

Fw: Health Check up Booking Confirmed Request(bobS5946),Package Code-
PKG10000366, Beneficiary Code-304722

Manjunath Shivanand Achanur <manjunath.achanur@bankofbaroda.com>

Tue 23-01-2024 08:50

To:Koramangala Apolloclinic <koramangala@apolloclinic.com >

From: Mediwheel <wellness@mediwheel.in>

Sent: Saturday, January 20, 2024 2:37 PM

To: Manjunath Shivanand Achanur <manjunath.achanur@bankofbaroda.com>

Cc: customercare@mediwheel.in <customercare@mediwheel.in>

Subject: Health Check up Booking Confirmed Request(bobS5946),Package Code-PKG10000366, Beneficiary Code-304722

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ध्यान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर
ATTENTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CL

011-41195959

Dear **MR. ACHANUR MANJUNATH SHIVANAND,**

We are pleased to confirm your health checkup booking request with the following details.

Booking Date : 19-01-2024

Hospital Package Name : Mediwheel Full Body Annual Plus

Patient Package Name : Mediwheel Full Body Health Checkup Male Below 40

Name of Diagnostic/Hospital : Apollo Medical Centre

Address of Diagnostic/Hospital : Apollo Medical centre, Plot 51, 5th Block, Opp. Jyothi Nivas College, Koramangala - 560095

City : Bangalore

State :

Pincode : 560095

Appointment Date : 23-01-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am

Booking Status : Booking Confirmed

Member Information		
Booked Member Name	Age	Gender
Manjula	34 year	Male

Note - Please note to not pay any amount .

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

You have received this mail because your e-mail ID is registered with This is a system-generated e-mail **Arcofemi Healthcare Limited**, please don't reply to this message.

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भारत सरकार
भारत सरकार



आधार

இந்திய அரசாங்கம்
Government of India

இந்திய தனித்துவ அடையாள ஆணை
Unique Identification Authority of India

பதிவு அடையாளம் / Enrollment No. : 2829/11730/01148

To

Manjula

மஃஜுலா

W/O: Manjunath S Achanur,

sainik colony purtageri gajendragada,

VTC: GAJENDRAGAD, PO: Gajendragad,

Sub District: Ron, District: Gadag,

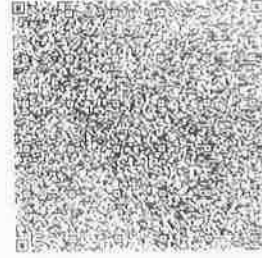
State: Karnataka, PIN Code: 582114,

Mobile: 8870777590

91990621



KF919806212FI



உங்கள் ஆதார் எண் / Your Aadhaar No. :

9023 9934 9982

எனது ஆதார், எனது அடையாளம்



இந்திய அரசாங்கம்
Government of India



Issue Date: 04/01/2015



மஃஜுலா


Manjula

பிறந்த நாள் / DOB: 05/05/1989

பெண்பால் / Female

9023 9934 9982

எனது ஆதார், எனது அடையாளம்

Name : Mrs. MANJULA Address : MYSORE Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT	Age : 34 Y Sex : F	UHID : CMYS 0000053669  OP Number : CKOROPV396729 Bill No : CKOR-OCR-80455 Date : 23.01.2024 08:59
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT)	
2	2 D ECHO <i>Dr. Mohan Murali</i>	10
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION <i>2</i>	63
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE (POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG <i>(w leads)</i>	14
12	LBC PAP TEST - PAPSURE <i>2</i>	63
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION <i>15</i>	15
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE (FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X-RAY CHEST PA	11
19	ENT CONSULTATION	23
20	FITNESS BY GENERAL PHYSICIAN	
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI)	
24	OPHTHAL BY GENERAL PHYSICIAN	BPP - 11
25	ULTRASOUND - WHOLE ABDOMEN	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

Physio - 17
 Audio - 19.

BF - 10 am
 PP - 12:30 am.

