

Patient Name : Mrs.MANISHA SUHASKUMAR MESHRAM
Age/Gender : 25 Y 1 M 13 D/F
UHID/MR No : STAR.0000057932
Visit ID : STAROPV62032
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
Received : 12/Aug/2023 12:18PM
Reported : 12/Aug/2023 02:17PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Methodology : Microscopic
RBC : Mild Hypochromasia, Mild Anisocyte
WBC : Normal in number, morphology and distribution. No abnormal cells seen
Platelets : Adequate in Number
Parasites : No Haemoparasites seen
IMPRESSION : Mild Hypochromasia, Mild Anisocyte blood picture
Note/Comment : Please Correlate clinically



Patient Name : Mrs.MANISHA SUHASKUMAR MESHRAM	Collected : 12/Aug/2023 08:26AM
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DEPARTMENT OF HAEMATOLOGY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	10.3	g/dL	12-15	Spectrophotometer
PCV	32.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.45	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	74	fL	83-101	Calculated
MCH	23.2	pg	27-32	Calculated
MCHC	31.5	g/dL	31.5-34.5	Calculated
R.D.W	16.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,100	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	57	%	40-80	Electrical Impedance
LYMPHOCYTES	36	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3477	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2196	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	122	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	305	Cells/cu.mm	200-1000	Electrical Impedance

PLATELET COUNT	397000	cells/cu.mm	150000-410000	Electrical impedance
ERYTHROCYTE SEDIMENTATION RATE (ESR)	18	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR

Methodology : Microscopic

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Platelets : Adequate in Number

Parasites : No Haemoparasites seen

IMPRESSION : Mild Hypochromasia, Mild Anisocyte blood picture

Note/Comment : Please Correlate clinically



SIN No:BED230190437

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

Address:

156, Famous Cine Labs, Behind Everest Building, Tardeo (Mumbai Central), Mumbai, Maharashtra
Ph: 022 4332 4500

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UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 03:20PM
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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



SIN No:BED230190437

Patient Name : Mrs.MANISHA SUHASKUMAR MESHRAM	Collected : 12/Aug/2023 03:25PM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 03:59PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 04:40PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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	91	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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	75	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



Patient Name : Mrs.MANISHA SUHASKUMAR MESHRAM	Collected : 12/Aug/2023 08:26AM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 04:04PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 06:24PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	108	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.

- A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 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.
- 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



SIN No:EDT230074245

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UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 02:50PM
Visit ID : STAROPV62032	Status : Final Report
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Emp/Auth/TPA ID : 207162259666	

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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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	168	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	108	mg/dL	<150	
HDL CHOLESTEROL	39	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	129	mg/dL	<130	Calculated
LDL CHOLESTEROL	107.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.31		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.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.20	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.10	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	72.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.80	g/dL	6.7-8.3	BIURET
ALBUMIN	4.90	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.69		0.9-2.0	Calculated



SIN No:SE04449703

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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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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE	0.57	mg/dL	0.4-1.1	ENZYMATIC METHOD
UREA	12.60	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	5.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.40	mg/dL	4.0-7.0	URICASE
CALCIUM	9.60	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.90	mg/dL	2.6-4.4	PNP-XOD
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98-107	Direct ISE



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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	20.00	U/L	16-73	Glycylglycine Kinetic method



SIN No:SE04449703

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Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 11:15AM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 01:44PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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	0.67-1.81	ELFA
Thyroxine (T4, TOTAL)	6.78	µg/dL	4.66-9.32	ELFA
Thyroid Stimulating Hormone (TSH)	4.370	µIU/mL	0.25-5.0	ELFA

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



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Visit ID : STAROPV62032	Status : Final Report
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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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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



SIN No:UR2164812

Patient Name : Mrs.MANISHA SUHASKUMAR MESHARAM	Collected : 12/Aug/2023 03:00PM
Age/Gender : 25 Y 1 M 13 D/F	Received : 13/Aug/2023 08:36PM
UHID/MR No : STAR.0000057932	Reported : 16/Aug/2023 08:23PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

