

Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 12:53PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 02:12PM
Visit ID : CBASOPV107384	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E36329	


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	12.2	g/dL	12-15	Spectrophotometer
PCV	36.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.46	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	81	fL	83-101	Calculated
MCH	27.4	pg	27-32	Calculated
MCHC	33.8	g/dL	31.5-34.5	Calculated
R.D.W	13.8	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,180	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	66.1	%	40-80	Electrical Impedance
LYMPHOCYTES	23.9	%	20-40	Electrical Impedance
EOSINOPHILS	1.9	%	1-6	Electrical Impedance
MONOCYTES	7.9	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	5406.98	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1955.02	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	155.42	Cells/cu.mm	20-500	Calculated
MONOCYTES	646.22	Cells/cu.mm	200-1000	Calculated
BASOPHILS	16.36	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	2.77		0.78- 3.53	Calculated
PLATELET COUNT	358000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	34	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic

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


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


Dr. Vidya Aniket Gore
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE


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

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



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AND LIFESTYLE LIMITED- RRL BANGALORE



Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 01:37PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 02:11PM
Visit ID : CBASOPV107384	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	100	mg/dL	70-100	HEXOKINASE

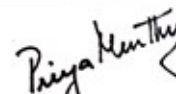
Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

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


 Dr Priya Murthy
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Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 11:01AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 01:25PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 02:07PM
Visit ID : CBASOPV107384	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

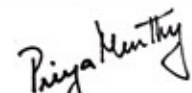
Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	100	mg/dL	70-140	HEXOKINASE

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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Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 01:27PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 03:02PM
Visit ID : CBASOPV107384	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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	117	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. HbA1c is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1c values is a better indicator of Glycemic control than a single test.

3. Low HbA1c in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.


4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

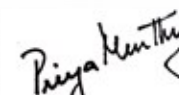
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
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Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 12:58PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 01:55PM
Visit ID : CBASOPV107384	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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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	178	mg/dL	<200	CHO-POD
TRIGLYCERIDES	123	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	43	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	135	mg/dL	<130	Calculated
LDL CHOLESTEROL	110.1	mg/dL	<100	Calculated
VLDL CHOLESTEROL	24.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.13		0-4.97	Calculated
ATHEROGENIC INDEX (AIP)	0.10		<0.11	Calculated

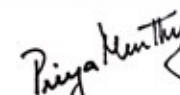
Comment:

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

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



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SIN No: BAS241001967

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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	0.54	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.08	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	12	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.6		<1.15	Calculated
ALKALINE PHOSPHATASE	110.00	U/L	30-120	IFCC
PROTEIN, TOTAL	8.26	g/dL	6.6-8.3	Biuret
ALBUMIN	4.66	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		0.9-2.0	Calculated

Comment:

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:


1. Hepatocellular Injury:

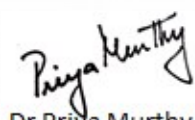
*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilsons’s diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Patten:*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.*Bilirubin elevated- predominantly direct , To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.


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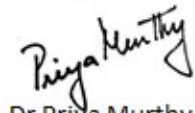
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.62	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	18.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.69	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.80	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.55	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.2	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	8.26	g/dL	6.6-8.3	Biuret
ALBUMIN	4.66	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.60	g/dL	2.0-3.5	Calculated
A/G RATIO	1.29		0.9-2.0	Calculated


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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	14.00	U/L	<38	IFCC

Priya Murthy

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



Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 12:58PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 02:20PM
Visit ID : CBASOPV107384	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E36329	

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)	1.2	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.1	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.753	µIU/mL	0.34-5.60	CLIA

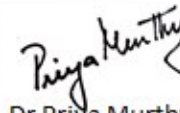
Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

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

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


Dr. Govinda Raju N L
 MSc, PhD (Biochemistry)
 Consultant Biochemistry


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



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 SIN No: BAS241001969

Apollo Health and Lifestyle Limited (CIN: U061107C2800PH6115849)
 This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
 Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
 www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

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


 1860 500 7788
 www.apolloclinic.com

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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DEPARTMENT OF IMMUNOLOGY

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

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--

Govinda Raju
Dr.Govinda Raju N L
 MSc,PhD(Biochemistry)
 Consultant Biochemistry

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



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Apollo Health and Lifestyle Limited

(CIN - U061107C2000PHG115819)
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 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034

 **1860 500 7788**
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Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
Age/Gender : 33 Y 8 M 16 D/F	Received : 25/Oct/2024 04:27PM
UHID/MR No : CBAS.0000094638	Reported : 25/Oct/2024 04:56PM
Visit ID : CBASOPV107384	Status : Final Report
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Emp/Auth/TPA ID : 22E36329	


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	2	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	0	/hpf	< 10	Automated Image based microscopy
RBC	2	/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. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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323/100/123, Doddathangur Village, Neeladri Main Road,
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Karnataka - 560 034

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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. Vidya Aniket Gore
 M.B.B.S,M.D(Pathology)
 Consultant Pathologist



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

Patient Name : Mrs.PATAKAMUDI JYOTHI	Collected : 25/Oct/2024 08:40AM
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DEPARTMENT OF CLINICAL PATHOLOGY


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

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

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

*** End Of Report ***

Result/s to Follow:
PERIPHERAL SMEAR


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


Dr. Vidya Aniket Gore
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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



Dr. Vidya Aniket Gore
M.B.B.S, M.D (Pathology)
Consultant Pathologist



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Patient Name	: Mrs. PATAKAMUDI JYOTHI	Age	: 33Yrs 8Mths 18Days
UHID	: CBAS.0000094638	OP Visit No.	: CBASOPVI07384
Printed On	: 26-10-2024 07:09 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E36329		

DEPARTMENT OF RADIOLOGY

ULTRASOUND-WHOLE ABDOMEN

Liver: appears normal in size (12.0 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 10.1x1.3 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

Left kidney appear normal in size 10.2x1.4 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 9.8x4.4x4.5 cm. Anterior right lateral wall intramural fibroid measuring 5.5x4.4x5.6 cm. Endometrial echo-complex appears normal and measures 0.7 cm.

Both ovaries Left ovary appear normal in size, shape and echotexture.

Right ovary is obscured by bowel gas and left ovary measuring 3.0x1.5 cm.
No evidence of any adnexal pathology noted.

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

IMPRESSION:-

GARDE I FATTY LIVER.

