

Patient Name : Mrs.EKTA KUKAR
Age/Gender : 41 Y 0 M 10 D/F
UHID/MR No : RIND.0000019744
Visit ID : RINDOPV25282
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : AADHAR NO 972977754973

Collected : 22/Feb/2025 01:20PM
Received : 22/Feb/2025 01:50PM
Reported : 22/Feb/2025 03:31PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.
PLATELETS ARE ADEQUATE.
NO HEMOPARASITES SEEN



Page 1 of 15



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

SIN No:BED250015055

This test has been performed at Apollo Health and Lifestyle Ltd/Lab

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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



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Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.7	g/dL	12-15	Spectrophotometer
PCV	38.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.19	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	93	fL	83-101	Calculated
MCH	30.2	pg	27-32	Calculated
MCHC	32.6	g/dL	31.5-34.5	Calculated
R.D.W	15.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,800	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	71	%	40-80	Electrical Impedence
LYMPHOCYTES	24	%	20-40	Electrical Impedence
EOSINOPHILS	02	%	1-6	Electrical Impedence
MONOCYTES	03	%	2-10	Electrical Impedence
BASOPHILS	00	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	6248	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2112	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	176	Cells/cu.mm	20-500	Calculated
MONOCYTES	264	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	2.96		0.78- 3.53	Calculated
PLATELET COUNT				
MPV	10.3	fL	8.1-13.9	Calculated
ERYTHROCYTE SEDIMENTATION RATE (ESR)	21	mm at the end of 1 hour	0-20	Modified Westergren

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 Consultant Pathologist



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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	AB			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

Comment:

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



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Patient Name : Mrs.EKTA KUKAR	Collected : 22/Feb/2025 07:15PM
Age/Gender : 41 Y 0 M 10 D/F	Received : 22/Feb/2025 07:42PM
UHID/MR No : RIND.0000019744	Reported : 22/Feb/2025 08:27PM
Visit ID : RINDOPV25282	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AADHAR NO 972977754973	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	90	mg/dL	70-100	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:

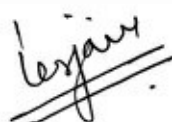
- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	97	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.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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)

Nidhi

Dr Nidhi Sachdev
M.B.B.S,MD(Pathology)
Consultant Pathologist

SIN No:EDT250003375



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Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	213	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	112	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	64	mg/dL	40-60	CHOD
NON-HDL CHOLESTEROL	149	mg/dL	<130	Calculated
LDL CHOLESTEROL	126.81	mg/dL	<100	Calculated
VLDL CHOLESTEROL	22.3	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.32		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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ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.60	mg/dL	0-1.2	NBD
BILIRUBIN CONJUGATED (DIRECT)	0.19	mg/dl	0-0.2	Diazotized sulfanilic acid
BILIRUBIN (INDIRECT)	0.41	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	14.8	U/L	9-52	UV with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.3	U/L	14-36	UV with P-5-P
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.2		<1.15	Calculated
ALKALINE PHOSPHATASE	81.40	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.75	g/dL	6.3-8.2	Biuret
ALBUMIN	4.38	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.37	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		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 elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.
- 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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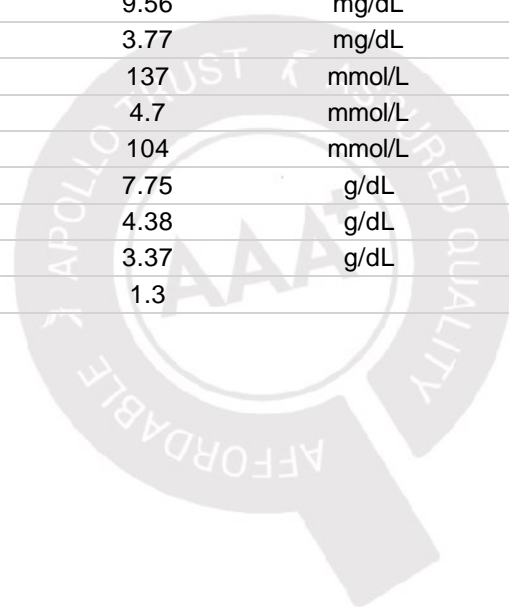
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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.53	mg/dL	0.51-1.04	Enzymatic colorimetric
eGFR - ESTIMATED GLOMERULAR FILTRATION RATE	117.88	mL/min/1.73m ²	>60	CKD-EPI FORMULA
UREA	18.84	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	8.8	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.67	mg/dL	2.6-6	Uricase
CALCIUM	9.56	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.77	mg/dL	2.5-4.5	PMA Phenol
SODIUM	137	mmol/L	135-145	Direct ISE
POTASSIUM	4.7	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE
PROTEIN, TOTAL	7.75	g/dL	6.3-8.2	Biuret
ALBUMIN	4.38	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.37	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		0.9-2.0	Calculated




