

Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 10:31AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 12:02PM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

DEPARTMENT OF HAEMATOLOGY

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

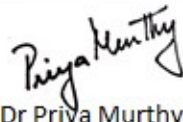
Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	13.1	g/dL	12-15	Spectrophotometer
PCV	39.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	5.68	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	69.6	fL	83-101	Calculated
MCH	23.1	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	13.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,250	cells/cu.mm	4000-10000	Electrical Impedence
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	65.3	%	40-80	Electrical Impedence
LYMPHOCYTES	19.9	%	20-40	Electrical Impedence
EOSINOPHILS	4.1	%	1-6	Electrical Impedence
MONOCYTES	10	%	2-10	Electrical Impedence
BASOPHILS	0.7	%	<1-2	Electrical Impedence
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4081.25	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	1243.75	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	256.25	Cells/cu.mm	20-500	Calculated
MONOCYTES	625	Cells/cu.mm	200-1000	Calculated
BASOPHILS	43.75	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	3.28		0.78- 3.53	Calculated
PLATELET COUNT	272000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	13	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBCs: Show crowding and mild anisocytosis with predominance of Microcytic hypochromic RBCs. Occasional poikilocytes like target cells are seen.

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



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Consultant Pathologist



Dr Priya Murthy
M.B.B.S,M.D(Pathology)
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PLATELETS: appear adequate in number.

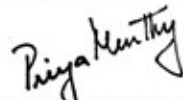
HEMOPARASITES: negative

IMPRESSION: MICROCYTIC HYPOCHROMIC BLOOD PICTURE

Note: Kindly evaluate for incipient iron deficiency status/hemoglobinopathy.



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AND LIFESTYLE LIMITED- RRL BANGALORE



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Visit ID : CHSROPV338411	Status : Final Report
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DEPARTMENT OF HAEMATOLOGY

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

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



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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 11:08AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 11:44AM
Visit ID : CHSROPV338411	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
GLUCOSE, FASTING , NAF PLASMA	104	mg/dL	70-100	HEXOKINASE

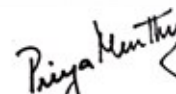
Comment:

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.


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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 11:26AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 04:48PM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 05:27PM
Visit ID : CHSROPV338411	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

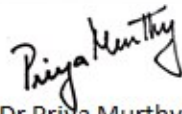
Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	97	mg/dL	70-140	HEXOKINASE

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:HSR241003402

Apollo Health and Lifestyle Limited

(CIN - U061107C2800PHG115819)
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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)

Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 10:32AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 11:17AM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

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	6.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	140	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.

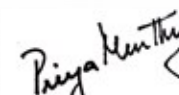
5. In cases of Interference of Hemoglobin variants in HbA1c, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

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
 SIN No: HSR241003180

Apollo Health and Lifestyle Limited

(CIN - U061107C2800PHG115849)

This test has been performed at Apollo Health & Lifestyle Ltd, RRL BANGALORE Laboratory
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APOLLO CLINICS NETWORK

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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 10:38AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 11:22AM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

DEPARTMENT OF BIOCHEMISTRY


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

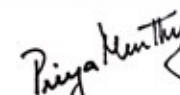
Test Name	Result	Unit	Bio. Ref. Interval	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	190	mg/dL	<200	CHO-POD
TRIGLYCERIDES	100	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	47	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	143	mg/dL	<130	Calculated
LDL CHOLESTEROL	122.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	20	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.04		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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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: HSR241003175

Apollo Health and Lifestyle Limited (CIN - U061107C2800PH615819)
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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	0.55	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.46	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	72	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	47.0	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	0.6		<1.15	Calculated
ALKALINE PHOSPHATASE	66.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.09	g/dL	6.6-8.3	Biuret
ALBUMIN	4.09	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		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:

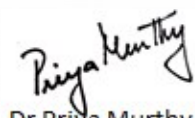
*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate 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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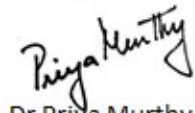
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Test Name	Result	Unit	Bio. Ref. Interval	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.82	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	19.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	6.80	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.60	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.39	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	135	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.6	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.09	g/dL	6.6-8.3	Biuret
ALBUMIN	4.09	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.00	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		0.9-2.0	Calculated


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THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No: HSR241003175

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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	26.00	U/L	<38	IFCC

