

KMC 1069

---End Of The Report---



Dr. Vishal Kumar H
MBBS, DIP. Cardiology
KMC 121069
Cardiology

Patient Name	: Mrs. RANJITHA N	Age	: 31Yrs 9Mths 23Days
UHID	: CBAS.0000096067	OP Visit No.	: CBASOPV111426
Printed On	: 08-03-2025 01:49 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: --		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

IMPRESSION:

NO OBVIOUS ABNORMALITY DETECTED.

---End Of The Report---



Dr. V K PRNAV VENKATESH
MBBS,MD
103609
Radiology

Name : Mrs. RANJITHAN

Age : 31Y 9M 26D

UHID : CBAS.000096067

Address : Bagur Chitradurga Karnataka INDIA 577515

sex : Female



CBAS.000096067

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CBASOPV111426

Bill No: CBAS-OCR-67492

Date: Mar 8th, 2025, 9:13 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	GYNACOLOGY CONSULTATION ✓	Consultation	<input type="checkbox"/>
7	DIET CONSULTATION	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	2D ECHO	Cardiology	<input type="checkbox"/>
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
13	X-RAY CHEST PA	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	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	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	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
24	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
25	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>

HT 155cm

wt 60kg

B.P 96/63

PR 87

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)
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| Mehereshtira) | Pune (Aundh | Nigdi Pradikaran) | Viman Nagar | West Bengal: Kolkata (Ballygunge) | Uttar Pradesh: Ghaziabad (Indrapuram)

GSTIN: 29AADCA0733E1Z3

Address:
99, Guili Temple Rd, next to Ramakrishna mutt,
Mahantara Lay Out, Basavanagudi, Bengaluru,
Karnataka 560019

1860 530 7788

ECHOCARDIOGRAPHY REPORT

Name: MISS RANJITHA Age: 32 YEARS ID;65656 GENDER: FEMALE

Consultant: Dr. VISHAL KUMAR H. Date : 08 / 03 /2025

Findings

2D Echo cardiography

Chambers

- Left Ventricle: Normal, No RWMA'S,
- Left Atrium: Normal
- Right Ventricle: Normal
- Right Atrium: Normal

Septa

- IVS: Intact
- IAS: Intact

Valves

- Mitral Valve: Normal
- Tricuspid Valve: Normal
- Aortic Valve: Tricuspid, Normal Mobility
- Pulmonary Valve: Normal

Great Vessels

- Aorta: Normal
- Pulmonary Artery: Normal

Pericardium: Normal

Doppler echocardiography

Mitral Valve	E	0.95	m/sec	A	0.53	m/sec	No MR
Tricuspid Valve	E	0.42	m/sec	A	0.28	m/sec	No TR
Aortic Valve	Vmax	1.18	m/sec				No AR
Pulmonary Valve	Vmax	0.81	m/sec				No PR
Diastolic Dysfunction							

M-Mode Measurements

Parameter	Observed Value	Normal Range	
Aorta	2.4	2.6-3.6	cm
left Atrium	3.1	2.7-3.8	cm
Aortic Cusp Separation	1.4	1.4-1.7	cm
IVS - Diastole	0.8	0.9-1.1	cm
left Ventricle-Diastole	4.0	4.2-5.9	cm
Posterior wall-Diastole	1.0	0.9-1.1	cm
IVS-Systole	1.2	1.3-1.5	cm
left Ventricle-Systole	2.4	2.1-4.0	cm
Posterior wall-Systole	1.0	1.3-1.5	cm
Ejection Fraction	60	≥ 50	%
Fractional shortening	30	≥ 20	%
Right Ventricle	2.1	2.0-3.3	cm

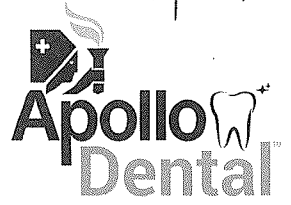
Impression -

- Normal Sized Cardiac Chambers
- No RWMA,S
- Normal LV and RV Systolic Function, LVEF 60%
- Normal valves
- No Pericardial Effusion/Vegetation/Clot
-



DR. VISHAL KUMAR H.
MBBS DIP(CARDIOLOGY)
KMC 1069

08/03/2025



Mrs. Ranjitha

3arys/F

C/C : Regular check up

M/H : ~~xxx~~ H/O thyroid & on medication since 13 years.