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Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	16.36	U/L	12-43	GLYCYLGLYCINE NITROANLIDE




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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.24	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	9.11	µg/dL	5.48-14.28	
THYROID STIMULATING HORMONE (TSH)	1.910	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

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Treatment.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
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

Nidhi

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SIN No:SPL25006582



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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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	7.0		5-7.5	Double Indicator
SP. GRAVITY	1.025		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	3-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	Microscopy
RBC	ABSENT	/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.

Page 13 of 15



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



SIN No: UR2433792

This test has been performed at Apollo Health and Lifestyle Ltd/Lab

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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

Patient Name : Mrs.EKTA KUKAR	Collected : 22/Feb/2025 08:55PM
Age/Gender : 41 Y 0 M 10 D/F	Received : 22/Feb/2025 09:31PM
UHID/MR No : RIND.0000019744	Reported : 23/Feb/2025 06:45AM
Visit ID : RINDOPV25282	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : AADHAR NO 972977754973	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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. Kritika Jain
M.B.B.S, M.D (Pathology)
Consultant Pathologist

SIN No: UF012324

This test has been performed at Apollo Health and Lifestyle Ltd/Lab

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

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



Patient Name	: Mrs.EKTA KUKAR	Collected	: 22/Feb/2025 04:06PM
Age/Gender	: 41 Y 0 M 10 D/F	Received	: 22/Feb/2025 09:44PM
UHID/MR No	: RIND.0000019744	Reported	: 24/Feb/2025 12:59PM
Visit ID	: RINDOPV25282	Status	: Final Report
Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: AADHAR NO 972977754973		

DEPARTMENT OF CYTOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

LBC PAP SMEAR , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	L/2564/25
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	Smear shows sheets of superficial, intermediate squamous cells.
III	RESULT	
a	EPITHELIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

*** End Of Report ***

Page 15 of 15



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

SIN No: CS086988



Patient Name : Mrs.EKTA KUKAR
Age/Gender : 41 Y 0 M 10 D/F
UHID/MR No : RIND.0000019744
Visit ID : RINDOPV25282
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : AADHAR NO 972977754973

Collected : 22/Feb/2025 04:06PM
Received : 22/Feb/2025 09:44PM
Reported : 24/Feb/2025 12:59PM
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. Shivangi Chauhan
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: CS086988

Patient Name	: Mrs. EKTA KUKAR	Age/Gender	: 41 Y/F
Patient Name	: Mrs. EKTA KUKAR	Age	: 41 Y F
UHID	: RIND.0000019744	OP Visit No	: RINDOPV25282
Reported on	: 22-02-2025 16:38	Printed on	: 10-03-2025 12:36
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : Liver is enlarged in size (17.3cm) and the parenchymal echotexture shows grade-1 diffuse fatty infiltration. Intra-hepatic biliary radicals are not dilated. Portal vein is normal in course and calibre.

GALL BLADDER : Gall bladder appears echo free with normal wall thickness. No pericholecystic fluid noted. Common duct is not dilated.

PANCREAS : Pancreas is normal in size and echopattern.

SPLEEN : Spleen is normal in size, shape and echopattern. No focal lesion seen. Hilum is normal.

KIDNEYS : Both the kidneys are normal in position, shape, size, outline and echotexture. Cortico-medullary differentiation of both kidneys is maintained. Central sinus echoes are compact.

Visualized parts of the retroperitoneum do not reveal any lymphadenopathy.

URINARY BLADDER : Urinary bladder is normal in wall thickness with clear contents. No obvious focal lesion seen.