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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
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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)	1.2	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.6	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	3.134	µIU/mL	0.34-5.60	CLIA

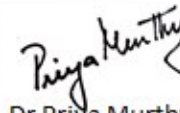
Comment:

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: HSR241003181

Apollo Health and Lifestyle Limited (CIN: U061107C2009PH6115849)
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Address:
 Apollo Health & Lifestyle Laboratory, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560034


1860 500 7788
 www.apolloclinic.com

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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 11:04AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 12:23PM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH AND LIFESTYLE LIMITED- RRL BANGALORE
 SIN No:HSR241003181

Apollo Health and Lifestyle Limited

(CIN - U061107C2009PLG115819)
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Address:
 32/100/125, Doddabangla Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka- 560034



Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 05:05PM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 06:36PM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	


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	Light turbid		CLEAR	Scattering of light
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.004		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	POSITIVE +		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	13	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	9	/hpf	< 10	Automated Image based microscopy
RBC	1	/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



THIS TEST HAS BEEN PERFORMED AT APOLLO HEALTH

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Address:
 323/100/123, Doddathangur Village, Neeladri Main Road,
 Neeladri Nagar, Electronic city, Bengaluru,
 Karnataka - 560 034


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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 05:05PM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 06:36PM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

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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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 08:48AM
Age/Gender : 40 Y 2 M 20 D/F	Received : 26/Oct/2024 10:40AM
UHID/MR No : AHB.0001263443	Reported : 26/Oct/2024 11:47AM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

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
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Patient Name : Ms.TIRPEE SOY	Collected : 26/Oct/2024 02:14PM
Age/Gender : 40 Y 2 M 20 D/F	Received : 27/Oct/2024 12:32PM
UHID/MR No : AHB.0001263443	Reported : 28/Oct/2024 04:21PM
Visit ID : CHSROPV338411	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22E34869	

DEPARTMENT OF CYTOLOGY


LBC PAP SMEAR , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	23713/24
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. Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	EPITHEIAL 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 ***

Result/s to Follow:
PERIPHERAL SMEAR



DR. K. RAMA KRISHNA REDDY
M.B.B.S., M.D
CONSULTANT PATHOLOGIST

Page 16 of 16
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Patient Name : Ms.TIRPEE SOY
Age/Gender : 40 Y 2 M 20 D/F
UHID/MR No : AHB.0001263443
Visit ID : CHSROPV338411
Ref Doctor : Self
Emp/Auth/TPA ID : 22E34869

Collected : 26/Oct/2024 02:14PM
Received : 27/Oct/2024 12:32PM
Reported : 28/Oct/2024 04:21PM
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. K. RAMA KRISHNA REDDY
M.B.B.S, M.D
CONSULTANT PATHOLOGIST



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Patient Name	: Ms. TIRPEE SOY	Age	: 40Yrs 2Mths 21Days
UHID	: AHB.0001263443	OP Visit No.	: CHSROPV338411
Printed On	: 26-10-2024 04:38 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E34869		

DEPARTMENT OF RADIOLOGY

ULTRASONOGRAPHY OF ABDOMEN &

PELVIS

LIVER : Normal in size & echotexture raised . No focal lesion. No intra hepatic biliary duct dilatation. Portal & hepatic veins appear normal. PV: Normal. CBD: Normal.

GALL BLADDER : Minimally distended. No intraluminal calculi seen. Wall thickness is normal.

PANCREAS : Obscured by bowel gas. However the visualized parts of the pancreas appear grossly normal. Para-Aortic areas could not be seen.

SPLEEN : Normal in size & echotexture normal. No focal / diffuse lesions.

KIDNEYS : Both kidneys are normal in size and echotexture. No calculi.

No pelvicalyceal dilatation on both sides. Corticomedullary differentiation is well maintained.

URINARY BLADDER : Normal in wall thickness and lumen are normal. Contents clear. No calculus seen.

UTERUS : Anteverted. Normal in size and echotexture. Endometrial and myometrium appears normal. Endometrial thickness: 6mm.

POD – clear.

OVARIES : Both ovaries are normal in size & echopattern. No obvious mass noted.

IMPRESSION :

Grade I fatty liver

(The sonography findings should always be considered in correlation with the clinical and other investigation findings where applicable). It is only a professional opinion. Not valid for medico-legal purpose) Higher imaging techniques to be done, depending on the condition of the patient, if clinically needed.