Wt - 66 kg
 Ht - 169 cm.
 pulse - 76 bts/mts
 Bp - 87/53 mmHg

email ID : manjuacharyar@gmail.com
 Mob : 99009-77499

Apollo Clinic

Consent Form

Patient Name: Manjula. M. Acharyu Age: 34
UHID Number: Company Name:

Mr/Mrs/Miss: Manjula. M. Acharyu Employee of _____

(Company) want to inform you that I am not getting the.....

Test which is a part of health check package.

Reason If any: on a medical emergency

And I claim the above statement in my full consciousness

Patient Signature: Manjula Date: 23-01-2024

OPHTHAL REPORT

NAME: manjula
AGE: 34 GENDER: MALE/FEMALE ✓

RIGHT EYE

	SPH	CYL	AXIS	VA
DV	—	-0.50	150	6/6
NV	—————			N6

LEFT EYE

	SPH	CYL	AXIS	VA
DV	—	-0.50	90	6/6
NV	—————			N6

REMARK: slg with blue block lens

DATE: 23/01/24

cha
OPTOMETRIST

BRING THIS PRESCRIPTION IN YOUR NEXT VISIT

Date : 23/1/24
MRNO :
Name : Manjula
Age/Gender : 34y

U/c
Department : OBSTETRICS & GYNAECOLOGY
Consultant : DR JYOTHI RAJESH
KMC NO-42823
Qualification : DGO, (DNB)
Consultation Timings: 9.30am to 12.00pm
Phone no: 9972044580

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

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

No gynae complaint
Mm. menses regular (14/1)
OBH - P/L 10-8 yrs LSC
Planning pregnancy - 2 1/2 yrs
Past H. nor
Family H. nor
O/E. P/A soft
P/S Gp
Vagina / @ Uterus

Follow up date:

2 weeks

Doctor Signature

PATIENT NAME	MRS. MANJULA	DATE	23/01/2024
AGE	34 YRS	SEX	FEMALE
REFERRED BY	APOLLO CLINIC KORAMANGALA	BILL NO:	1020582

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions. **Portal vein** is normal in size, course and caliber.

Gall bladder shows multiple calculi of size 7-8 mm. No evidence of wall thickening or pericholecystic fluid.

CBD is not dilated.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size, shape, contour and echopattern. No evidence of mass or focal lesions.

Right Kidney is normal in size (measures 9.1 cm in length), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.3 cm in length), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum – No significant lymphadenopathy.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Uterus: Is retroverted and normal in size, measures 6.4 x 4.1 x 4.0 cms. Myometrial and endometrial echoes are normal. **Endometrium** measures 6.0 mm.

Cervix appears bulky with a subcentimetric nabothian cysts.

Both ovaries are normal in size and echopattern.

Right ovary: measures 2.7 x 2.0 cms. **Left ovary:** measures 2.9 x 2.5 cms.

Both adnexa: Normal. No mass is seen.

There is no ascites.

IMPRESSION:

- CHOLELITHIASIS.
- BULKY CERVIX - SUGGESTIVE OF CERVICITIS.



DR. CHAATHURYA.R MD RD
Consultant Radiologist.

This is only a radiological impression and not a diagnosis. Like other investigations, radiological investigations also have limitations. Therefore radiological reports should be interpreted in correlation with clinical and pathological findings.

A Unit of Magnus Health Care & Research Centre Pvt. Ltd.

ISO 9001: 2015 Certified Diagnostic Centre | CIN: U851 10KA2007PTC042726

No.81, S T Bed Entrance, Off 80 ft. Road, 4th Block, Koramangala, Bangalore – 560034. T: 080 4291 9999

E: magnuscustomecare@gmail.com | W: www.magnusdc.com

OTHER BRANCHES AT :HSR LAYOUT : 080 2572 5191BG ROAD : 73386 67888|Hullimavu : 080 43742244 / 636623577

NAME: MRS MANJULA

AGE: 34Y

SEX: FEMALE

DATE: 23/01/24

ECHOCARDIOGRAPHY REPORT

MEASUREMENT

AO - 22 (20 – 35)mm	LIVD d – 28 (36-52)mm	IVS – 10 (06 - 11)mm
LA -22 (19- 40)mm	LVID s – 20 (23- 39)mm	PWD – 11 (06- 11)mm
EF – 60 (>50%)	RVID-24	