UTERUS : The uterus is bulky measuring 8.1 x 6.1 x 4.3 cm. Myometrium shows heterogenous echotexture with partial loss of endometrial myometrial interface. Endometrium is normal in thickness (8.3 mm). 20 x 19 mm sized intramural fibroid seen in fundus of uterus with seedling fibroid seen. Thin strip of fluid seen in endometrial cavity.

OVARIES : Both the ovaries appears normal in size and echopattern. No obvious adnexal mass or collection is seen.

No free fluid seen in cul-de-sac.

IMPRESSION:

- 1. Hepatomegaly with grade 1 Fatty infiltration of the liver.**
- 2. Adenomyotic changes in uterus with intramural & seedling uterine fibroids.**
- 3. Thin strip of fluid in endometrial cavity.**

SUGGEST 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.

Printed on:22-02-2025 16:38

---End of the Report---



Dr. SANGEETA AGGARWAL
MBBS, MD
Radiology



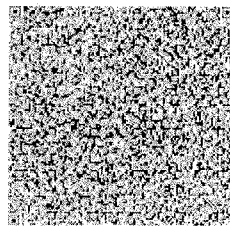
भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नमर्नांकन क्रम/ Enrolment No.: 0000/00128/31722

To
एकता कुकर
Ekta Kukar
C/O Anur Suri,
Flat No 1005,
Tower-11, 10th Floor,
Office City -2,
VTEC Raj Nagar Extension,
PO, Raj Nagar Extension,
District Ghaziabad,
State: Uttar Pradesh,
PIN Code: 201017,
Mobile: 9641566889

Signature File Verifier
Digitally signed by Ekta Kukar
DN: cn=Ekta Kukar, o=UIDAI, ou=Unique Identification Authority of India, email=ekta@uidai.gov.in



आपका आधार क्रमांक / Your Aadhaar No. :

9729 7775 4973

VID : 9160 6403 6695 9475

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Aadhaar no. issued: 12/02/2012



एकता कुकर
Ekta Kukar
जन्म तिथि/DOB: 12/02/1984
पहिला/ FEMALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ ऑनलाइन एक्सेसपुन्ट की स्कैनिंग) के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online authentication or scanning of QR code / offline KMM)

9729 7775 4973

मेरा आधार, मेरी पहचान



Government of India



सूचना / INFORMATION

- आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं। जन्मतिथि आधार नंबर धारक द्वारा प्रस्तुत सूचना और विनियमों में विनिर्दिष्ट जन्मतिथि के प्रमाण के दस्तावेज पर आधारित है।
- इस आधार पत्र को यूआईडीएआई द्वारा नियुक्त प्रमाणीकरण एजेंसी के जरिए ऑनलाइन प्रमाणीकरण के द्वारा सत्यापित किया जाना चाहिए या ऐप स्टोर में उपलब्ध एमआधार या आधार क्यूआर कोड स्कैनर ऐप से क्यूआर कोड न स्कैन करके या www.uidai.gov.in पर उपलब्ध सुरक्षित क्यूआर कोड रीडर का उपयोग करके सत्यापित किया जाना चाहिए।
- आधार विशिष्ट और सुरक्षित है।
- पहचान और पते के समर्थन में दस्तावेजों को आधार के लिए समांजन की तारीख से प्रत्येक 10 वर्ष में कम से कम एक बार अपडेट करना चाहिए।
- अगर विभिन्न सरकारी और गैर-सरकारी फायदे/सेवाओं का लाभ लेने में सहायता करता है।
- आधार में अमरा कौवाइल नंबर और ईमेल आईडी अपडेट रखें।
- अमरा सेवाओं का लाभ लेने के लिए एमआधार ऐप डाउनलोड करें।
- आधार/ऑनोमेट्रिक्स का उपयोग न करने के समय सुरक्षित सुनिश्चित करने के लिए आधार/बीयोमेट्रिक्स लॉक/अनलॉक सुविधा का उपयोग करें।
- आधार की रक्षा करने वाले सहमति लेने के लिए जरूरी है।
- Aadhaar is proof of identity, not of citizenship or date of birth (DOB); ID is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This Aadhaar letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app-stores or using secure QR code reader app available on www.uidai.gov.in.
- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for adult user.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/ID/ID/ID to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.