---End Of The Report---

Sonia Pavani

Dr.M SONIA PAVANI
MBBS, M.D (Radio-Diagnosis)
ANP20160002416KTK
Radiology

Patient Name	: Ms. TIRPEE SOY	Age	: 40Yrs 2Mths 21Days
UHID	: AHB.0001263443	OP Visit No.	: CHSROPV338411
Printed On	: 26-10-2024 02:05 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E34869		

DEPARTMENT OF CARDIOLOGY

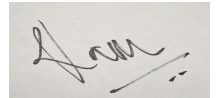
Observation :-

1. Sinus Rhythm.
2. Heart rate is 65 beats per minutes.
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.

---End Of The Report---



Dr.RAMNARESH SOUDRI
MBBS, MD (General Medicine), DM Cardiology
81603
Cardiology

Patient Name	: Ms. TIRPEE SOY	Age	: 40Yrs 2Mths 21Days
UHID	: AHB.0001263443	OP Visit No.	: CHSROPV338411
Printed On	: 26-10-2024 08:04 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22E34869		

DEPARTMENT OF CARDIOLOGY

2D Echo Cardiography

Chambers

Left Ventricle : Normal in size, **NO RWMA at Rest**

Left Atrium : Normal

Right Ventricle : Normal

Right Atrium : Normal

Septa

IVS: Intact

IAS : Intact

Valves

Mitral Valve : Normal.

Tricuspid Valve : Normal , Trace TR, No PAH

Aortic Valve : Tricuspid, Normal mobility

Pulmonary Valve : Normal

Great Valves

Aorta : Normal

Pulmonary Artery : Normal

Ivc : Normal

Pericardium : Normal

Doppler Echocardiograph

Mitral Valve E 0.5m/sec A 0.4m/sec e/a-1.25

Aortic Valve Vmax 1.1m/sec PG 0.6mmHg

Diastolic Dysfunction None

M – Mode Measurement

Parameter	Observed	Valve Normal Range	
Aorta	20	26- 38	mm
Left Atrium	24	27-38	mm
IVS- Diastole	07	09-11	mm
Left Ventricle –Diastole	37	42-59	mm
Posterior wall–Diastole	07	09-11	mm
IVS–Systole	11	13-15	mm
Left Ventricle– Systole	25	21-40	mm
Posterior wall– Systole	07	13-15	mm
Ejection Fraction	60%	->50	%

IMPRESSION

NORMAL SIZED CARDIAC VALVES AND CHAMBERS

NO RWMA'S AT REST

NORMAL LV & RV SYSTOLIC FUNCTION LVEF – 60%

NORMAL LV DIASTOLIC FUNCTION

NO PERICARDIAL EFFUSION / VEGETATION / CLOT.

---End Of The Report---



Dr. AFSAR PASHA
MBBS MD DNB CARDIOLOGY
88062
Cardiology

Patient Name	: Ms. TIRPEE SOY	Age	: 40Yrs 2Mths 22Days
UHID	: AHB.0001263443	OP Visit No.	: CHSROPV338411
Printed On	: 27-10-2024 04:08 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22E34869		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

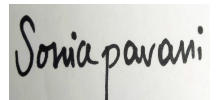
Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

---End Of The Report---



Dr.M SONIA PAVANI
MBBS, M.D (Radio-Diagnosis)
ANP20160002416KTK
Radiology

Name : Ms. TIRPEE SOY

Age : 40Y 2M 20D

UHID : AHR.0001263443

Address : Hsr Layout Bangalore Karnataka INDIA 560102

sex : Female



AHB.0001263443

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC
CREDIT PAN INDIA OP AGREEMENT

