

Company Name	PACKAGE NAME	Booking ID	EXP NAME
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bob57034	Maddula Naga Lakshmi Deepthi
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bobE7033	MR. MADDULA PADMA SAI
Arcfemi/Mediwheel/MALE/FEMALE	ARCOFEMI - MEDIWHEEL - FULL BODY STA	UBOIE53374	T MLRUGAN
Arcfemi/Mediwheel/MALE/FEMALE	ARCOFEMI - MEDIWHEEL - FULL BODY HC \$	UBOIE53324	KAVITHA
Arcfemi/Mediwheel/MALE/FEMALE	ARCOFEMI - MEDIWHEEL - FULL BODY STA	UBOIE53268	TODIIMA SREENIVASA REDDY
Arcfemi/Mediwheel/MALE/FEMALE	ARCOFEMI - MEDIWHEEL - FULL BODY HC \$	UBOIE53268	Triveni K
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Health Ann	bobE5249	MS. LONARI ABHAYA KRISHNA
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Health Ann	bob55137	Jyoti
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bobE5136	MR. VARMA CHETAN SURESHCHANDRA
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Health Ann	bob54589	komal kumar
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bobE4588	MR. RANJAN RAVI
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Health Ann	bob53096	Mcpika
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bobE3095	MR. DHAVLE ADITYA
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Health Ann	bobE7529	MRS. MANTRI AARTI AMIT
Arcfemi/Mediwheel/MALE/FEMALE	Arcfemi Mediwheel Full Body Annual Plus	bob57530	Amrit Shikprasad Mantri



बैंक ऑफ बड़ौदा
Bank of Baroda


Aarti Amit Mantri

110650



जारीकर्ता प्राधिकारी
Issuing Authority
Chief Manager (HRM)
Pune Zone

धारक के हस्ताक्षर
Signature of Holder

Name : Mrs. AARTI MANTRI Address : PUNE ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN India OP AGREEMENT	Age: 34 Y Sex: F	UHID: CWAN.0000134542  OP Number: CWANOPV226134 Bill No : CWAN-OCR-50179 Date : 10.02.2024 09:33
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
<input checked="" type="checkbox"/>	1 GAMMA GLUTAMYL TRANSFERASE (GGT)	
<input checked="" type="checkbox"/>	2 2-D ECHO	
<input checked="" type="checkbox"/>	3 LIVER FUNCTION TEST (LFT)	
<input checked="" type="checkbox"/>	4 GLUCOSE, FASTING	
<input checked="" type="checkbox"/>	5 HEMOGRAM + PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	6 GYNAECOLOGY CONSULTATION	
<input checked="" type="checkbox"/>	7 DIET CONSULTATION	
<input checked="" type="checkbox"/>	8 COMPLETE URINE EXAMINATION	
<input checked="" type="checkbox"/>	9 URINE GLUCOSE (POST PRANDIAL)	
<input checked="" type="checkbox"/>	10 PERIPHERAL SMEAR	
<input checked="" type="checkbox"/>	11 ECG 12:00 02/12/24 12:06	
<input checked="" type="checkbox"/>	12 LBC PAP TEST- PAPSURE	
<input checked="" type="checkbox"/>	13 RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
<input checked="" type="checkbox"/>	14 DENTAL CONSULTATION	
<input checked="" type="checkbox"/>	15 GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 1:15 PM	
<input checked="" type="checkbox"/>	16 URINE GLUCOSE (FASTING)	
<input checked="" type="checkbox"/>	17 HbA1c, GLYCATED HEMOGLOBIN	
<input checked="" type="checkbox"/>	18 X-RAY CHEST PA	
<input checked="" type="checkbox"/>	19 ENT CONSULTATION	
<input checked="" type="checkbox"/>	20 FITNESS BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	21 BLOOD GROUP ABO AND RH FACTOR	
<input checked="" type="checkbox"/>	22 LIPID PROFILE	
<input checked="" type="checkbox"/>	23 BODY MASS INDEX (BMI)	
<input checked="" type="checkbox"/>	24 OPHTHAL BY GENERAL PHYSICIAN	
<input checked="" type="checkbox"/>	25 ULTRASOUND - WHOLE ABDOMEN	
<input checked="" type="checkbox"/>	26 THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

. wt - 44.0 kg
 Ht - 164 cm
 B.P - 100/70 mm/Hg.