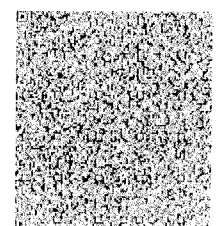
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



Aadhaar no. issued: 12/02/2012

पता:
सी/ओ अनुर सुरी, फ्लैट नं 1005, टावर-11, 10th फ्लोर,
ऑफिस सिटी -2, राज नगर एक्सटेंशन, राज नगर एक्सटेंशन,
गुजरात, 201017

Address:
C/O Anur Suri, Flat No 1005, Tower-11, 10th Floor,
Office City -2, Raj Nagar Extension, PO, Raj Nagar
Extension, DIST: Ghaziabad,
Uttar Pradesh - 201017



9729 7775 4973

VID : 9160 6403 6695 9475

1947 | help@uidai.gov.in | www.uidai.gov.in

Booked Member Name	Age	Gender
EKTA SURI	41 year	Male

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.

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Ekta Kumar on 24/2/25

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 	✓
<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 <u>physicians.</u></p>	
<ul style="list-style-type: none"> • Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> • Unfit 	

Dr. SHAILENDRA KUMAR, (Physician)
M.B.B.S.
Regd. No. DMC-12232
Apollo Cradle and Children's Hospital
NH-1, Shakti Khand-2, Indirapuram,
Ghaziabad, Uttar Pradesh-201014

Dr. 
Medical Officer

This certificate is not meant for medico-legal purposes

Address: NH-1, Shakti Khand 2, Indirapuram, Ghaziabad, Uttar Pradesh – 201014.
Ph No: +91 88106 85179, 1860 500 4424

Apollo Specialty Hospitals Private Limited

(Formerly known as Nova Specialty Hospitals Private Limited) CIN - U85100TG2009PTC099414

Regd Office: #7-1-617/A, 615 & 616, 7th Floor, Imperial Towers, Opp: Ameerpet Metro Station, Ameerpet, Hyderabad - 500038.
Ph No: 040 - 4904 7777, Fax No: 4904 7744 | www.apollocradle.com | Email ID: info.cradle@apollocradle.com

Date : 22-02-2025
MR NO : RIND.0000019744
Name : Mrs. EKTA KUKAR
Age/ Gender : 41 Y / Female

Department : GENERAL
Doctor :
Registration No :
Qualification :

Consultation Timing: 12:13

Height: 154 CM	Weight: 77.6 kg	BMI: 32.7 kg/m ²	Waist Circum:
Temp: (N)	Pulse: 72 b/m	Resp: 20 b/m	B.P: 118/70

General Examination/Allergies
History

Cinical Diagnosis & Management Plan

Follow up date

Doctor Signature

OPHTHAL CHECKUP REPORT

Date Of Examine: 22/2/25

Patient Name: Mrs. EKTA Kulkarni Age: 41/E

UHID ID: 19744

Vision without Correction		Vision with Correction	
Distance	Near	Distance	Near
R Left 6/6	N/10	—	N/6
L 6/6	N/10	—	N/6
Color Vision:	<input checked="" type="checkbox"/> Normal	<input checked="" type="checkbox"/> Abnormal	

BE - plano

Add +1.00 DSDH

Normal

Address: NH-1, Shakti Khand 2, Indirapuram, Ghaziabad, Uttar Pradesh – 201014.

Ph No: +91 88106 85179, 1860 500 4424

Apollo Specialty Hospitals Private Limited

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Regd Office: #7-1-617/A, 615 & 616, 7th Floor, Imperial Towers, Opp: Ameerpet Metro Station, Ameerpet, Hyderabad - 500038.

Ph No: 040 - 4904 7777, Fax No: 4904 7744 | www.apollocradle.com | Email ID: info.cradle@apollocradle.com

Dr. Garima Maan

MBBS, MS, DNB, MRCOG - UK (1)
Consultant - Obstetrics & Gynaecology
Contact no- 9717098469

(Kandav nagar)

Ekta 42 / female



P₁L₄ (UES)
(4 years) - No cl heavy menstrual Bleeding
- Planning to conceive.
since last
(6 months)

LMP:-
9/2/2025
- Regular
- No cl dys men

- H/O myomectomy (at man
(15/Aug/2024) vaishali)

(H/O ? tubal)
Blockage)

- Adv!-
- 1) S. AMH, S. estradiol,
 - 2) Day 2 LH and FSH.
 - 3) S. prolactin
 - 4) S. Testosterone.