OP No: CHSROPV338411

Bill No: CHSR-OCR-73003

Date: Oct 26th, 2024, 8:35 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 (7)	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 (8)	Consultation	<input type="checkbox"/>
7	DIET CONSULTATION 3	General	<input type="checkbox"/>
8	BODY MASS INDEX (BMI) 3	General	<input type="checkbox"/>
9	ECG	Cardiology	<input type="checkbox"/>
10	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	Biochemistry	<input type="checkbox"/>
11	2 D ECHO	Cardiology	<input type="checkbox"/>
12	BLOOD GROUP ABO AND RH FACTOR	Blood Bank	<input type="checkbox"/>
13	X-RAY CHEST PA → (14)	X Ray Radiology	<input type="checkbox"/>
14	URINE GLUCOSE(FASTING)	Clinical Pathology	<input type="checkbox"/>
15	LBC PAP TEST- PAPSURE 4(2)	Histopathology	<input type="checkbox"/>
16	FITNESS BY GENERAL PHYSICIAN	Consultation	<input type="checkbox"/>
17	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 11	Biochemistry	<input type="checkbox"/>
18	GLUCOSE, FASTING	Biochemistry	<input type="checkbox"/>
19	ENT CONSULTATION → 2nd floor.	Consultation	<input type="checkbox"/>
20	LIPID PROFILE	Biochemistry	<input type="checkbox"/>
21	DENTAL CONSULTATION 26.27	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"/>

Patient Name	: Ms. TIRPEE SOY	Age	: 40Yrs 2Mths 21Days
UHID	: AHB.0001263443	OP Visit No.	: CHSROPV338411
Printed On	: 26-10-2024 01:34 PM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22E34869		

DEPARTMENT OF CARDIOLOGY

2D Echo Cardiography

Chambers

Left Ventricle : Normal in size, NO RWMA at Rest

Left Atrium : Normal

Right Ventricle : Normal

Right Atrium : Normal

Septa

IVS: Intact

IAS : Intact

Valves

Mitral Valve : Normal.

Tricuspid Valve : Normal , Trace TR, No PAH

Aortic Valve : Tricuspid, Normal mobility

Pulmonary Valve : Normal

Great Valves

Aorta : Normal

Pulmonary Artery : Normal

Ivc : Normal

Pericardium : Normal

Doppler Echocardiograph

Mitral Valve E 0.5m/sec A 0.4m/sec e/a-1.25

Aortic Valve Vmax 1.1m/sec PG 0.6mmHg

Diastolic Dysfunction None

M – Mode Measurement

Parameter	Observed	Valve Normal Range	
Aorta	20	26- 38	mm
Left Atrium	24	27-38	mm
IVS- Diastole	07	09-11	mm
Left Ventricle –Diastole	37	42-59	mm
Posterior wall-Diastole	07	09-11	mm
IVS-Systole	11	13-15	mm
Left Ventricle- Systole	25	21-40	mm
Posterior wall- Systole	07	13-15	mm
Ejection Fraction	60%	->50	%

IMPRESSION

NORMAL SIZED CARDIAC VALVES AND CHAMBERS

NO RWMA'S AT REST

NORMAL LV & RV SYSTOLIC FUNCTION LVEF – 60%

NORMAL LV DIASTOLIC FUNCTION

NO PERICARDIAL EFFUSION / VEGETATION / CLOT.