FREE CONSULTATIONS
DENTAL / PHYSIO / AESTHETIC



CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Aarti Marbi on 13/2/2024.

After reviewing the medical history and on clinical examination it has been found that she is

	Tick
<ul style="list-style-type: none">• Medically Fit	<input checked="" type="checkbox"/>
<ul style="list-style-type: none">• Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none">• Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none">• Unfit	

Dr. Mushfiya
Medical Officer

The Apollo Clinic, (Location)

DR. MUSHFIYA BAHRAINWALA

Reg. No:- 47827

Apollo Clinic, Manowarie
NIBM Road, Kondhwa.

This certificate is not meant for medico-legal purposes

Date : 10-02-2024
MR NO : CWAN.0000134542
Name : Mrs. AARTI MANTRI
Age/ Gender : 34 Y / Female

Department : GENERAL
Doctor :
Registration No :
Qualification :

Consultation Timing: 09:32

Height : 164 cm.	Weight : 44 kg	BMI :	Waist Circum : 76
Temp :	Pulse :	Resp :	B.P : 105 / 70 mmHg

General Examination / Allergies History

2 Covid Vaccines taken

Clinical Diagnosis & Management Plan

: For AHC
no cos. at the moment.
O/E - CVS
 CVS
 Resp. - WAS
 Abd. -
Flap & Reports

Dr. Mushfiya Bahrainwala
M.B.B.S.
Reg. No.: 47527



Doctor Signature

Measurement Results:

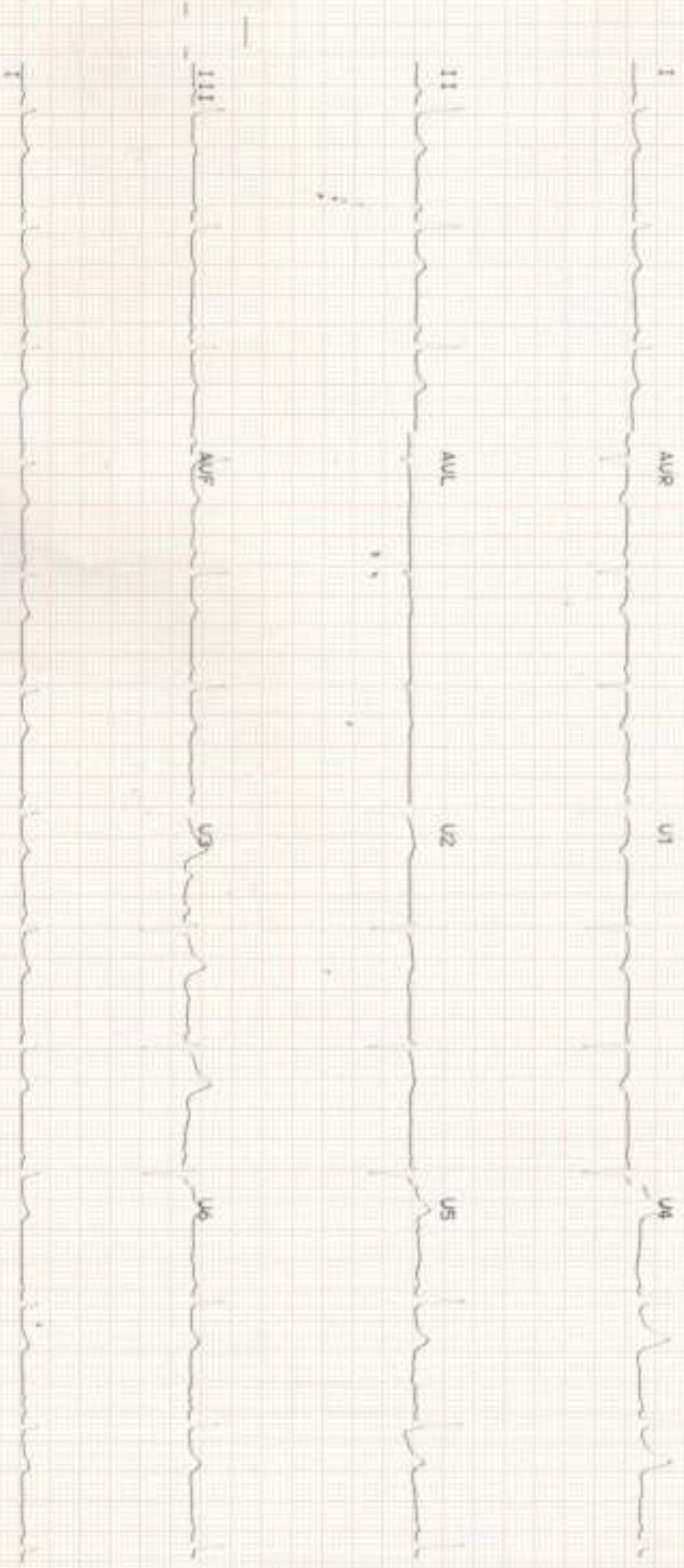
QRS	94 ms
QT/QTcB	390 / 437 ms
PR	114 ms
P	84 ms
PR/PP	796 / 795 ms
P/QRS/T	90 / 70 / 55 degrees
QT0/QTcB0	32 / 36 ms
Sokolow	1.5 mV
RX	11