VALVES

Mitral Valve : Normal ,

Aortic Valve : Normal, ,

Tricuspid Valve : Normal, Trivial TR, RVSP – 20 mm

Pulmonary Valve : Normal,

CHAMBERS

Left Atrium : Normal

Right Atrium : Normal

Left Ventricle : Normal ,

Right Ventricle : Normal

SEPTAE

IVS : Intact

GREAT ARTERIES

Aorta : Normal

Pulmonary Artery : Normal

DOPPLER DATA

Mitral : E > A , 0.76/ 0.6
m/s

Aortic : Normal , 1.0 m/s

Tricuspid : Normal , 0.4 / 0.6

Pulmonary : Normal, 1.10

WALL MOTION ABNORMALITIES : No RWMA

Pericardium : Normal

FINAL DIAGNOSIS

**NORMAL LV SYSTOLIC FUNCTION
NO RWMA AT REST, LV EF - 60 %
NORMAL DIASTOLIC FUNCTION
NO OBVIOUS CLOTS/ EFFUSION/ VEGETATION**

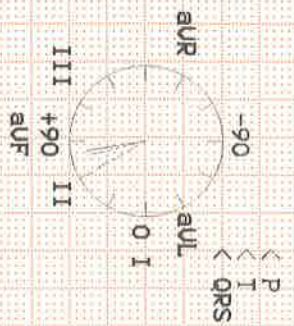

**DR. MOHAN MURALI
DNB(MED), DNB(CARDIOLOGY)
CONSULTANT CARDIOLOGIST**

Arrow CE

AGE: 34

Measurement Results:

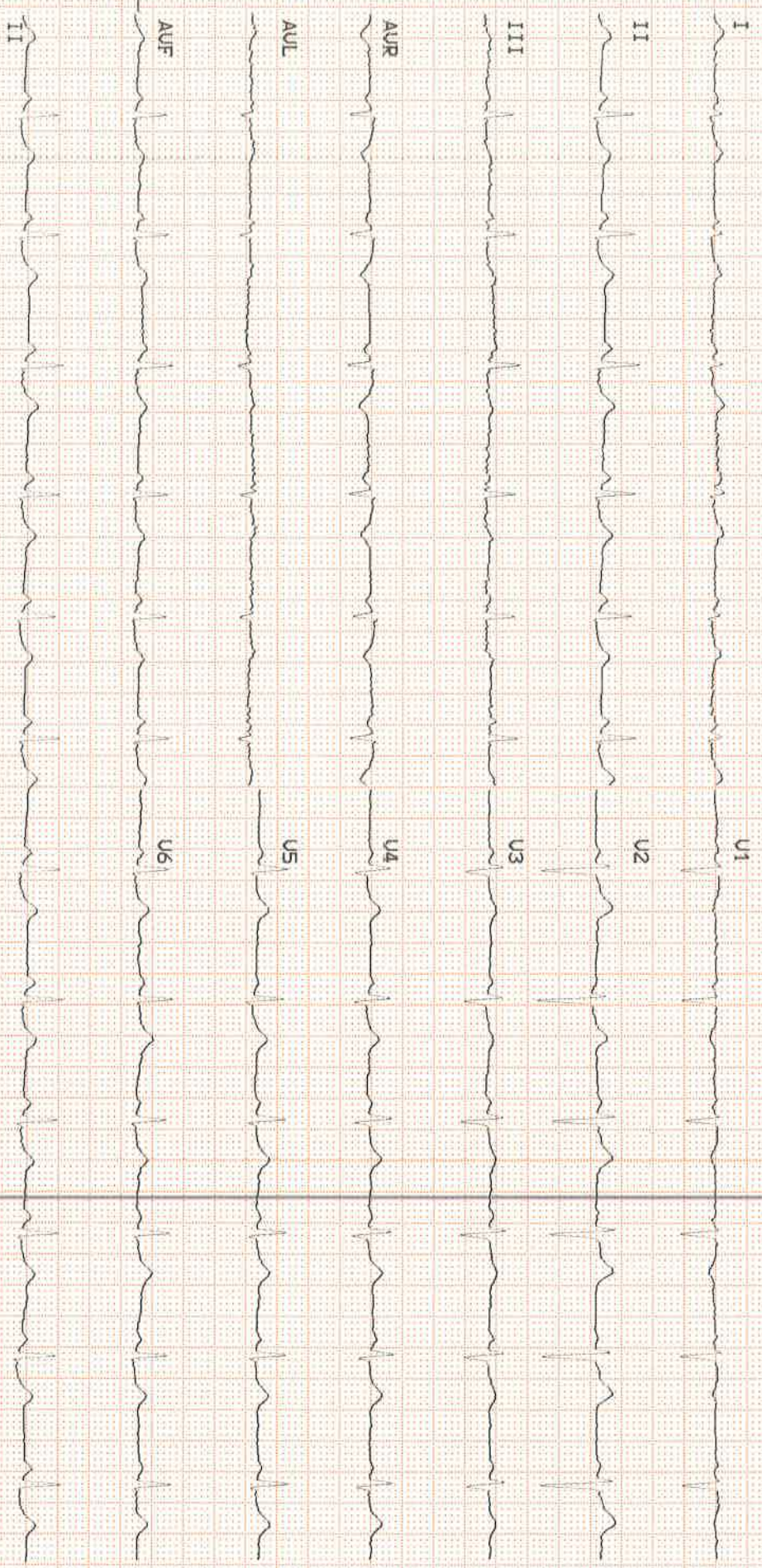
QRS	36 ms
QT/QTcB	390 / 437 ms
PR	124 ms
P	102 ms
RR/PP	798 / 805 ms
P/QRS/T	75 / 80 / 60 degrees
QT/QTcBD	56 / 63 ms
Sokolow	1.0 mV
NK	10