1263443

26/10/2024

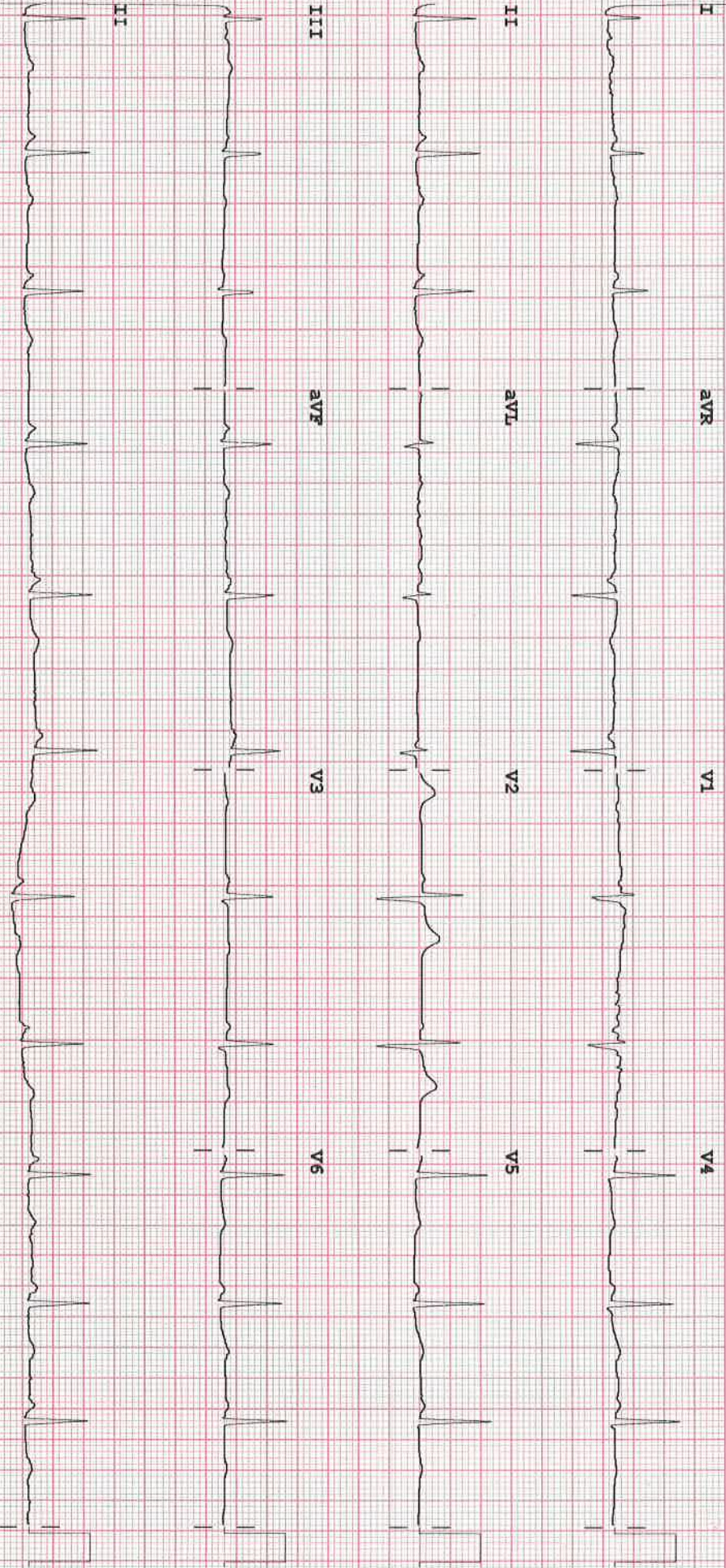
04:50:14 AM ms tirpee female

THE APOLLO CLINIC
Dept: ECG

Rate	65	SINUS RHYTHM.....	normal P axis, V-rate 50-99
RR	923	BORDERLINE T WAVE ABNORMALITIES.....	T/QRS ratio < 1/20 or flat T
PR	123	BASELINE WANDER IN LEAD(S) III, aVL, aVF	
QRSD	78		
QT	420		
QTcb	437		
QTcf	431		
--AXIS--			
P	34		
QRS	61		
T	5		

- BORDERLINE ECG -

(N)



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50 ~ 0.50 - 40 Hz W

PH090A CL P?

Tirpee Soy

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

O/E →

- Oculars 8/

med aligned. 8/

Ach

→ - OPG

= Removal of 8/


Dr. Sahu

Follow up date:

Doctor Signature

UHID : AHB.0001263443
Printed On : 27-10-2024 09:38 AM
Department : Radiology
Referred By : Self
Employee Id : 22E34869

Age : 40Yrs 2Mths 21Days
OP Visit No. : CHSROPV338411
Advised/Pres Doctor : --
Qualification : --
Registration No. : --

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA VIEW

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardio phrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

*NO SIGNIFICANT ABNORMALITY DETECTED.

---End Of The Report---

Sonia Pavanani

Dr.M SONIA PAVANI
MBBS, M.D (Radio-Diagnosis)
ANP20160002416KTK
Radiology

126344

Main Tirupree Soy
F/40yr

General
26/10/24

Height : 151	Weight : 67	BMI :	Waist Circum :
Temp :	Pulse : 78	Resp :	B.P : 114/86mm

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

O/H:- unmarried
M/H:- Regular
Lmp:- 19/10/24.
Both Breast - (N)

P/A - left
cut measurements
ABC taken

Follow up date:

[Signature]
Doctor Signature

Apollo Clinic

CONSENT FORM

Mr/Mrs/Ms Tijpee Soy Age: 40
UHID Number: 01263443 Company Name: Bank of Baroda

- 1) Employee of
- 2) Consultation will be taking on Later Coronal. ENT, etc
- 3) 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.

Patient Signature: Tijpee Soy Date:

