

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of M/S = KIRAN KUMARI on 09-09-23

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

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

Dr. [Signature]
Medical Officer
Apollo Clinic, (Aundh, Pune)

APOLLO CLINIC AUNDH
 Dr. RISHIKA SINGH
 MBBS
 General Physician
 Reg. No. 2020/11/6537

This certificate is not meant for medico-legal purposes

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 01:48PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 04:05PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	13.3	g/dL	12-15	Spectrophotometer
PCV	40.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.51	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	88.9	fL	83-101	Calculated
MCH	29.5	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	13.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,420	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	61.8	%	40-80	Electrical Impedance
LYMPHOCYTES	26.4	%	20-40	Electrical Impedance
EOSINOPHILS	2.1	%	1-6	Electrical Impedance
MONOCYTES	9.7	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3349.56	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1430.88	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	113.82	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	525.74	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	185000	cells/cu.mm	150000-410000	Electrical Impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	7	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				
RBC NORMOCYTIC NORMOCHROMIC WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN.				



SIN No:BED230217678

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 01:48PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 03:44PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



SIN No:BED230217678

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 01:39PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 02:50PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	103	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.



SIN No:PLF02025379

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

Patient Name : M/SKIRAN KUMARI	Collected : 09/Sep/2023 11:27AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 11/Sep/2023 07:44PM
UHID/MR No : CAUN.0000136757	Reported : 11/Sep/2023 08:17PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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)	65	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.

Ref: Marks medical biochemistry and clinical approach



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Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	4.9	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	94	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)

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Visit ID : CAUNOPV159501	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
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SIN No:EDT230083171

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:51PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 06:55PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	167	mg/dL	<200	CHO-POD
TRIGLYCERIDES	108	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	48	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	119	mg/dL	<130	Calculated
LDL CHOLESTEROL	97.06	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.68	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.48		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 350 mg/dl. When Triglycerides are more than 350 mg/dl LDL cholesterol is a direct measurement.

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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
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SIN No:SE04476771

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:51PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 06:56PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	0.65	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.50	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	12.72	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	15.8	U/L	<35	IFCC
ALKALINE PHOSPHATASE	95.63	U/L	30-120	IFCC
PROTEIN, TOTAL	7.55	g/dL	6.6-8.3	Biuret
ALBUMIN	4.43	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.12	g/dL	2.0-3.5	Calculated
A/G RATIO	1.42		0.9-2.0	Calculated



SIN No:SE04476771

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Emp/Auth/TPA ID : PUC80249338	

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	0.50	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	20.71	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	9.7	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.28	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.22	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	2.72	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	141.07	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.6	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	105.17	mmol/L	101-109	ISE (Indirect)



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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	12.07	U/L	<38	IFCC



SIN No:SE04476771

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:07PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 04:54PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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)	9.96	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	3.132	µIU/mL	0.34-5.60	CLIA

Comment:

Note:

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

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

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone 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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 10:13AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:07PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 04:54PM
Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes			
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma			



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Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:20PM
UHID/MR No : CAUN.0000136757	Reported : 09/Sep/2023 05:21PM
Visit ID : CAUNOPV169501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

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	CLEAR		CLEAR	Visual
pH	<5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	>1.025		1.002-1.030	Bromothymol Blue
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2 - 3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1 - 2	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



SIN No:UR2181303

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

Patient Name : M/sKIRAN KUMARI	Collected : 09/Sep/2023 11:27AM
Age/Gender : 28 Y 6 M 0 D/F	Received : 09/Sep/2023 04:20PM
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Visit ID : CAUNOPV159501	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : PUC80249338	

DEPARTMENT OF CLINICAL PATHOLOGY

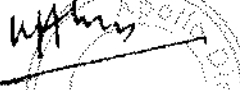
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

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


***** End Of Report *****

Results to Follow:


LBC PAP TEST (PAPSURE)



DR. MANISH T. AKARE
M.B.B.S, MD(Path.)
Consultant Pathologist



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist



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



SIN No:UPP015441.UF009447


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

Measurement Results:

QRS : 86 ms
 QT/QTcB : 380 / 420 ms
 PR : 118 ms
 P : 96 ms
 RR/PP : 818 / 820 ms
 P/QRS/T : 50 / 50 / 10 degrees
 QTd/QTcBd : 30 / 33 ms
 Sokolow : 2.6 mV
 NK : 10