Interpretation:

NSR ✓

Unconfirmed report.



Patient Name	: Mrs. MANJULA	Age	: 34 Y/F
UHID	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Reported By:	: Dr. MOHAN MURALI	Conducted Date	: 23-01-2024 11:36
Referred By	: SELF		

ECG REPORT

Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 74 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

Dr MOHAN MURALI
CARDIOLOGIST

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

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

Patient Name	: Mrs. MANJULA	Age	: 34 Y F
UHID	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Reported on	: 23-01-2024 10:40	Printed on	: 23-01-2024 10:56
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.


The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION : NORMAL STUDY.

Printed on:23-01-2024 10:40

---End of the Report---

For 
Dr. VINOD P JOSEPH
MBBS, DNB, DMRD

Name: Mrs. MANJULA
Age/Gender: 34 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: KORAMANGALA_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. VIJAYA LAKSHMI M

MR No: CMYS.0000053669
Visit ID: CKOROPV396729
Visit Date: 23-01-2024 08:59
Discharge Date:
Referred By: SELF

Doctor's Signature

Name: Mrs. MANJULA
Age/Gender: 34 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: KORAMANGALA_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. MAHABALESWAR

MR No: CMYS.0000053669
Visit ID: CKOROPV396729
Visit Date: 23-01-2024 08:59
Discharge Date:
Referred By: SELF

Doctor's Signature

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Age/Gender: 34 Y/F
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Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: KORAMANGALA_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. JYOTHI RAJESH

MR No: CMYS.0000053669
Visit ID: CKOROPV396729
Visit Date: 23-01-2024 08:59
Discharge Date:
Referred By: SELF

Doctor's Signature

Patient Name	: Mrs. MANJULA	Age	: 34 Y/F
UHID	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Reported By:	: Dr. MOHAN MURALI	Conducted Date	: 23-01-2024 11:36
Referred By	: SELF		

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4. Normal P, Q, R, S, T waves and axis.
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Impression:

NORMAL RESTING ECG.