Interpretation:
 short PR interval
 probably normal ECG

Dr. Mushfiya Bahraiwala
 M.B.B.S.
 Reg. No.: 47527

Unconfirmed report.



2D ECHOCARDIOGRAPHY & COLOR DOPPLER STUDY

Name : MRS.AARTI MANTRI

Age/Sex :34/F

Date : 10/02/2024.

2D Echo:-

Cardiac chamber dimensions –Normal

Wall motion abnormalities - no RWMA

LV systolic function - Normal, LVEF -60%

LV diastolic function – No LV diastolic dysfunction

Cardiac valves -

Mitral valve –Normal, minimal mitral regurgitation.

Aortic valve – Three thin leaflets, no aortic regurgitation, Aortic PG –4 mm Hg

Tricuspid valve – minimal tricuspid regurgitation, No PAH

Pulmonary valve - normal

Septae (IAS/IVS) – intact

Clot/vegetation/Pericardial effusion – No

Great Arteries (Aorta/pulmonary artery) - Normal

IVC - Normal

Measurements -

Aorta	LA	IVS	PWD	LVIDd	LVIDs	LVEF
25	30	08	08	39	28	60%

Conclusion:-

Normal chamber dimensions.

No RWMA, normal LV systolic function, LVEF – 60%

No LV Diastolic dysfunction.

Normal PA pressure.

Dr. Bhushan Bari
DNB Medicine, DNB Cardiology
Consultant and Interventional Cardiologist

PATIENT CASE SHEET



Name: Aarti montri Age: 34 Gender: F

Address: Pune

UHID / Emp Id: 134542

Ref. by Doctor

Treating Doctor

Dr. Apurva

Past Dental History: NAD

Past Medical History: NAD.

Chief Complaint(s): Regular dental checkup.

Investigation: RVG OPG CBCT

The Apollo Clinic

Wanowrie
Pune-411048

PATIENT NAME :- Aash Mante

DATE :- 10/2/24

AGE/SEX :- 34/F

UHID : .

EYE CHECK UP

COMPLETE

PREMEDICAL/OTHER

	RIGHT EYE	LEFT EYE
Far Vision	6/6 Plano	6/6 plano
Near Vision	N/6	N/6
Anterior Segment Pupil	NORMAL ✓	NORMAL
Fundus	NORMAL ✓	NORMAL
Colour Vision	NORMAL ✓	NORMAL
Iop	NORMAL NA	NORMAL
Family History/Medical History	NA	

IMPRESSION :-

Emmetropic

Advice :-

use computer glasses

Ophthalmologist



Apollo Health and Lifestyle Limited

ICD - U851107G2000PLC115819

Head Office - 125/8/87, Acharya Durbhakarji, Chaudhari, 2nd Floor, Shivajinagar, Pune-411004

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie

Online appointments: www.ahllifeclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