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. PATAKAMUDI JYOTHI
Age/Gender 33Y | Female
UHID CBAS.0000094638

Appt ID CBASAPT1252
Consult Date 25 Oct 2024
Order Bill ID CBAS-OCR-64844
Visit Display ID CBASOPV107384

VITALS

Weight : 56Kgs
Pulse : 78 BPM
BP : 110 / 70 MmHg
Temperature : 98.6 °F

Height : 150Cms
Spo2 : 99%
Respiratory Rate : 15 BPM

Patient Name	: Mrs. PATAKAMUDI JYOTHI	Age	: 33Yrs 8Mths 17Days
UHID	: CBAS.0000094638	OP Visit No.	: CBASOPV107384
Printed On	: 25-10-2024 11:24 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E36329		

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---



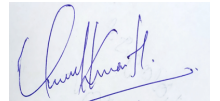
Dr. Vishal Kumar H
MBBS, DIP. Cardiology
KMC 121069
Cardiology

Patient Name	: Mrs. PATAKAMUDI JYOTHI	Age	: 33Yrs 8Mths 17Days
UHID	: CBAS.0000094638	OP Visit No.	: CBASOPVI07384
Printed On	: 25-10-2024 11:23 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E36329		

DEPARTMENT OF CARDIOLOGY

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

---End Of The Report---



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

Patient Name	: Mrs. PATAKAMUDI JYOTHI	Age	: 33Yrs 8Mths 17Days
UHID	: CBAS.0000094638	OP Visit No.	: CBASOPVI07384
Printed On	: 25-10-2024 11:34 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E36329		

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. PATAKAMUDI JYOTHI

Age : 33Y 8M 16D

UHID : CBAS.0000094638

Address : Byatarayanapura Bangalore Karnataka INDIA 560026

sex : Female



CBAS.0000094638

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CBASOPV107384

Bill No: CBAS-OCR-64844

Date: Oct 25th, 2024, 8:26 AM

Sno.	Service Type/Service Name	Department	
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324		
1	ULTRASOUND - WHOLE ABDOMEN	Ultrasound Radiology	<input type="checkbox"/>
2	OPHTHAL BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
3	URINE GLUCOSE(POST PRANDIAL)	Clinical Pathology	<input type="checkbox"/>
4	GAMMA GLUTAMYL TRANSFERASE (GGT)	Biochemistry	<input type="checkbox"/>
5	HbA1c, GLYCATED HEMOGLOBIN	Biochemistry	<input type="checkbox"/>
6	GYNAECOLOGY CONSULTATION ✓	Consultation	<input type="checkbox"/>
7	DIET CONSULTATION	General	<input type="checkbox"/>
8	BODY MASS INDEX (BMI)	General	<input type="checkbox"/>
9	EKG	Cardiology	<input type="checkbox"/>
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
11	2 D 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	PERIPHERAL SMEAR	Haematology	<input type="checkbox"/>
24	COMPLETE URINE EXAMINATION	Clinical Pathology	<input type="checkbox"/>
25	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	Biochemistry	<input type="checkbox"/>
26	LIVER FUNCTION TEST (LFT)	Biochemistry	<input type="checkbox"/>

✓ TMT, PFT
SOLIO

Se VIT D
Se VIT B12
Hb 150 gm
Wt 56.8 kg
B.P 113/67
PP > 85

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)
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) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wankore | Kharadi) Uttar Pradesh: Ghaziabad (Indrapuram)

GSTIN: 29AADCA0733E1Z3

Address:

99, Bull Temple Rd, next to Ramakrishna Mission
Maharaja Log City, Byatarayanapura, Bangalore
Karnataka 560019



ECHOCARDIOGRAPHY REPORT

Name: MRS P JYOTHI Age: 33 YEARS GENDER: FEMALE

Consultant: Dr. VISHAL KUMAR H. Date : 25/10/2024

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	0.78	m/sec	A	0.56	m/sec	No MR
Tricuspid Valve	E	0.48	m/sec	A	0.38	m/sec	No TR
Aortic Valve	Vmax	1.04	m/sec				No AR
Pulmonary Valve	Vmax	0.78	m/sec				No PR
Diastolic Dysfunction							

M-Mode Measurements

Parameter	Observed Value	Normal Range	
Aorta	2.7	2.6-3.6	cm
left Atrium	3.0	2.7-3.8	cm
Aortic Cusp Separation	1.5	1.4-1.7	cm
IVS - Diastole	0.9	0.9-1.1	cm
left Ventricle-Diastole	4.4	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	2.3	2.1-4.0	cm
Posterior wall-Systole	1.2	1.3-1.5	cm
Ejection Fraction	60	≥ 50	%
Fractional shortening	30	≥ 20	%
Right Ventricle	2.3	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.

CLINICAL CARDIOLOGIST

P, JYOTHI

ID: 667#0016 Age: 33 (24-10-1991)

Gender	Female	Height	150 cm	Asthma	No
Ethnicity	Asian	Weight	56 kg	BMI	24.9
Smoker	No			COPD	--

FVC (ex only)

Your FEV1 / Predicted: 65%

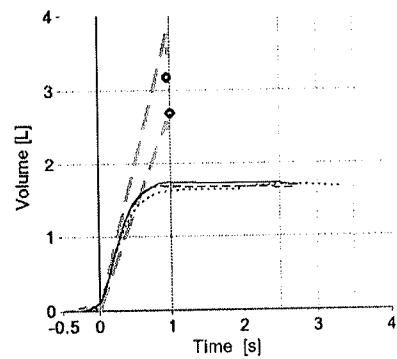
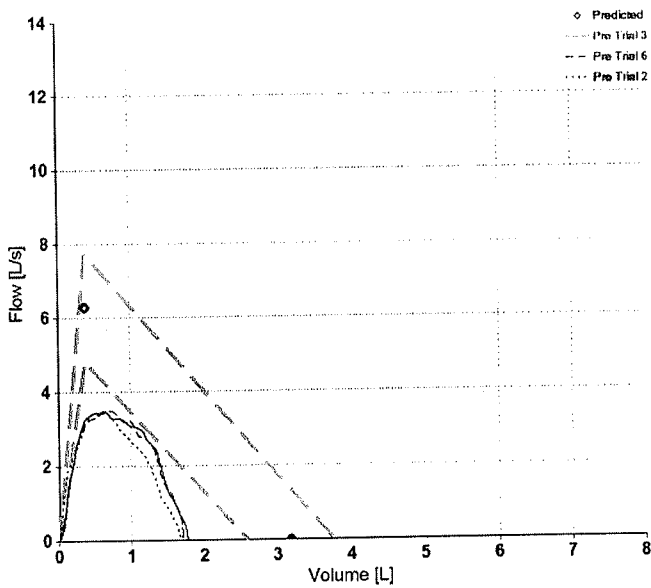
Test Date	25-10-2024 12:23:22	Interpretation	GOLD(2003)/Hardie	Value Selection	Best Value
Post Time		Predicted	NHANES III * 1.00	BTPS (IN/EX)	1.00/1.02

Parameter	Pred	LLN	Pre				%Pred
			Best	Trial-3	Trial-6	Trial-2	
FVC [L]	3.18	2.59	2.02*	1.74*	1.69*	1.70*	64
FEV1 [L]	2.69	2.19	1.74*	1.74*	1.68*	1.63*	65
FEV1/FVC	0.837	0.740	0.863	1.000	0.994	0.955	103
FEF25-75% [L/s]	3.09	2.04	3.11	3.11	3.14	2.84	101
PEF [L/s]	6.28	4.82	3.50*	3.49*	3.50*	3.46*	56
FET [s]	-	-	1.0	1.0	0.8	2.5	-

Session Quality: Pre F
 System Interpretation: Pre No interpretation, not enough acceptable maneuvers

Caution: Poor session quality. Interpret with care

* Indicates value outside normal range or significant post change.