Dr MOHAN MURALI
CARDIOLOGIST

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FOR FUTURE REFERENCE IF NEEDED.

Patient Name	: Mrs. MANJULA	Age	: 34 Y/F
UHID	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Reported By:	: Dr. MOHAN MURALI	Conducted Date	: 23-01-2024 11:36
Referred By	: SELF		

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

Name: Mrs. MANJULA
Age/Gender: 34 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: KORAMANGALA_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. GAZALA ANJUM

MR No: CMYS.0000053669
Visit ID: CKOROPV396729
Visit Date: 23-01-2024 08:59
Discharge Date:
Referred By: SELF

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

Chief Complaints

COMPLAINTS:::: For General Health Checkup,

SYSTEMIC REVIEW

****Weight**

--->: Stable,

HT-HISTORY

Past Medical History

PAST MEDICAL HISTORY: Nil,

**Cancer: no,

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Doctor's Signature

Name: Mrs. MANJULA
Age/Gender: 34 Y/F
Address: MYSORE
Location: MYSORE, KARNATAKA
Doctor:
Department: GENERAL
Rate Plan: KORAMANGALA_06042023
Sponsor: ARCOFEMI HEALTHCARE LIMITED
Consulting Doctor: Dr. RIDHIMA G

MR No: CMYS.0000053669
Visit ID: CKOROPV396729
Visit Date: 23-01-2024 08:59
Discharge Date:
Referred By: SELF

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Chief Complaints

COMPLAINTS:::: For General Health Checkup,

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****Weight**

--->: Stable,

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Past Medical History

PAST MEDICAL HISTORY: Nil,

**Cancer: no,

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SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

DISCLAIMER

Disclaimer: The health checkup examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the consulting physician. Additional tests, consultations and follow up may be required in some cases.,

Doctor's Signature



Patient Name	: Mrs. MANJULA	Age/Gender	: 34 Y/F
UHID/MR No.	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Sample Collected on	:	Reported on	: 24-01-2024 11:55
LRN#	: RAD2214576	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 333529		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

SCAN DONE IN MAGNUS



Patient Name	: Mrs. MANJULA	Age/Gender	: 34 Y/F
UHID/MR No.	: CMYS.0000053669	OP Visit No	: CKOROPV396729
Sample Collected on	:	Reported on	: 23-01-2024 10:40
LRN#	: RAD2214576	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 333529		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appear normal.

Both hila are normal.

Both costophrenic and cardiophrenic angles are normal.

The cardiac and mediastinal shadows appear normal.

Bones and soft tissues appear normal.

IMPRESSION : NORMAL STUDY.

Dr. VINOD P JOSEPH
MBBS, DNB, DMRD
Radiology

Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 10:50AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 11:49AM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.6	g/dL	12-15	Spectrophotometer
PCV	35.20	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.5	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	78	fL	83-101	Calculated
MCH	25.7	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	7,800	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	55.7	%	40-80	Electrical Impedance
LYMPHOCYTES	37.6	%	20-40	Electrical Impedance
EOSINOPHILS	1.5	%	1-6	Electrical Impedance
MONOCYTES	5.2	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4344.6	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2932.8	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	117	Cells/cu.mm	20-500	Calculated
MONOCYTES	405.6	Cells/cu.mm	200-1000	Calculated
PLATELET COUNT	268000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-20	Modified Westegren method
PERIPHERAL SMEAR				

RBCs: are normocytic normochromic with few microcytes seen.

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



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



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



SIN No:BED240016412

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

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

APOLLO CLINICS NETWORK

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Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 10:50AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 11:49AM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF HAEMATOLOGY

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

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC ANEMIA.

Note: Kindly evaluate for iron deficiency status.

Kindly correlate clinically.

Result is rechecked. Kindly correlate clinically



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



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

SIN No:BED240016412

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



Dr. Shobha Emmanuel
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Consultant Pathologist



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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. Range	Method
GLUCOSE, FASTING , NAF PLASMA	86	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

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

Note:

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	93	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.