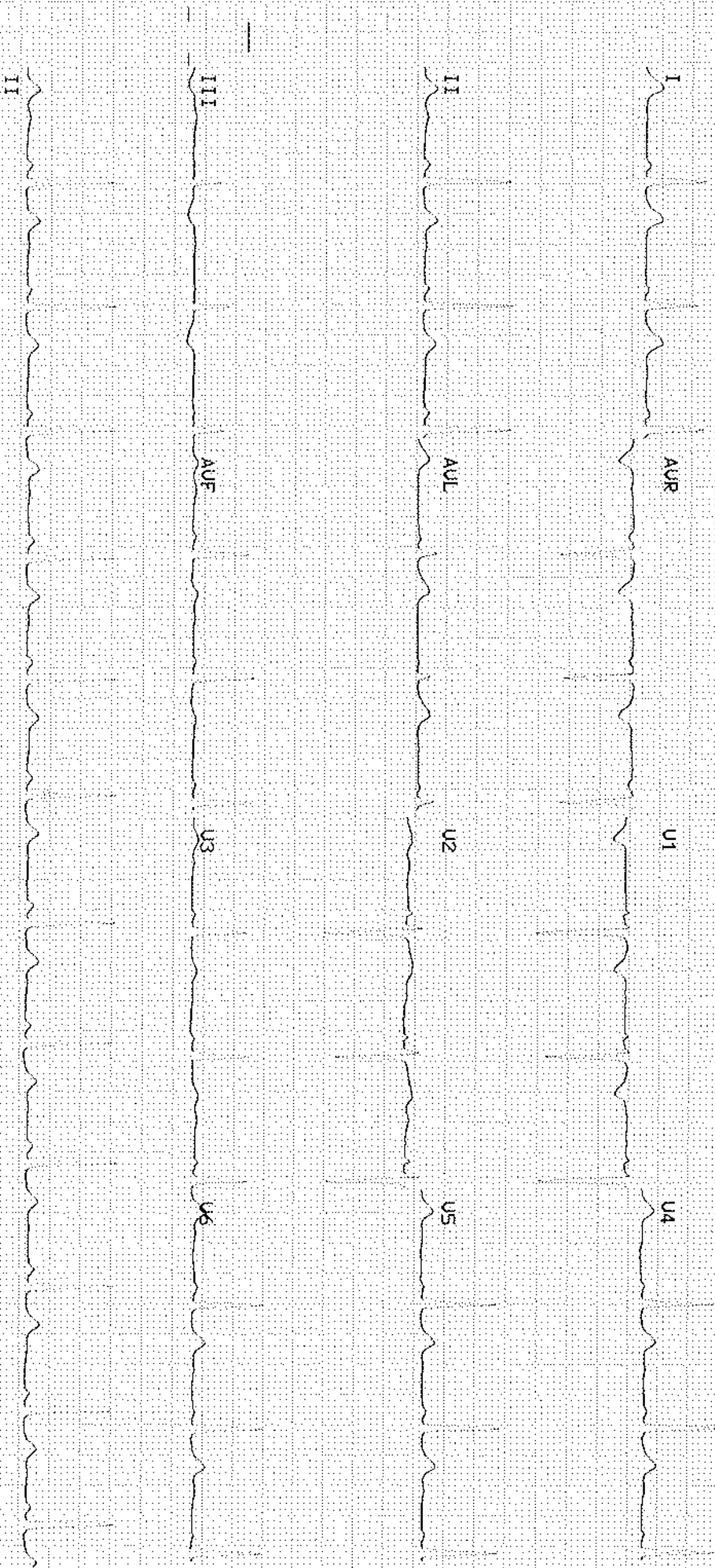
Interpretation:

< P
 < T
 < QRS
 -90
 aVR
 aVL
 aVF
 0 I
 0 I
 III +90
 aVF 10

no significant HR 73 bpm
 abnormality


Reg. No. 2020/11/6537

Unconfirmed report.



Patient Name : M/s KIRAN KUMARI

Age : 28 Y F

UHID : CAUN.0000136757

OP Visit No : CAUNOPV159501

Reported on : 09-09-2023 15:37

Printed on : 09-09-2023 15:37

Adm/Consult Doctor :

Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

No evidence of any focal lesion.

Trachea is central in position.

Costophrenic angles are clear.

Cardio thoracic ratio is normal.

Cardiac silhouette is well maintained.

Mediastinal and hilar regions are normal.

Both diaphragmatic domes are well visualized and normal.

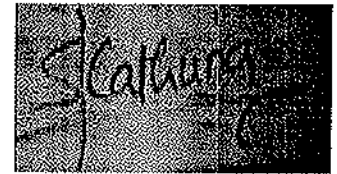
Visualized skeleton and soft tissues around thoracic cage appear normal.

COMMENT: No significant abnormality seen.

Please correlate clinically.

Printed on:09-09-2023 15:37

---End of the Report---



Dr. SUHAS SANJEEV KATHURIA
MBBS,DMRE, RADIOLOGY
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

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

Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohi.com | www.apollohi.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.KIRAN KUMARI
REFERRED BY :- ARCOFEMI
UHID :-136757

AGE :-28YRS/ F
DATE :- 09.09.2023

2D ECHO CARDIOGRAPHY & COLOR DOPPLER REPORT

- Mitral Valve : Normal.
- Aortic Valve : Normal.
- Tricuspid Valve : Normal.
- Pulmonary Valve : Normal.