Apollo Clinic

CONSENT FORM

Patient Name: P. Jyothi Age: 33

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 & General
compendia
will come on
31st
Dental, LBC, Skup*

Patient Signature: P. Jyothi Date:

Patient Name	: Mrs.Patakamudi Jyothi	Age	: 33Yrs 8Mths 16Days
UHID	: CBAS.0000094638	OP Visit No.	: CBASOPV107384
Printed On	: 25-10-2024 04:10 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --

DEPARTMENT OF RADIOLOGY

USG OF BOTH BREASTS

Both breasts show normal echotexture 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.

IMPRESSION

⚡ No significant abnormality is seen in this study

(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

25/10/24

Mr. Jyothi, 33y.

TBW 50-55g

Height : 160cm	Weight : 56.8y	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Amma podina cony lewars.
(or) atkumbaly
Beetroot carrot juice - eptj shik

Sprouts, Raw mushrooms, millets, curries, jamun,
Saddanamam - , Coold, Jowar, Rice.
Phiji, buty water.

Flax seed - 1 table spoon
Water - 3 litly

Dr. [Signature]
9449349333

Follow up date:

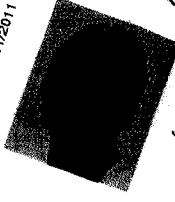
Doctor Signature



భారత ప్రభుత్వం
Government of India



Issue Date: 15/11/2011



పాతాకామిడి జ్యోతి
Patakamudi Jyothi
పుట్టిన తేదీ/DOB: 26/01/1991
పు / FEMALE

3868 6789 6859

UID : 2103 4804 8504 6376

నా ఆధార్, నా గుర్తింపు

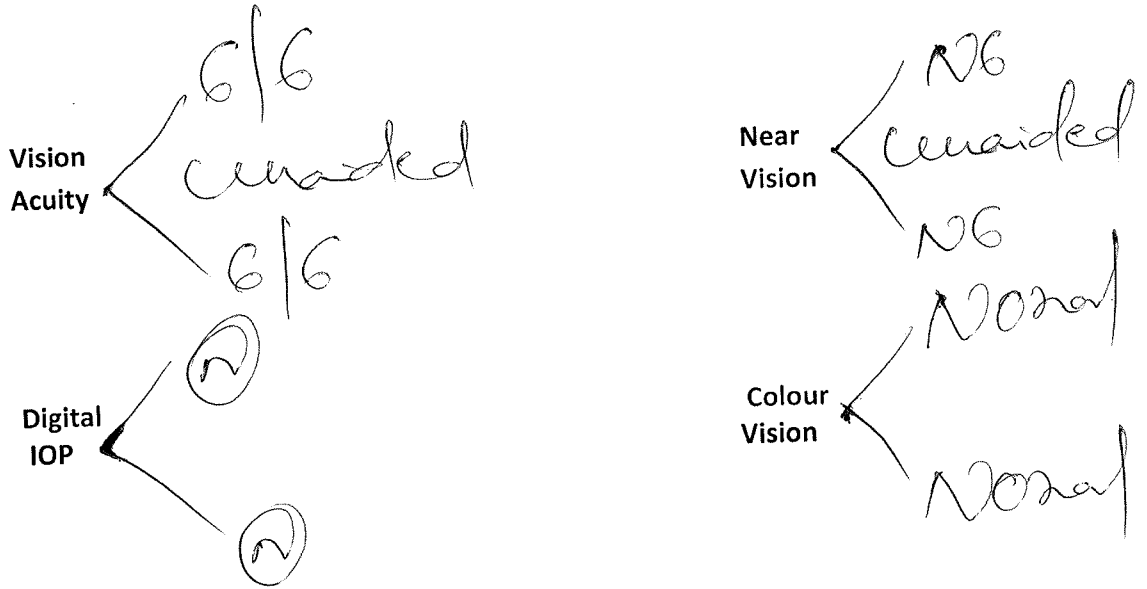
Mrs. Tyothi

33/F

94638

25/10/24

EYE CHECK UP REPORT



• Fundus: normal @ study

• Ant. Segment :- normal

• Media: normal

• Pupil: normal

KH/S

MRS P JYOTHI,

Patient ID: 350

25.10.2024

12:54:16pm

Female 150 in 56.8 lbs

33 yrs

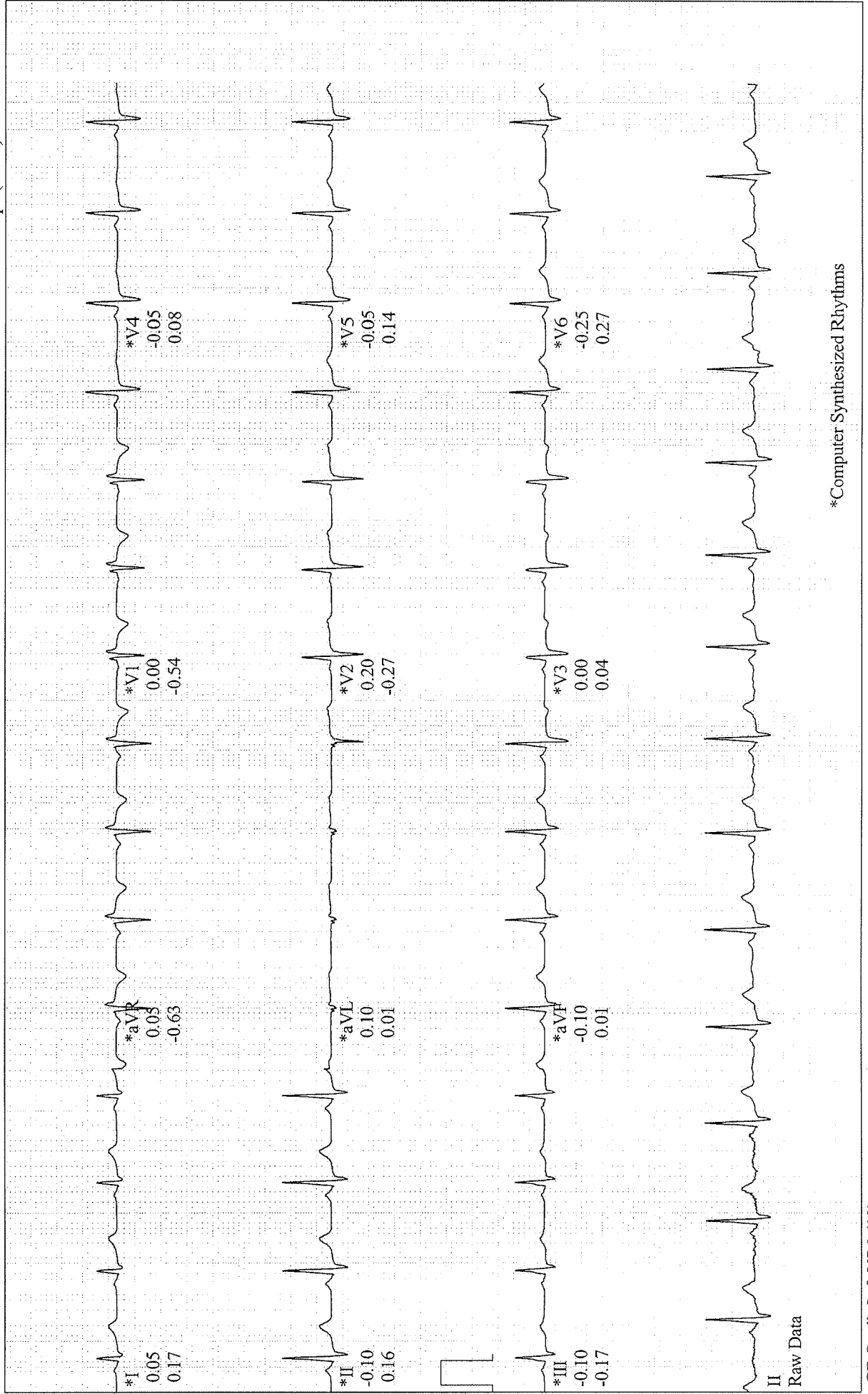
Exercise Test / Linked Medians

82 bpm

110/70 mmHg

APOLO CLINIC

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

MRS P JYOTHI,

Patient ID: 350

25.10.2024

12:54:33pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

86 bpm

110/70 mmHg

PRETEST

SUPINE

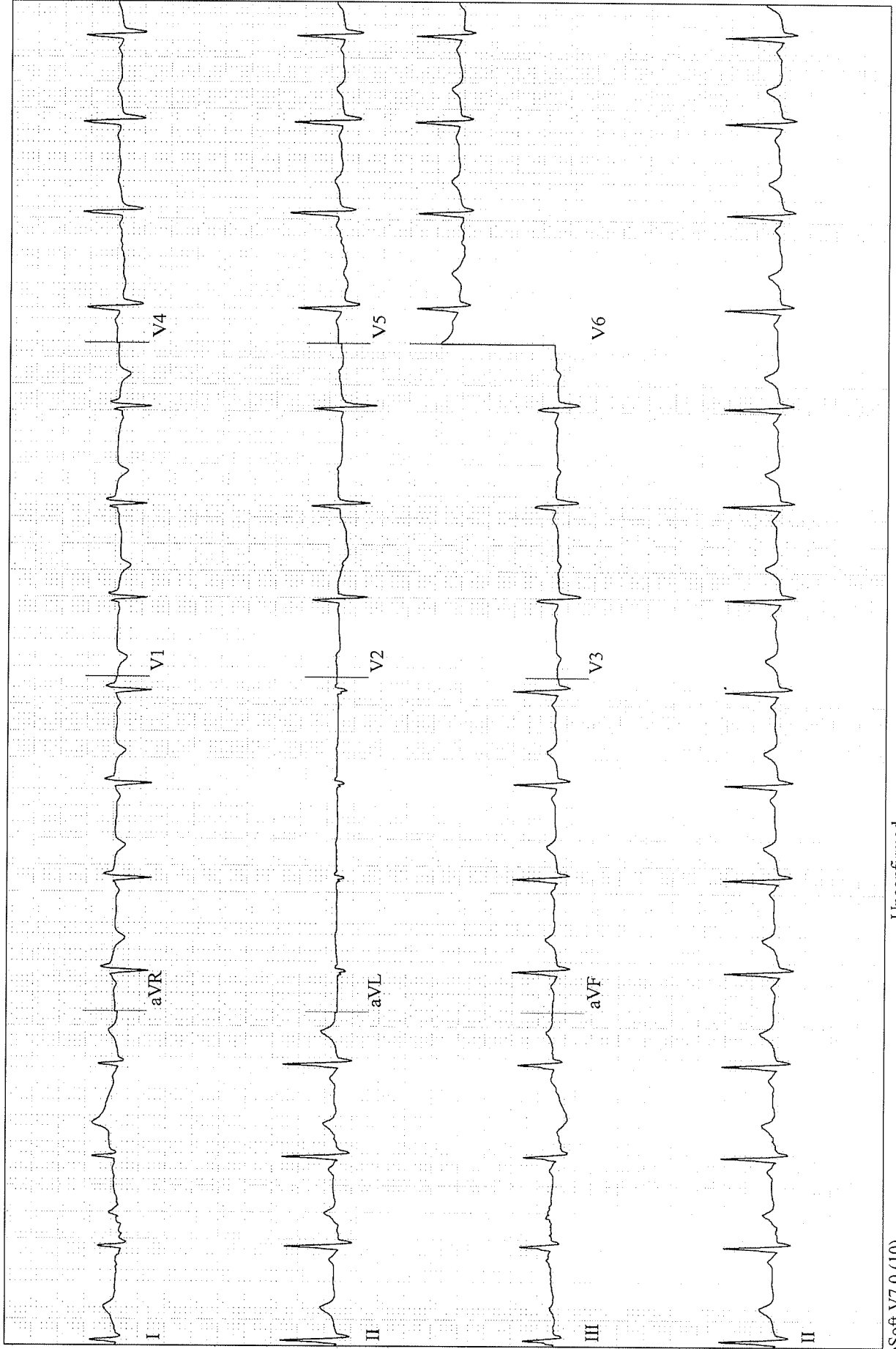
0:16

APOLLO CLINIC

BRUCE

0.0 mph

0.0 %



GE CardioSoft V7.0 (10)

25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(II,V4)

Unconfirmed

Attending MD:

Page 1

MRS P JYOTHI,

Patient ID: 350

25.10.2024

12:54:39pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

86 bpm

110/70 mmHg

PRETEST

STANDING

0:22

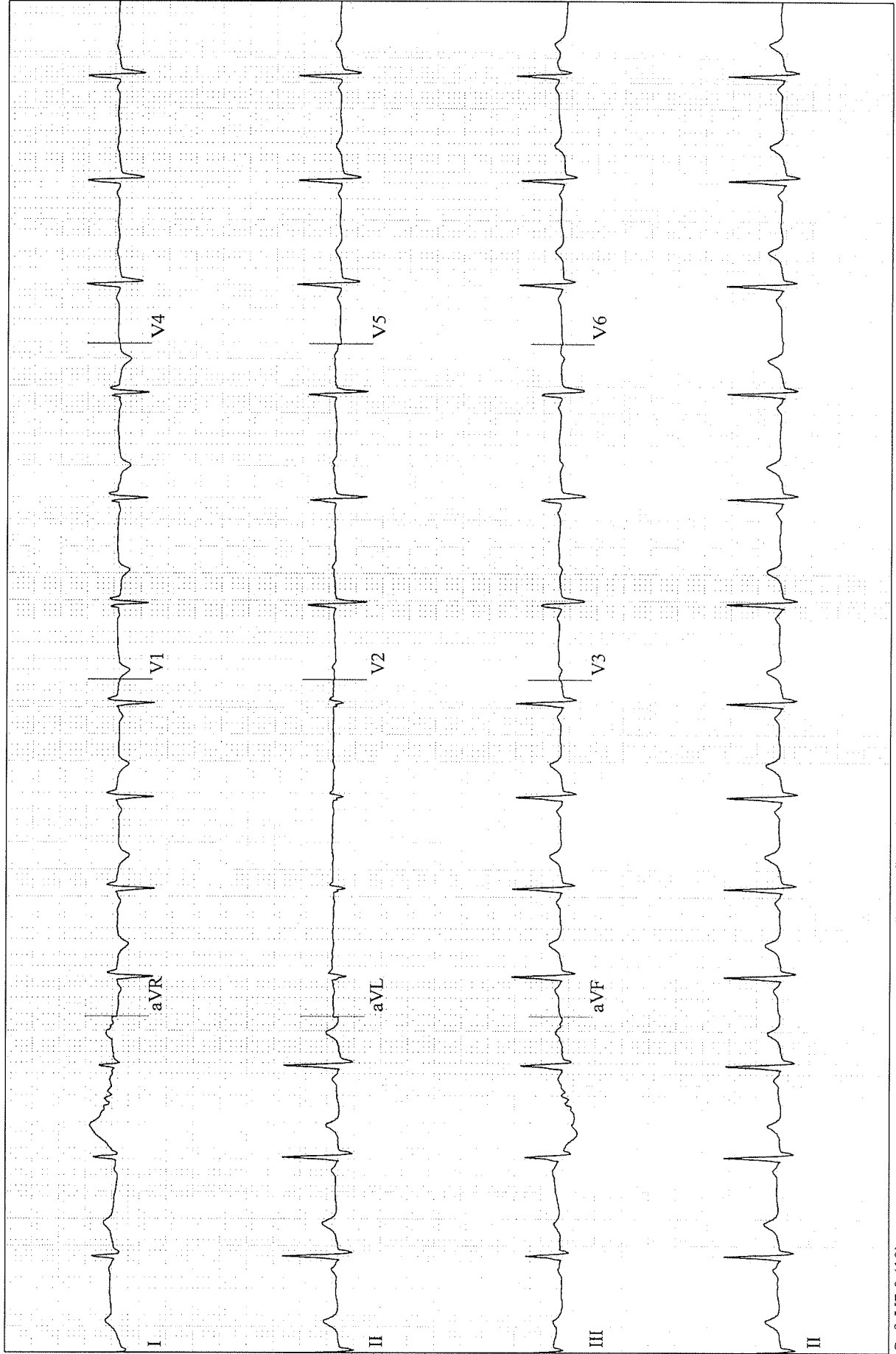
AROBLO CLINIC



BRUCE

0.0 mph

0.0 %



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(II,V4)

Unconfirmed
Attending MD:

MRS P JYOTHI,
Patient ID: 350
25.10.2024
12:54:47pm

Female 150 in 56.8 lbs
33 yrs

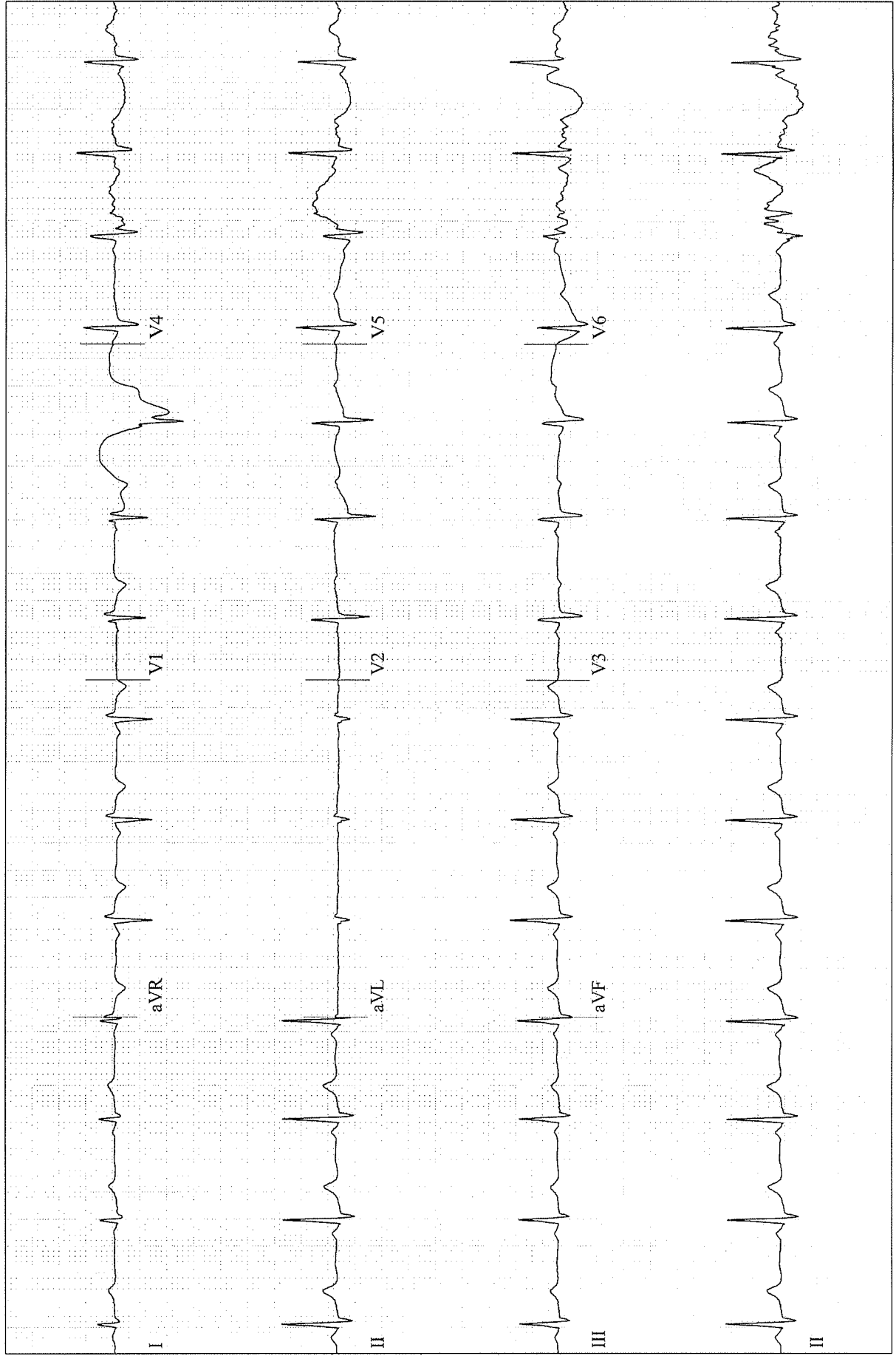
Exercise Test / ECG Strips

82 bpm
110/70 mmHg

PRETEST
HYPERV.
0:30

APOLLO CLINIC

BRUCE
0.0 mph
0.0 %



MRS P JYOTHI,

Patient ID: 350

25.10.2024

12:57:36pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

134 bpm

110/70 mmHg

EXERCISE

STAGE I

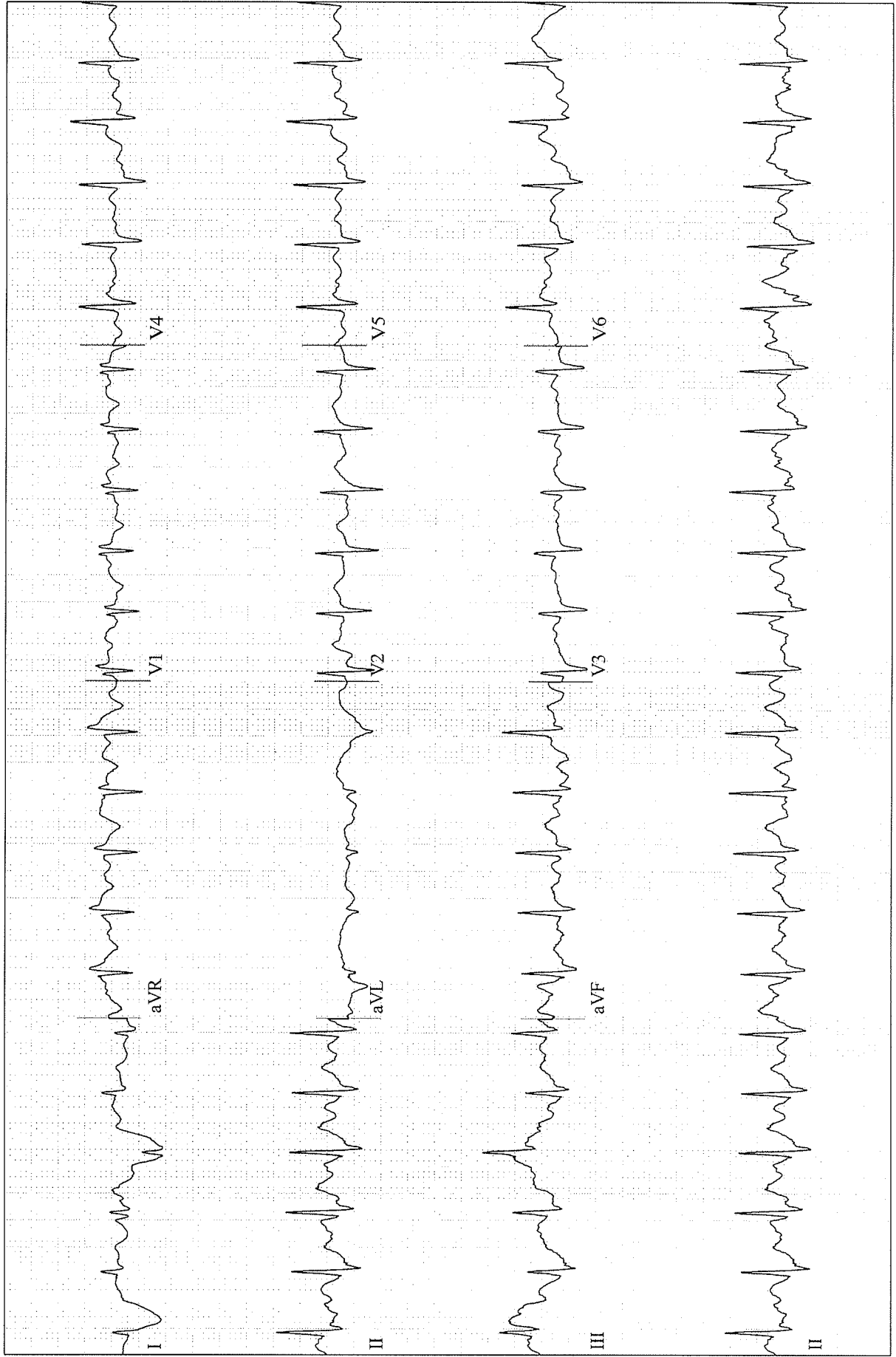
2:50

APOLLO CLINIC

BRUCE

1.7 mph

10.0 %



GE CardioSoft V7.0 (10)

25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.4.1.1 HR(V4,II)

Unconfirmed

Attending MD:

MRS P JYOTHI,

Patient ID: 350

25.10.2024

1:00:36pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

171 bpm

120/80 mmHg

EXERCISE

STAGE 2

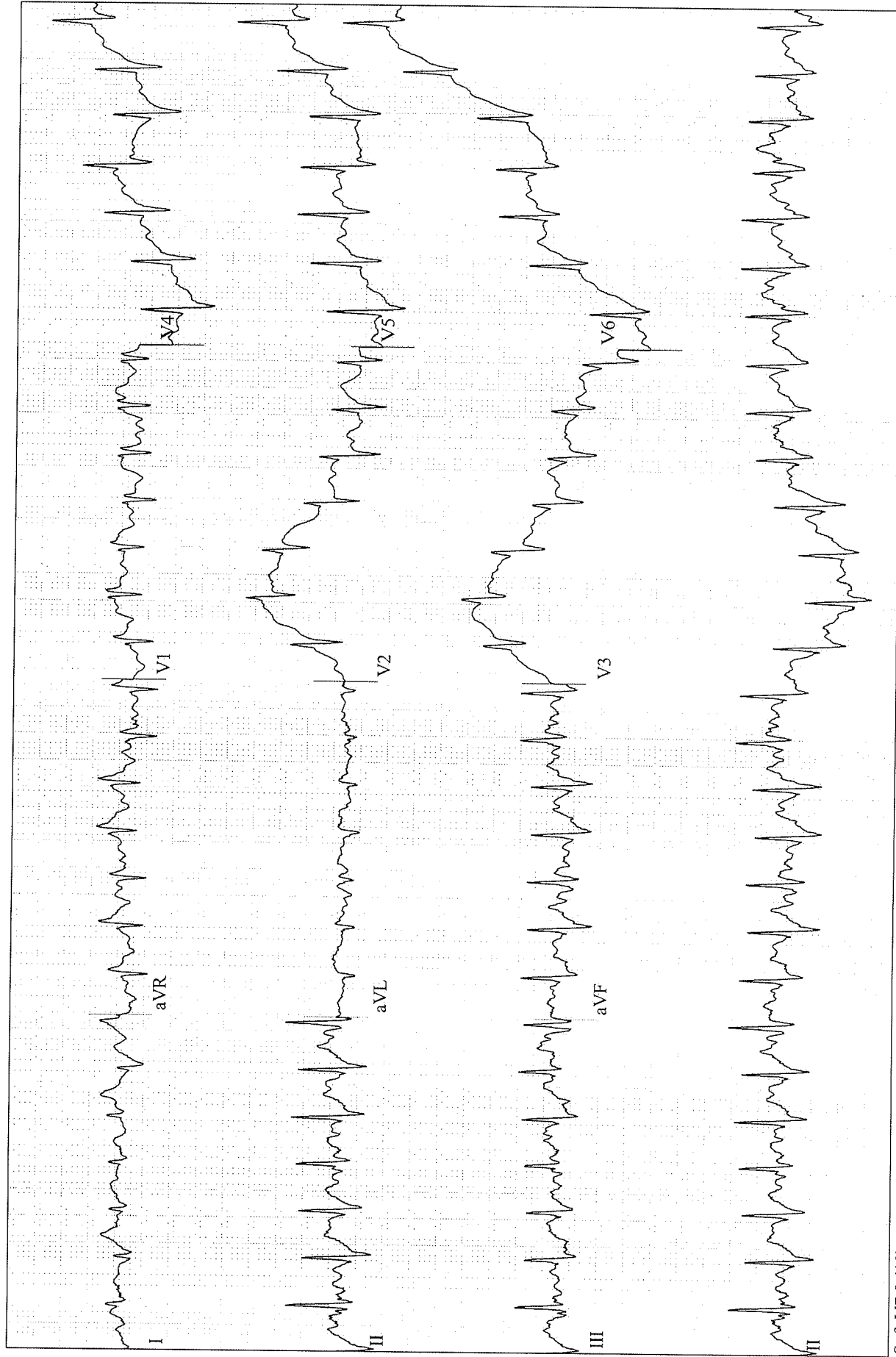
5:50

APOLLO CLINIC

BRUCE

2.5 mph

12.0 %



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II) Unconfirmed

Attending MD:

MRS P JYOTHI,

Patient ID: 350

25.10.2024

1:01:49pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

181 bpm

EXERCISE

STAGE 3

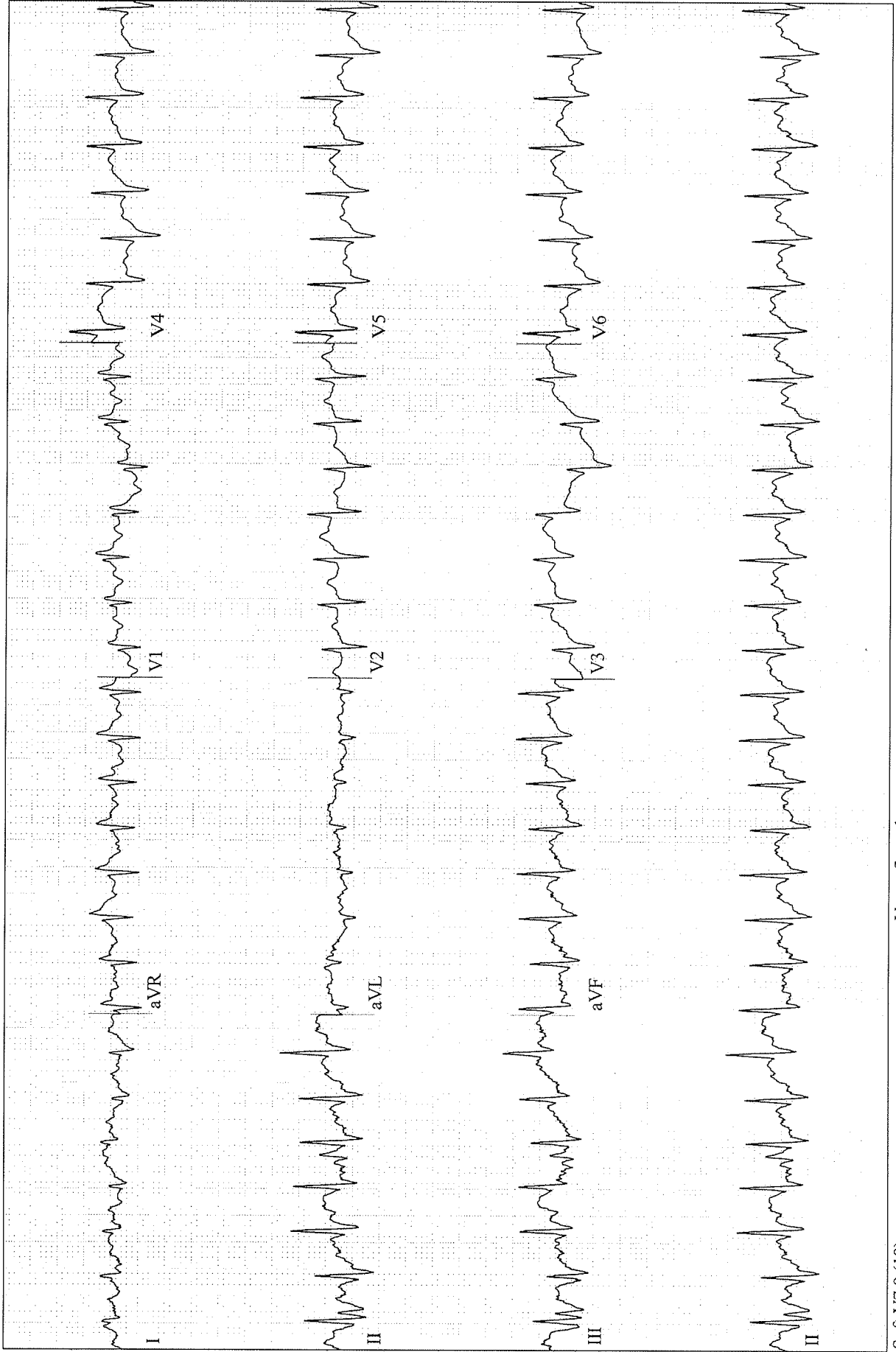
7:03

APOLLO CLINIC

BRUCE

0.0 mph

14.0 %



MRS P. JYOTHI,

Patient ID: 350

25.10.2024

1:02:49pm

Female 150 in 56.8 lbs

33 yrs

Exercise Test / ECG Strips

139 bpm

120/80 mmHg

RECOVERY

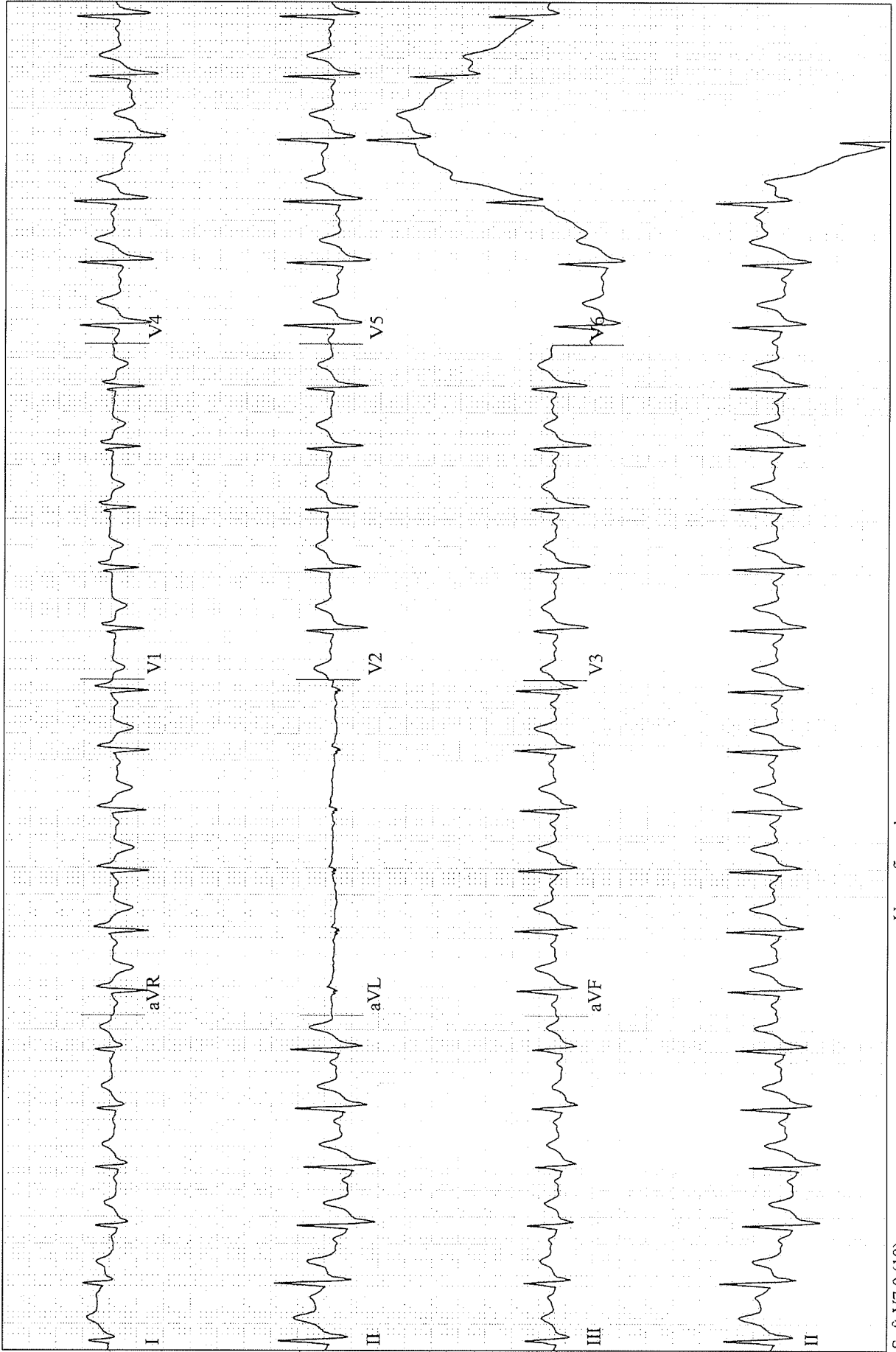
1:00

BRUCE

0.0 mph

0.0 %

APOLLOCLINIC



GE CardioSoft V7.0 (10)

25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Unconfirmed

Attending MD:

APOLLO CLINIC
BASAVANAGUDI
BANGALORE

EXERCISE STRESS TEST REPORT

Patient Name: MRS P JYOTHI ,
Patient ID: 350
Height: 150 in
Weight: 56.8 lbs

DOB: 26.01.1991
Age: 33 yrs
Gender: Female
Race:

Study Date: 25.10.2024
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:

Medical History:

Reason for Exercise Test:

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed [mph]	Grade [%]	HR [bpm]	BP [mmHg]	Comment
PRETEST	SUPINE	00:17	0.00	0.00	86	110/70	
	STANDING	00:07	0.00	0.00	86		
	HYPERV.	00:08	0.00	0.00	82		
EXERCISE	STAGE 1	03:00	1.70	10.00	134	110/70	
	STAGE 2	03:00	2.50	12.00	171	120/80	
	STAGE 3	01:03	0.00	14.00	181		
RECOVERY		01:07	0.00	0.00	133	120/80	

The patient exercised according to the BRUCE for 7:03 min:s, achieving a work level of Max. METS: 9.50. The resting heart rate of 90 bpm rose to a maximal heart rate of 181 bpm. This value represents 96% of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 120/80 mmHg. The exercise test was stopped due to --.

Interpretation

Conclusions

GOOD EFFORT TOLERANCE
NORMAL BP AND HR RESPON
NO SIGANIFICANT ST T CHANGES
NO ANGINA OR ARRHYTHMIA DURING EXERCISE
TMT IS NEGATIVE FOR INDUCIBLE ISCHEMIA

Borderline TMT

Physician

Technician