O/E : ca⁺ stains⁺

Rx Plan : Oral Periotherapy


Dr. Shri L. M.

080-26616555

Date : 8/3/25
 MR No :
 Name : Mrs. RANJITHA
 Age/Gender :
 Mobile no : 32y

Department : NUTRITION & DIETETICS
 Consultant : DT, ROHINI RAGHU
 Reg No :
 Qualification : M.Sc, RD (food & nutrition)
 Consulting Timings :
 Phone No.; 080-26611236/8/9

Postnatal - 3yrs
 Regular milk → 30-45 ml
 * Yoga - 60 min.
 * after church 20 min
 * Eggs - 1-2/dy.
 Almonds, peanuts, eggs,
 milk,
 * water → 3-3.5 lit/dy

HT → 155 cm
 WT → 60 kg
 IB → 55 - 60 kg
 96/63 mmHg

I.V. treatment
 Hormonal ↓
 injections.
 A.I. treatment
 advised

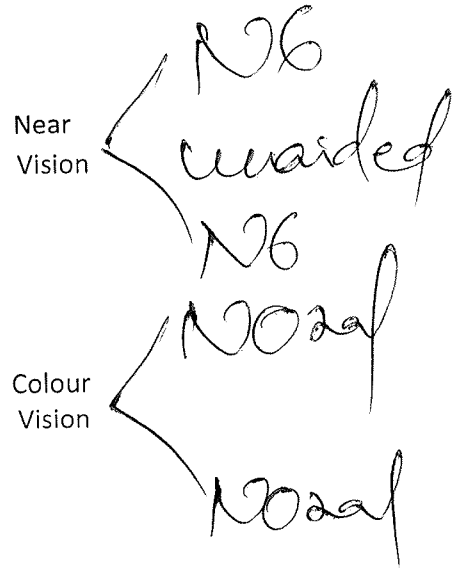
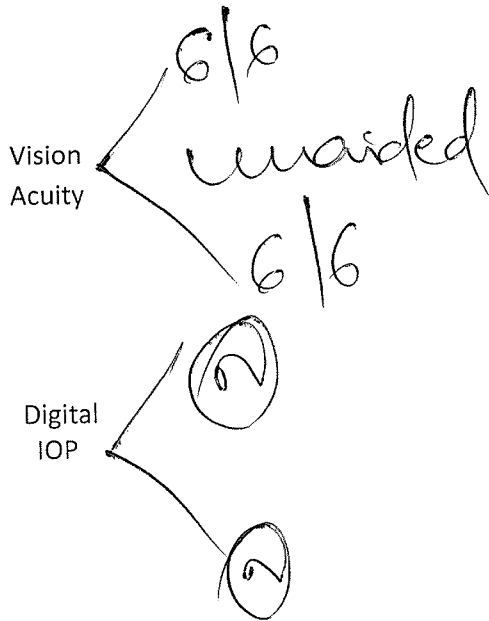
Dt. ROHINI RAGHU Msc., RD
 Consultant Clinical Dietitian
 RRD : 029/2013

9449349333

Mrs. Ranjitha -v-

31/P 96062 8/3/25

EYE CHECK UP REPORT



• Fundus: Normal @ study

• Ant. Segment :- WNL

• Media: Normal

• Pupil: N/A

Authorized by
Yogesh

Dr. Yogesh Kothari
MD, DNB, FESC, FEP
Reg No- KMC 44065

Date: IST: 2025-03-08 12:27:37

Personal Details
UHID: 01P3FGAT73JOYLF
PatientID: 78999
Name: RANJITHA
Age: 31
Gender: Female
Mobile: 2442422277