Rx! pap smear - CBS.
P/S! - cervix.
vagus (1)

P/V! - ut A/c
(1) nie

- T. folvite 5mg once daily @
 - T. enume plus 1 tab once daily @
 - T. clinger follie vaginal spray 4x days.
- } x 2 weeks.

Address: NH-1, Shakti Khand 2, Indirapuram, Ghaziabad, Uttar Pradesh - 201014
Ph No: +91 88106 85179, 1860 500 4424

Apollo Specialty Hospitals Private Limited

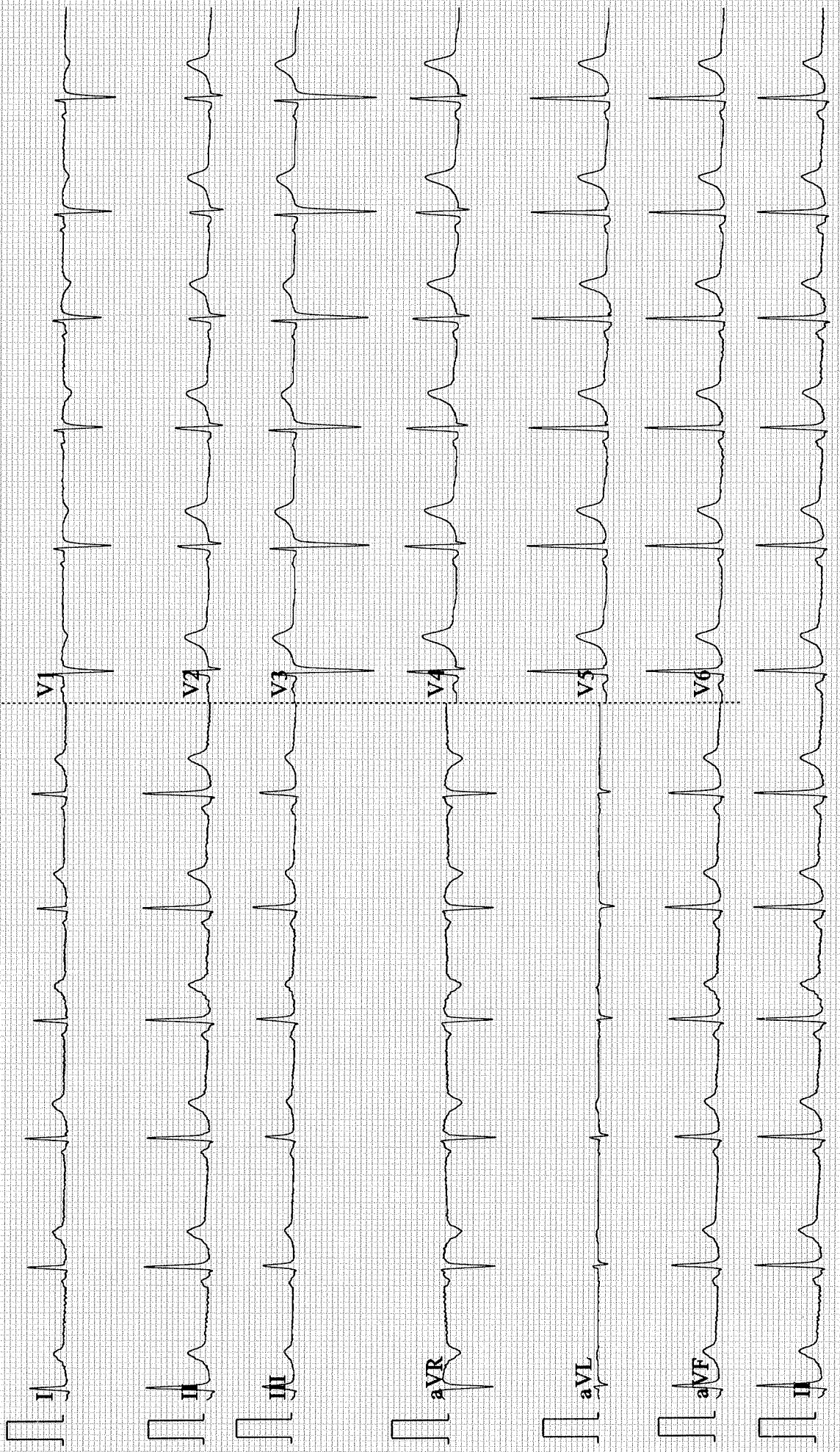
(Formerly known as Nova Specialty Hospitals Private Limited) CIN - U85100TG2009PTC099414