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC




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CONSULTANT BIOCHEMIST

SIN No:EDT240006914

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ESTIMATED AVERAGE GLUCOSE (eAG)	111	mg/dL	Calculated
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Comment:

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

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

Note: Dietary preparation or fasting is not required.

- HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.
- Trends in HbA1C values is a better indicator of Glycemic control than a single test.
- Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.
- Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.
- In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control
 - A: HbF >25%
 - B: Homozygous Hemoglobinopathy.
 (Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)




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Test Name	Result	Unit	Bio. Ref. Range	Method
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	205	mg/dL	<200	CHO-POD
TRIGLYCERIDES	91	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	39	mg/dL	40-60	Enzymatic Immuno-inhibition
NON-HDL CHOLESTEROL	166	mg/dL	<130	Calculated
LDL CHOLESTEROL	147.9	mg/dL	<100	Calculated
VLDL CHOLESTEROL	18.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	5.26		0-4.97	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

1. Measurements in the same patient on different days can show physiological and analytical variations.
2. NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
3. Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
4. Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
5. As per NCEP guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.
6. VLDL, LDL Cholesterol Non HDL Cholesterol, CHOL/HDL RATIO, LDL/HDL RATIO are calculated parameters when Triglycerides are below 350mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.



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Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.58	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.48	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	18	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	93.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.54	g/dL	6.6-8.3	Biuret
ALBUMIN	4.32	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.22	g/dL	2.0-3.5	Calculated
A/G RATIO	1.34		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.
- Bilirubin may be elevated.
- 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 diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:

- ALP – Disproportionate increase in ALP compared with AST, ALT.
- Bilirubin may be elevated.
- ALP elevation also seen in pregnancy, impacted by age and sex.
- To establish the hepatic origin correlation with GGT helps. If GGT elevated indicates hepatic cause of increased ALP.

3. Synthetic function impairment:



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- Albumin- Liver disease reduces albumin levels.
- Correlation with PT (Prothrombin Time) helps.



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Test Name	Result	Unit	Bio. Ref. Range	Method
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.55	mg/dL	0.51-0.95	Jaffe's, Method
UREA	10.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	4.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.30	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.00	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.83	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.1	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	107	mmol/L	101-109	ISE (Indirect)



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Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	19.00	U/L	<38	IFCC




DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SE04607257

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

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Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)
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APOLLO CLINICS NETWORK

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Karnataka- 560034

 **1860 500 7788**
www.apolloclinic.com

Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 11:29AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 02:11PM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.2	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.50	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	1.948	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
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24010758

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

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APOLLO CLINICS NETWORK

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 Karnataka- 560034


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Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 11:29AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 02:11PM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF IMMUNOLOGY

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



DR.SHIVARAJA SHETTY
M.B.B.S,M.D(Biochemistry)
CONSULTANT BIOCHEMIST

SIN No:SPL24010758

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Karnataka- 560034



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Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 11:27AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 12:46PM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.015		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
BLOOD	POSITIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	1-2	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-2	/hpf	<10	MICROSCOPY
RBC	2-3	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



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



SIN No:UR2266915

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 : Mrs.MANJULA	Collected : 23/Jan/2024 09:22AM
Age/Gender : 34 Y 8 M 18 D/F	Received : 23/Jan/2024 11:27AM
UHID/MR No : CMYS.0000053669	Reported : 23/Jan/2024 12:54PM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	Dipstick

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick



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



SIN No:UF010262

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

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 **1860 500 7788**
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Patient Name : Mrs.MANJULA	Collected : 23/Jan/2024 12:41PM
Age/Gender : 34 Y 8 M 18 D/F	Received : 24/Jan/2024 02:35PM
UHID/MR No : CMYS.0000053669	Reported : 27/Jan/2024 11:35AM
Visit ID : CKOROPV396729	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333529	

DEPARTMENT OF CYTOLOGY

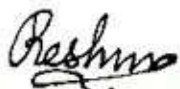
LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	1379/24
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	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 ***

Result/s to Follow:
PERIPHERAL SMEAR



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

SIN No:CS073367

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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