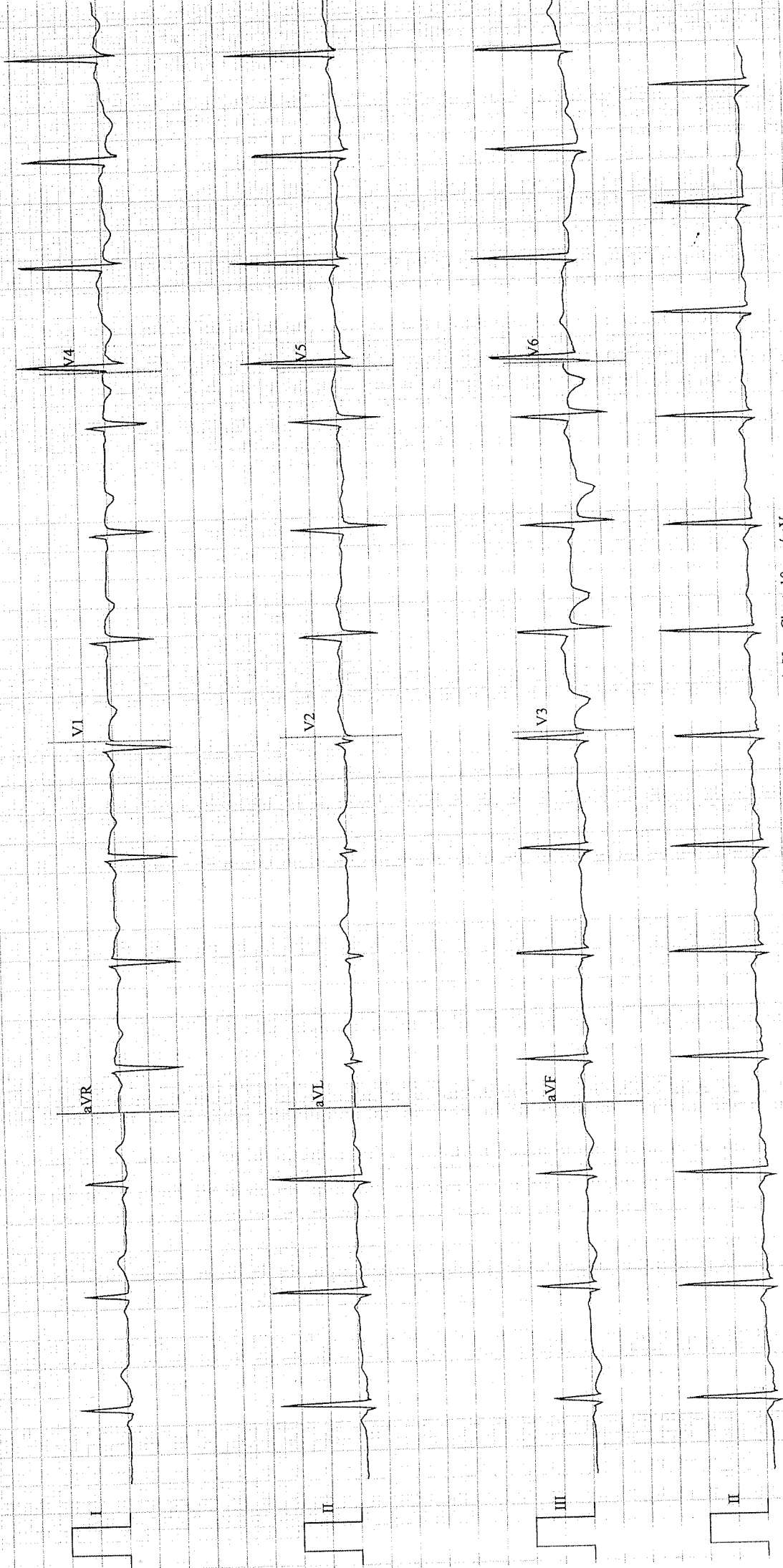
Vitals

Measurements
HR: 79 BPM
PR: 133 ms
PD: 115 ms
QRSD: 93 ms
QRS Axis: 53 deg
QT/QTc: 360/413 ms