Regd Office: #7-1-617/A, 615 & 616, 7th Floor, Imperial Towers, Opp: Ameerpet Metro Station, Ameerpet, Hyderabad - 500038.
Ph No: 040 - 4904 7777, Fax No: 4904 7744 | www.apollocradle.com | Email ID: info.cradle@apollocradle.com

Diagnosis Information: May 6/2019

HR : 71 bpm
P : 89 ms
PR : 118 ms
QRS : 79 ms
QT/QTcBz : 368/401 ms
P/QRS/T : 62/60/56 °
RV5/SV1 : 1.432/0.793 mV

Unconfirmed Report.



Male
Req. No. :
Years : 4141F

APOLLO CRADLE- INDRAPURAM

DIET CHART

NAME: *Rkta kumar*

DATE: *25/2/25*

AGE:

UHID: *high fiber high protein diet*

DIETARY ADVICE FOR A HEALTHY LIFESTYLE

1. Consume at least 500 ml. of milk per day (including coffee, tea, curd and buttermilk) preferably toned or double toned.
2. Use whole grains and pulses rather than refined cereals like maida.
3. If mixing cereals with pulses for chapathi, use in the following proportion; 4 parts of cereal + 1 part of soya atta.
4. Liberal intake of green leafy vegetables in the form of soups, salads, mixed vegetable raita, cooked vegetables as sabzis etc.
5. Judicious intake of roots and tubers like potatoes, colocasia, sweet potato, yam, etc.
6. Prefer taking fruits over their juices. Low calorie fruits like apple, papaya, pear, peach, orange, sweet lime melon, pomegranate, guava should be preferred.
7. Select roasted snacks such as channa, puffed rice and heart healthy nuts like almonds, walnuts and choose low fat milk beverages over other unhealthy option.
8. Consume at least 2 liter of water every day.
9. A gap of 2 hours is required between dinner and bed time.
10. Cultivate the habit of having food at smaller intervals and in small quantities like 3 major meals and 3 - 4

small snacks in between (fruits, salad and buttermilk)

11. Include white meat only i. e. chicken, fish and egg white in the grilled, boiled or curry form.

FOOD TO BE AVOIDED *Avoid*

1. Extra sugar in the form of excess coffee, tea, sweets, glucose, soft drinks, honey, jams, jellies, candies, ice cream and other sweetened beverages.
2. Deep fried items such as samosa, Kachori, Namkeen, parathas, wafer etc. Eating bakery products on a daily basis.
3. Red meat like lamb (mutton), prawns, crab and organ meat.
4. Dried fruits like coconut and cashew nuts etc.
5. Fruits like avocados, mango, chikoo, grapes, custard apple, jackfruit and big bananas on a daily basis.
6. Extra salt on the table (top salt) daily consumption of pckes, papads, ready-to-eat food, processed foods, salted nuts, salted fish and chutney powders which contain salt as a major preserving agent.



Apollo Cradle CONSENT FORM

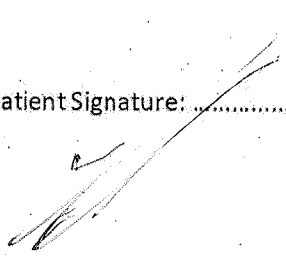
Patient Name: MRS. EKTA KUKAR Age: 41 / F

UHID Number: 19744 Company Name: MEDIWHEEL

I, Mr/Mrs/Ms MRS EKTA - KUKAR Employee of BANK OF BARODA

(Company) Want to inform you that I am not interested in getting DENTAL & GLUCOSE
Tests done which is a part of my routine health check package. PP-PENDANCY

And I claim the above statement in my full consciousness.

