

Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 10:14AM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 11:09AM
Visit ID : CKONOPV586046	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333145375811	

**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
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**HEMOGRAM , WHOLE BLOOD-EDTA**

<b>HAEMOGLOBIN</b>	12.6	g/dL	12-15	Spectrophotometer
PCV	39.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.74	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	<b>82</b>	fL	83-101	Calculated
MCH	<b>26.6</b>	pg	27-32	Calculated
MCHC	32.2	g/dL	31.5-34.5	Calculated
R.D.W	<b>14.5</b>	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,300	cells/cu.mm	4000-10000	Electrical Impedence

**DIFFERENTIAL LEUCOCYTIC COUNT (DLC)**

NEUTROPHILS	63	%	40-80	Electrical Impedence
LYMPHOCYTES	30	%	20-40	Electrical Impedence
EOSINOPHILS	02	%	1-6	Electrical Impedence
MONOCYTES	05	%	2-10	Electrical Impedence
BASOPHILS	00	%	<1-2	Electrical Impedence

**ABSOLUTE LEUCOCYTE COUNT**

NEUTROPHILS	3969	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1890	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	126	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	315	Cells/cu.mm	200-1000	Electrical Impedence
<b>PLATELET COUNT</b>	263000	cells/cu.mm	150000-410000	Electrical impedence

<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>	11	mm at the end of 1 hour	0-20	Modified Westergren
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**PERIPHERAL SMEAR**

RBC NORMOCYTIC NORMOCHROMIC  
WBC WITHIN NORMAL LIMITS  
PLATELETS ARE ADEQUATE ON SMEAR  
NO HEMOPARASITES SEEN

SIN No:BED230141552

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**APOLLO CLINICS NETWORK**

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

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Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 02:39PM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 05:01PM
Visit ID : CKONOPV586046	Status : Final Report
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**BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA**

BLOOD GROUP TYPE	B			Microplate technology
Rh TYPE	Negative			Microplate technology

SIN No:HA05187603

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Visit ID : CKONOPV586046	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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GLUCOSE, FASTING , NAF PLASMA	85	mg/dL	70-100	GOD - POD
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**Comment:**

**As per American Diabetes Guidelines**

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

SIN No:PLF01987777

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Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 10:42AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 11:20AM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 11:30AM
Visit ID : CKONOPV586046	Status : Final Report
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Test Name	Result	Unit	Bio. Ref. Range	Method
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<b>GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA</b>	114	mg/dL	70-140	GOD - POD
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**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

SIN No:PLP1340716

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Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 12:08PM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 06:42PM
Visit ID : CKONOPV586046	Status : Final Report
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Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	117	mg/dL		Calculated

**Comment:**

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. 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. Fructosamine may be used as an alternate measurement of glycemic control

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Test Name	Result	Unit	Bio. Ref. Range	Method
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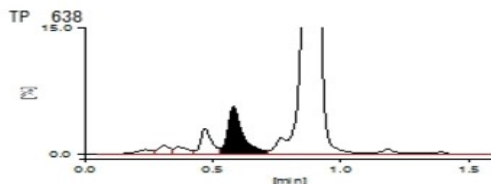
Chromatogram Report

HLC72368 V5.28.1 2023-06-20 12:58:00  
 ID EDT230056584  
 Sample No. 06200081 SL 0003 - 08  
 Patient ID  
 Name  
 Comment

CALIB			
Name	%	Time	Area
A1A	0.5	0.24	6.71
A1B	0.6	0.31	8.84
F	0.7	0.37	9.34
LA1C+	1.8	0.47	25.30
SA1C	5.7	0.58	62.02
A0	92.6	0.88	1294.03
H-V0			
H-V1			
H-V2			

Total Area 1406.24

**HbA1c 5.7 %** **IFCC 39 mmol/mol**  
 HbA1 6.8 % HbF 0.7 %



20-06-2023 12:58:03 APOLLO

1 / 1

APOLLO DIAGNOSTICS GLOBAL  
BALANAGER



SIN No:EDT230056584

Apollo Health and Lifestyle Limited, Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	197	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	149	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	59	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	<b>138</b>	mg/dL	<130	Calculated
LDL CHOLESTEROL	<b>108.2</b>	mg/dL	<100	Calculated
VLDL CHOLESTEROL	29.8	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.34		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 can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.

SIN No:SE04400573

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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	26	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	28.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	86.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.10	g/dL	6.3-8.2	Biuret
ALBUMIN	3.70	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.09		0.9-2.0	Calculated

SIN No:SE04400573

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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.60	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	22.60	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	10.6	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.70	mg/dL	2.5-6.2	Uricase
CALCIUM	10.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	<b>132</b>	mmol/L	135-145	Direct ISE
POTASSIUM	4.5	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	<b>97</b>	mmol/L	98 - 107	Direct ISE

SIN No:SE04400573

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Emp/Auth/TPA ID : 333145375811	

**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
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	16.00	U/L	12-43	Glycylglycine Nitoranalide

SIN No:SE04400573

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)