Patient Name : Mrs. AARTI MANTRI
UHID : CWAN.0000134542
Reported on : 12-02-2024 07:09
Adm/Consult Doctor :

Age : 34 Y F
OP Visit No : CWANOPV226134
Printed on : 12-02-2024 07:09
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Printed on:12-02-2024 07:09

---End of the Report---


Dr. SATINDER LAMBA
Dr. Satinder MBBS, DMRE
(Ex-Major) Radiology
Reg. No. 2004/02/300

Apollo Health and Lifestyle Limited

(CIN - U80110TG2006PLC115819)

Regd. Office: 1-10-00/02, Ashoka Nageshwar Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.


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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wankowli

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name	: Mrs. AARTI MANTRI	Age	: 34 Y F
UHID	: CWAN.0000134542	OP Visit No	: CWANOPV226134
Reported on	: 10-02-2024 11:50	Printed on	: 10-02-2024 11:53
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

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

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

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

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

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 measures 7.2 x 4.2 x 5.5 cms normal in size shape and echo pattern. Endometrial echo-complex appears normal and measures 6.8 mm.

Both ovaries appear normal in size, shape and echotexture.
Right ovary :2.6 x 1.7 cms Left ovary :2.8 x 1.5 cms.

No evidence of any adnexal pathology noted.
No free fluid / abdominal lymphadenopathy.

IMPRESSION:-

Apollo Health and Lifestyle Limited

ICN - URS110TG2000PLC115819

Regd. Office: 1-10-60/62, Ashoka Baghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.

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

APOLLO CLINICS NETWORK MAHARASHTRA

Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Patient Name : Mrs. AARTI MANTRI
UHID : CWAN.0000134542
Reported on : 10-02-2024 11:50
Adm/Consult Doctor :


Age : 34 Y F
OP Visit No : CWANOPV226134
Printed on : 10-02-2024 11:53
Ref Doctor : SELF

**No significant abnormality detected.
Suggest – clinical correlation.**

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

Printed on:10-02-2024 11:50

---End of the Report---


Dr. SATINDER LAMBA
(Ex-Major) **MBBS, DMRE**
Reg. No. 2004104-99
Radiology

Apollo Health and Lifestyle Limited

ICIN - U85110TG2000PLC113819
Regd. Office: 1-10-60/67, Achoka Raghupathi Chambers, 3th Floor, Begumpet, Hyderabad, Telangana - 500 016
Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apoloclinic.com | www.apoloclinic.com

APOLLO CLINICS NETWORK MAHARASHTRA
Pune (Aundh) | Kharadi | Nigdi Pradhikaran | Viman Nagar | Wanowrie

Online appointments: www.apoloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Pending Test Form

I, Mrs. Arti Mantri visiting from
Accofeil : _____ Company for health check.

UHID: - 134642

Date: - 10.02.2024.

This is a consent form to inform you that I do not wish to do this test.

Diet, ENT, con. Gynecology con.

Or will be doing their test later on _____.

Signature: - _____





Patient Name	: Mrs. AARTI MANTRI	Age/Gender	: 34 Y/F
UHID/MR No.	: CWAN.0000134542	OP Visit No	: CWANOPV226134
Sample Collected on	:	Reported on	: 12-02-2024 07:09
LRN#	: RAD2232109	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 110650		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Dr. SATINDER LAMBA
MBBS, DMRE
Radiology

Patient Name	: Mrs. AARTI MANTRI	Age/Gender	: 34 Y/F
UHID/MR No.	: CWAN.0000134542	OP Visit No	: CWANOPV226134
Sample Collected on	:	Reported on	: 10-02-2024 11:53
LRN#	: RAD2232109	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 110650		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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Right ovary :2.6 x 1.7 cms Left ovary :2.8 x 1.5 cms.

No evidence of any adnexal pathology noted.
No free fluid / abdominal lymphadenopathy.

IMPRESSION:-

No significant abnormality detected.

Suggest – clinical correlation.