Patient Signature: 

Date: 22/02/25

Patient Name : Mrs. EKTA KUKAR Age : 41 Y/F
UHID : RIND.0000019744 OP Visit No : RINDOPV25282
Conducted By: : Dr. SANJIV KUMAR GUPTA Conducted Date : 24-02-2025 09:09
Referred By : SELF

CARDIOLOGY

CARDIAC STRESS TEST – (TMT)

Angina Pectoria:
NO

Previous MI:
NO

PTCA:
NO

CABG:
NO

HTN:
NO

DM:
NO

Smoking:
NO

Obesity:
NO

Lipidemia:
NO

Resting ECG Supine:
NORMAL

Standing:
NORMAL

Protocol Used:
BRUCE

Monitoring Leads:
12 LEADS

Patient Name : Mrs. EKTA KUKAR Age : 41 Y/F
UHID : RIND.0000019744 OP Visit No : RINDOPV25282
Conducted By: : Dr. SANJIV KUMAR GUPTA Conducted Date : 24-02-2025 09:09
Referred By : SELF

Grade Achieved:
12

84% HR / METS:
7.0

Reason for Terminating Test:
TEST COMPLETE

Total Exercise Time:
05:20 MIN

Symptoms and ECG Changes during Exercise:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

4.6 mts:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

7.0 mts:
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

RECOVERY
NO SYMPTOMS NO SIGNIFICANT ST T CHANGES

INTERPRETATION:

Rhythm:
NORMAL

S.T. Segment :
NORMAL

Blood Pressure Response :
NORMAL

Fitness Response :
GOOD

Patient Name : Mrs. EKTA KUKAR Age : 41 Y/F
UHID : RIND.0000019744 OP Visit No : RINDOPV25282
Conducted By: : Dr. SANJIV KUMAR GUPTA Conducted Date : 24-02-2025 09:09
Referred By : SELF

Impression:

Cardiac stress analysis is NEGATIVE for inducible myocardial ischaemia at good work load and 84% of MPR.

---- END OF THE REPORT ----



Dr. SANJIV
KUMAR
GUPTA

Patient Name	: Mrs. EKTA KUKAR	Age/Gender	: 41 Y/F
Patient Name	: Mrs. EKTA KUKAR	Age	: 41 Y F
UHID	: RIND.0000019744	OP Visit No	: RINDOPV25282
Reported on	: 22-02-2025 17:23	Printed on	: 10-03-2025 12:36
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both the lung fields and hilar shadows appears normal.

There is no obvious active pleuro-parenchymal lesion seen.

Both the costophrenic and cardiophrenic angles are clear.

Cardiac size appears within normal limits.

Both dome of hemidiaphragms are normal in position and contour.

Thoracic wall and soft tissues under view appear normal.

CONCLUSION :

No obvious abnormality seen

Printed on:22-02-2025 17:23

---End of the Report---



Dr. SANGEETA AGGARWAL
MBBS, MD
Radiology

Patient Name	: Mrs. EKTA KUKAR	Age/Gender	: 41 Y/F
Patient Name	: Mrs. EKTA KUKAR	Age	: 41 Y F
UHID	: RIND.0000019744	OP Visit No	: RINDOPV25282
Reported on	: 22-02-2025 16:45	Printed on	: 10-03-2025 12:37
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

SONO MAMMOGRAPHY - SCREENING

Real time B–Mode USG of both breasts:

Sono mammography study reveals normal appearance and distribution of fibro glandular breast parenchyma.

No evidence of focal, solid or cystic lesion.

No obvious asymmetry or distortion is noted.

No abnormal axillary lymphadenopathy is detected.

CONCLUSION:

No significant abnormality is seen in this study.

Consultant Radiologist.

(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.

Printed on:22-02-2025 16:45

---End of the Report---



Dr. SANGEETA AGGARWAL
MBBS, MD
Radiology

KINDLY NOTE: DENTAL CONSULTATION, GLUCOSE, POST PRANDIAL (PP), TEST PENDING FROM PATIENT SIDE