RWMA: Absent.

RA : Normal
RV : Normal
IVS : Intact
IAS : Intact
Pericardial effusion : No
IVC : Normal.

AO – 21 mm, LA – 27 mm, LVIDd – 42 mm, LVISd – 27 mm, IVS – 10 mm, PW – 9 mm.

CONCLUSION:

- Normal size cardiac chambers.
- No RWMA.
- Good LV function LVEF-60%.
- No AR/MR/TR No PAH.
- No e/o clot, thrombus, vegetation or pericardial effusion.

DR.SATYAJEET SURYAWANSHI
(CONSULTANT CARDIOLOGIST)

P/S : Normal echo does not rule out coronary artery disease.

Patient Name : M/s KIRAN KUMARI
UHID : CAUN.0000136757
Reported on : 09-09-2023 14:40
Adm/Consult Doctor :

Age : 28 Y F
OP Visit No : CAUNOPV159501
Printed on : 09-09-2023 14:41
Ref Doctor : SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

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

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

Pancreas appears normal in 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 C M differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney - 11.5 x 4.6 cm.

Left kidney - 11.4 x 5.2 cm.

Urinary Bladder :- is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size measuring 7.9 x 3.2 x 4.7 cm. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 5.3 mm.

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Patient Name : M/s KIRAN KUMARI
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Both ovaries- appear normal in size, shape and echo pattern.

Right ovary - 2.8 x 1.8 cm.

Left ovary - 3.1 x 1.8 cm.

No obvious free fluid or lymphadenopathy is noted in the abdomen .

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.

Printed on:09-09-2023 14:40

---End of the Report---



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

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Dr. Anvita Patel
PT (ortho)

Clinic 9730480632

PHYSIOTHERAPY SCREENING FORM

Date

1 ABOUT YOU

Name Kvian Kumari
Age Gender M F Other

Occupation

Desk Work

Active / On the Move

Stay-at-home Parent

Retired

Mobile Number

Email

2 PAIN HISTORY

Have you undergone physiotherapy any time in the past?

Yes

No

Have you recently felt any physical pain or discomfort? (in the last 3 months)

Yes

No

If yes, please fill the next section.

FOR OFFICE USE: If any answer is "Yes", please refer to Physiotherapist for review.

3 PAIN INFORMATION

Indicate your area of pain:

Neck

Upper / Mid-Back

Lower Back / Buttock

Elbow

Wrist / Hand

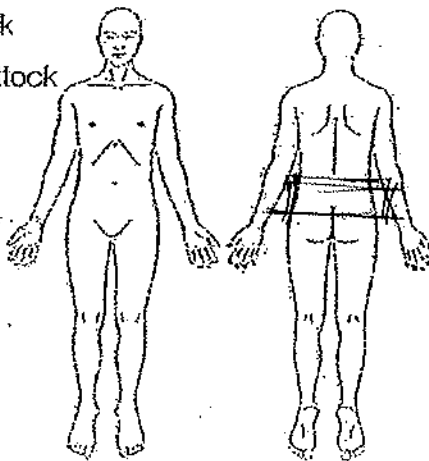
Ankle / Foot

Shoulder

Hip

Knee

Legs



For how long have you had this pain?

How will you rate your pain level on a scale of 1 to 10? (Circle your pain level)

1 2 3 4 5 6 7 8 9 10

Least painful

Most painful

What treatment are you undergoing for the same?



PATIENT NAME :- Kisan Kumar

9/09/23.

AGE :- 28 yr

MARRIED/UNMARRIED :- married : 6 yr

MENSTRUAL HISTORY :- cycle - regular

MENARCHE :-

PMC :-

LMP :- 19/08/23

OBSTETRIC HISTORY :- G P L A Para (1)

PAST HISTORY :- DM / HT / TB / ALLERGIES / ASTHMA / SURGERIES - No

FAMILY HISTORY :- DM / HT / IHD / MALIGNANCIES - No

Patient Name : Kiran. kumari
 AGE/Sex : 28/F

Date : 09.09.23
 UHID/ MR NO : 136757

	RIGHT EYE	LEFT EYE
FAR VISION	C VA 6/6	C VA 6/6
NEAR VISION	N/6	N/6
ANTERIOR SEGMENT PUPIL	MD	MD
COLOUR VISION	(N)	(N)
FAMILY / MEDICAL HISTORY	_____	_____

Impression: WNL

Optometrist:-
 Mr. Ritesh Sutnase

Date : 09-09-2023
MR NO : CAUN.0000136757

Department : GENERAL
Doctor :

Name : M/s KIRAN KUMARI

Registration No :

Age/ Gender : 28 Y / Female

Qualification :

Consultation Timing: 08:30

BP	160
HR	61
RR	110/70
Temp	72
SpO2	90
HR	92