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



Patient Name : Mrs. AARTI MANTRI

Age/Gender : 34 Y/F

Dr. SATINDER LAMBA
MBBS, DMRE
Radiology



Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:45AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 01:07PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

**RBC's are Normocytic Normochromic,
WBC's Eosinophilia
Platelets are Adequate
No Abnormal cells/hemoparasite seen.**



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:BED240033650

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:45AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 01:07PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

DEPARTMENT OF HAEMATOLOGY

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



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:BED240033650

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:45AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 05:23PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	B			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:BED240033650

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 12:06PM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 12:54PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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	84	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.



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist



SIN No:PLF02103716

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 01:12PM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 07:35PM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 07:55PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	78	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.



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:PLP1417860

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:42AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 01:53PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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
HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA				
HBA1C, GLYCATED HEMOGLOBIN	5.5	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	111	mg/dL		Calculated

Comment:

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

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

Note: Dietary preparation or fasting is not required.

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



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:EDT240014853

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:54AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 12:37PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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
LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	169	mg/dL	<200	CHO-POD
TRIGLYCERIDES	53	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	68	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	101	mg/dL	<130	Calculated
LDL CHOLESTEROL	90.57	mg/dL	<100	Calculated
VLDL CHOLESTEROL	10.59	mg/dL	<30	Calculated
CHOL / HDL RATIO	2.49		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

- Measurements in the same patient on different days can show physiological and analytical variations.
- NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.
- Primary prevention algorithm now includes absolute risk estimation and lower LDL Cholesterol target levels to determine eligibility of drug therapy.
- 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.
- 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.
- 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.

DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:SE04625233

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:54AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 12:37PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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
LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.47	mg/dL	0.3–1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.36	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11.76	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	52.15	U/L	30-120	IFCC
PROTEIN, TOTAL	7.56	g/dL	6.6-8.3	Biuret
ALBUMIN	4.34	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.22	g/dL	2.0-3.5	Calculated
A/G RATIO	1.35		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'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:

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



DR. Sanjay Ingle
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Consultant Pathologist

SIN No:SE04625233

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Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
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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
RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.54	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	20.40	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	2.34	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.12	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.81	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138.77	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.7	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103.63	mmol/L	101-109	ISE (Indirect)



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Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:54AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 12:37PM
Visit ID : CWANOPV226134	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. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	17.34	U/L	<38	IFCC



DR. Sanjay Ingle
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Consultant Pathologist

SIN No:SE04625233

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 11:58AM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 01:20PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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)	1.31	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	11.29	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	2.360	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. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist

SIN No:SPL24022160

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 02:22PM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 02:39PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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	1.010		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	3 - 4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2 - 3	/hpf	<10	MICROSCOPY
RBC	3 - 4	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:UR2279616

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab





Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 01:12PM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 07:49PM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 08:01PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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



DR. Sanjay Ingle
M.B.B.S, M.D(Pathology)
Consultant Pathologist



SIN No:UPP016538

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 09:54AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 10/Feb/2024 02:16PM
UHID/MR No : CWAN.0000134542	Reported : 10/Feb/2024 02:38PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

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(FASTING)	NEGATIVE		NEGATIVE	Dipstick



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant-Pathologist

SIN No:UF010526

This test has been performed at Apollo Health and Lifestyle ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name : Mrs.AARTI MANTRI	Collected : 10/Feb/2024 10:26AM
Age/Gender : 34 Y 6 M 9 D/F	Received : 11/Feb/2024 02:15PM
UHID/MR No : CWAN.0000134542	Reported : 13/Feb/2024 01:16PM
Visit ID : CWANOPV226134	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 110650	

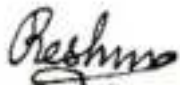
DEPARTMENT OF CYTOLOGY

LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

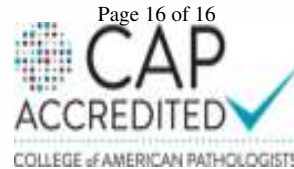
	CYTOLOGY NO.	2739/24
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Inflammatory cells, predominantly neutrophils. Negative for intraepithelial lesion/malignancy.
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	FUNGAL ORGANISMS MORPHOLOGICALLY CONSISTENT WITH CANDIDA SPP
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY WITH CANDIDIASIS

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

*** End Of Report ***



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



SIN No:CS074174

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