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**APOLLO CLINICS NETWORK**

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

Address:  
The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,  
Hyderabad, Telangana, India - 500032



Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 10:14AM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 11:47AM
Visit ID : CKONOPV586046	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333145375811	

**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
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.13	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.21	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	3.872	µIU/mL	0.34-5.60	CLIA

**Comment:**

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

**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



Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 10:14AM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 11:16AM
Visit ID : CKONOPV586046	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333145375811	

**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
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**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	3-4	/hpf	0-5	Microscopy
EPITHELIAL CELLS	1-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

SIN No:UR2131761

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Address: The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur, Hyderabad, Telangana, India - 500032



Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 08:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 10:14AM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 11:15AM
Visit ID : CKONOPV586046	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333145375811	

**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

SIN No:UPP014937,UF008787

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Address:  
The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,  
Hyderabad, Telangana, India - 500032



Patient Name : Mrs.PREETI VARUN	Collected : 20/Jun/2023 11:43AM
Age/Gender : 33 Y 10 M 10 D/F	Received : 20/Jun/2023 04:03PM
UHID/MR No : CKON.0000411475	Reported : 20/Jun/2023 07:39PM
Visit ID : CKONOPV586046	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 333145375811	

DEPARTMENT OF CYTOLOGY

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


LBC PAP TEST (PAPSURE) , LBC FLUID

	CYTOLOGY NO.	10388/23
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	<b>SPECIMEN TYPE</b>	CONVENTIONAL SMEAR
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	PRESENT WITH ENDOCERVICAL CELLS
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Negative for intraepithelial lesion/malignancy.
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHEIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

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

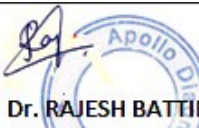
Result/s to Follow:  
PERIPHERAL SMEAR




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



Dr.Sukumar Sannidhi  
MD(Path)  
Consultant Pathologist



Dr. RAJESH BATTINA  
PhD. (Biochemistry)  
Consultant Biochemist



Dr Sowjanya  
MBBS,MD(Pathology)  
Consultant Pathologist

SIN No:CS064531

Apollo Health and Lifestyle Limited, Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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**Patient Name** : Mrs. Preeti Varun

**Age/Gender** : 33 Y/F

**UHID/MR No.** : CKON.0000411475

**OP Visit No** : CKONOPV586046

**Sample Collected on** :

**Reported on** : 20-06-2023 14:49

**LRN#** : RAD2026648

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 333145375811

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**DEPARTMENT OF RADIOLOGY**

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**X-RAY CHEST PA**

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

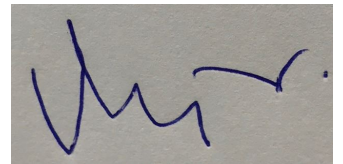
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**CONCLUSION :**

No obvious abnormality seen



**Dr. VIJAYA KUMAR M**  
**MBBS, DMRD**  
Consultant Radiologist

<b>Patient Name</b>	: Mrs. Preeti Varun	<b>Age/Gender</b>	: 33 Y/F
<b>UHID/MR No.</b>	: CKON.0000411475	<b>OP Visit No</b>	: CKONOPV586046
<b>Sample Collected on</b>	:	<b>Reported on</b>	: 20-06-2023 12:34
<b>LRN#</b>	: RAD2026648	<b>Specimen</b>	:
<b>Ref Doctor</b>	: SELF		
<b>Emp/Auth/TPA ID</b>	: 333145375811		

**DEPARTMENT OF RADIOLOGY**

**ULTRASOUND - WHOLE ABDOMEN**

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

**Gall bladder** is distended normal. 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 CM differentiation are maintained.

Right kidney measures 101 x 38 mm.

Left kidney measures 102 x 40 mm. calculus of size 3.8 mm is seen.

**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 measures 62 x 52 x 34 mm. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 6 mm. No intra/extra uterine gestational sac seen.

**Both ovaries** appear normal in size, shape and echotexture.

Right ovary measures 27 x 16 mm. Left ovary measures 28 x 17 mm.

**IMPRESSION:-**

**\*\*\*MILD FATTY CHANGES IN LIVER.**

**\*\*\* LEFT RENAL CALCULUS.**



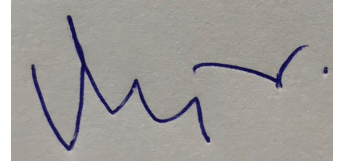
**Patient Name** : Mrs. Preeti Varun

**Age/Gender** : 33 Y/F

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**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.



**Dr. VIJAYA KUMAR M**  
MBBS, DMRD  
Consultant Radiologist



To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	PREETI VARUN
DATE OF BIRTH	10-08-1989
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	17-06-2023
BOOKING REFERENCE NO.	23J121611100062018S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. KUMAR PRADEEP
EMPLOYEE EC NO.	121611
EMPLOYEE DESIGNATION	CREDIT MONITORING
EMPLOYEE PLACE OF WORK	HYDERABAD,ZO HYDERABAD
EMPLOYEE BIRTHDATE	25-08-1982

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **15-06-2023** till **31-03-2024**.The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))