Interpretation

Normal sinus rhythm
Normal axis
Nonspecific T waves noted

This trace is generated by **KardiaScreen**; Cloud-Connected, Portable, Digital, 6-12 Lead Scalable ECG Platform from **IMEDEX**



Apollo Clinic

CONSENT FORM

Patient Name: Mrs. Ranjitha Age: 32y/F

UHID Number: _____ Company Name: _____

I Mr/Mrs/Ms _____ Employee of _____

~~(Company) Want to inform you that I am not interested in getting~~

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

ENT &

Fitness by GP

Pending

Skipped

Patient Signature: Ranjitha Date: 8/3/25



भारत सरकार
भारत सरकार

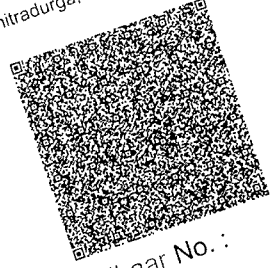


आधार

ಭಾರತ ಸರ್ಕಾರ
Government of India

ಭಾರತೀಯ ವಿಶಿಷ್ಟ ಗುರುತು ಪ್ರಾಧಿಕಾರ
Unique Identification Authority of India
ನೋಂದಣಿ ಸಂಖ್ಯೆ / Enrollment No.: 0658/48486/06423

To
ರಂಜಿತ ಎನ್
Ranjitha N
C/O Sridhara J,
Ilapur,
VTC: Bagur,
Sub District: Hosadurga, District: Chitradurga,
State: Karnataka,
PIN Code: 577515,
Mobile: 9902308764
MF079522791F1



ನಿಮ್ಮ ಆಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :
9453 2724 1734

ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು



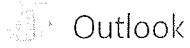
ಭಾರತ ಸರ್ಕಾರ
Government of India



ರಂಜಿತ ಎನ್
Ranjitha N
ಜನ್ಮ ದಿನಾಂಕ / DOB : 13/05/1993
ಪ್ರೀ / Female

9453 2724 1734
ನನ್ನ ಆಧಾರ್, ನನ್ನ ಗುರುತು

13/05/2013



Your appointment is confirmed

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

Date Wed 3/5/2025 3:08 AM

To SRIDHARA J <SRIDHARA.J@bankofbaroda.com>

Cc basavanagudi@apolloclinic.com <basavanagudi@apolloclinic.com>; Irfanali.s@apolloclinic.com <Irfanali.s@apolloclinic.com>; syamsunder.m@apollohl.com <syamsunder.m@apollohl.com>

You don't often get email from noreply@apolloclinics.info. [Learn why this is important](#)

1 ईक लोमन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना
5 MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINK

Dear RANJITHA N ,

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **Apollo Clinic Basavanagudi clinic** on **2025-03-08** at **08:15 - 08:30**.

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.

Outlook

Health Check up Booking Request(22S56228)

From Mediwheel <wellness@mediwheel.in>
Date Wed 3/5/2025 3:08 AM
To SRIDHARA J <SRIDHARA.J@bankofbaroda.com>
Cc customercare@mediwheel.in <customercare@mediwheel.in>

डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें
LINK IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LI

Dear MR. J SRIDHARA,

We have received your booking request for the following health checkup, , please upload your approval letter as soon as possible to enable us to confirm your booking.

Approval Letter:

User Package Name : Mediwheel Full Body Health Checkup Female Below 40
Name of Diagnostic/Hospital : Apollo Clinic - Basavanagudi
Address of Diagnostic/Hospital : Apollo Clinic, # 99, Bull Temple Road , Next to Ramakrishna mutt, Basavanagudi - 560019 , Bangalore, Karnataka - 560019
Appointment Date : 08-03-2025
Preferred Time : 08:15 AM - 08:30 AM

Table with 3 columns: Booked Member Name, Age, Gender. Row 1: RANJITHA N, 31 year, Female

Note - Do not pay any amount to the hospital

Tests included in this Package

- Pap Smear
Liver Profile
Kidney Profile
Lipid Profile
HbA1c
CBC
Urine Sugar PP
Urine Sugar Fasting
Blood Glucose (Post Prandial)