DEPARTMENT OF CYTOLOGY

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

LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

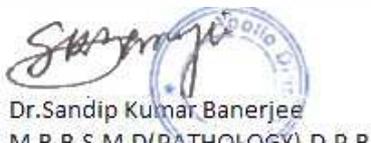
	CYTOLOGY NO.	13597/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Superficial and intermediate squamous epithelial cells with benign morphology. Negative for intraepithelial lesion/ malignancy
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

*** End Of Report ***



DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



Dr. Sandip Kumar Banerjee
M.B.B.S, M.D (PATHOLOGY), D.P.B
Consultant Pathologist



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



SIN No:CS066536

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

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

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DEPARTMENT OF CYTOLOGY

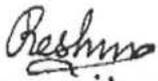
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	13597/23
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

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*** End Of Report ***



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

Page 1 of 1



SIN No:CS066536

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

Apollo Spectra Hospitals

156, Famous Cine Labs, Behind
Everest Building, Tardeo,
Mumbai, Maharashtra 400034



Patient Name: Mausha M. Age: 25

Address: Mumbai Date: 12/8/2023

h

- Scaling → Rs 2250

h

Signature

Dr. Rinal Modi B.D.S (Mumbai)

Dental Surgeon

Reg. No. : A -28591

M: 87792 56365 / 98922 90876

E:doctorrinal@gmail.com

Specialists in Surgery

OUT- PATIENT RECORD

Date : 12/8/23
MRNO : 57932
Name : Manisha Meshram
Age/Gender :
Mobile No : 7020172073
Passport No :
Aadhar number :

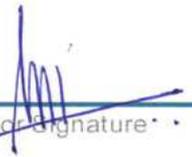
254/R

Pulse : 80	B.P : 100/70	Resp : 22	Temp :
Weight : 52.6	Height : 160	BMI : 20.5	Waist Circum : 76 cm

General Examination / Allergies History

Clinical Diagnosis & Management Plan

Married, Nonvegetarian
Sleep: Normal
No addiction
B/B: Normal
Moderately Active
No Allergy mc: G/23days.
FH: Father: DM

Doctor Signature: 

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DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Methodology : Microscopic
 RBC : Mild Hypochromasia, Mild Anisocyte
 WBC : Normal in number, morphology and distribution. No abnormal cells seen
 Platelets : Adequate in Number
 Parasites : No Haemoparasites seen
IMPRESSION : Mild Hypochromasia, Mild Anisocyte blood picture
 Note/Comment : Please Correlate clinically



Patient Name : Mrs.MANISHA SUHASKUMAR MESHAM
Age/Gender : 25 Y 1 M 13 D/F
UHID/MR No : STAR.0000057932
Visit ID : STAROPV62032
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
Received : 12/Aug/2023 12:18PM
Reported : 12/Aug/2023 02:17PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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

HAEMOGLOBIN	10.3	g/dL	12-15	Spectrophotometer
PCV	32.80	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.45	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	74	fL	83-101	Calculated
MCH	23.2	pg	27-32	Calculated
MCHC	31.5	g/dL	31.5-34.5	Calculated
R.D.W	16.4	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,100	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	57	%	40-80	Electrical Impedance
LYMPHOCYTES	36	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	05	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3477	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2196	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	122	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	305	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	397000	cells/cu.mm	150000-410000	Electrical impedance

ERYTHROCYTE SEDIMENTATION RATE (ESR)	18	mm at the end of 1 hour	0-20	Modified Westergren
--------------------------------------	----	-------------------------	------	---------------------

PERIPHERAL SMEAR

Methodology : Microscopic

RBC : Mild Hypochromasia, Mild Anisocyte

WBC : Normal in number, morphology and distribution. No abnormal cells seen

Platelets : Adequate in Number

Parasites : No Haemoparasites seen

IMPRESSION : Mild Hypochromasia, Mild Anisocyte blood picture

Note/Comment : Please Correlate clinically



TOUCHING LIVES

Patient Name : Mrs.MANISHA SUHASKUMAR MESHAM
Age/Gender : 25 Y 1 M 13 D/F
UHID/MR No : STAR.0000057932
Visit ID : STAROPV62032
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
Received : 12/Aug/2023 12:18PM
Reported : 12/Aug/2023 03:20PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination



Patient Name : Mrs.MANISHA SUHASKUMAR MESHARAM	Collected : 12/Aug/2023 03:25PM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 03:59PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 04:40PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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	91	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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	75	mg/dL	70-140	GOD - POD
--	----	-------	--------	-----------

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



TOUCHING LIVES

Patient Name : Mrs.MANISHA SUHASKUMAR MESHAM
Age/Gender : 25 Y 1 M 13 D/F
UHID/MR No : STAR.0000057932
Visit ID : STAROPV62032
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
Received : 12/Aug/2023 04:04PM
Reported : 12/Aug/2023 06:24PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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	5.4	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	108	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



TOUCHING LIVES

Patient Name : Mrs.MANISHA SUHASKUMAR MESHARAM
Age/Gender : 25 Y 1 M 13 D/F
UHID/MR No : STAR.0000057932
Visit ID : STAROPV62032
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
Received : 12/Aug/2023 12:13PM
Reported : 12/Aug/2023 02:50PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	168	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	108	mg/dL	<150	
HDL CHOLESTEROL	39	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	129	mg/dL	<130	Calculated
LDL CHOLESTEROL	107.4	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.31		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.



Patient Name : Mrs.MANISHA SUHASKUMAR MESHRAM	Collected : 12/Aug/2023 08:26AM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 12:13PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 02:50PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.20	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.10	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	72.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.80	g/dL	6.7-8.3	BIURET
ALBUMIN	4.90	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.90	g/dL	2.0-3.5	Calculated
A/G RATIO	1.69		0.9-2.0	Calculated



TOUCHING LIVES

Patient Name : Mrs.MANISHA SUHASKUMAR MESHARAM
 Age/Gender : 25 Y 1 M 13 D/F
 UHID/MR No : STAR.0000057932
 Visit ID : STAROPV62032
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 207162259666

Collected : 12/Aug/2023 08:26AM
 Received : 12/Aug/2023 12:13PM
 Reported : 12/Aug/2023 02:50PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

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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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.57	mg/dL	0.4-1.1	ENZYMATIC METHOD
UREA	12.60	mg/dL	17-48	Urease
BLOOD UREA NITROGEN	5.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	3.40	mg/dL	4.0-7.0	URICASE
CALCIUM	9.60	mg/dL	8.4-10.2	CPC
PHOSPHORUS, INORGANIC	3.90	mg/dL	2.6-4.4	PNP-XOD
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.6	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98-107	Direct ISE



TOUCHING LIVES

Patient Name : Mrs.MANISHA SUHASKUMAR MESHARAM	Collected : 12/Aug/2023 08:26AM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 12:13PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 02:50PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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	20.00	U/L	16-73	Glycylglycine Kinetic method



Patient Name : Mrs.MANISHA SUHASKUMAR MESHAM	Collected : 12/Aug/2023 08:26AM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 11:15AM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 01:44PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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)	1.13	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	6.78	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	4.370	µIU/mL	0.25-5.0	ELFA

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.MANISHA SUHASKUMAR MESHARAM	Collected : 12/Aug/2023 08:26AM
Age/Gender : 25 Y 1 M 13 D/F	Received : 12/Aug/2023 02:13PM
UHID/MR No : STAR.0000057932	Reported : 12/Aug/2023 04:35PM
Visit ID : STAROPV62032	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 207162259666	

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	6.0		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRlich
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS

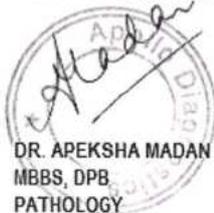
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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

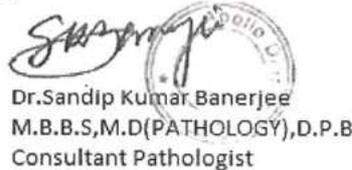
*** End Of Report ***

Result/s to Follow:

LBC PAP TEST (PAPSURE)



DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



Dr.Sandip Kumar Banerjee
M.B.B.S.,M.D(PATHOLOGY),D.P.B
Consultant Pathologist

Page 11 of 11



SIN No:UR2164812

Manisha MeSwam HR 67 bpm

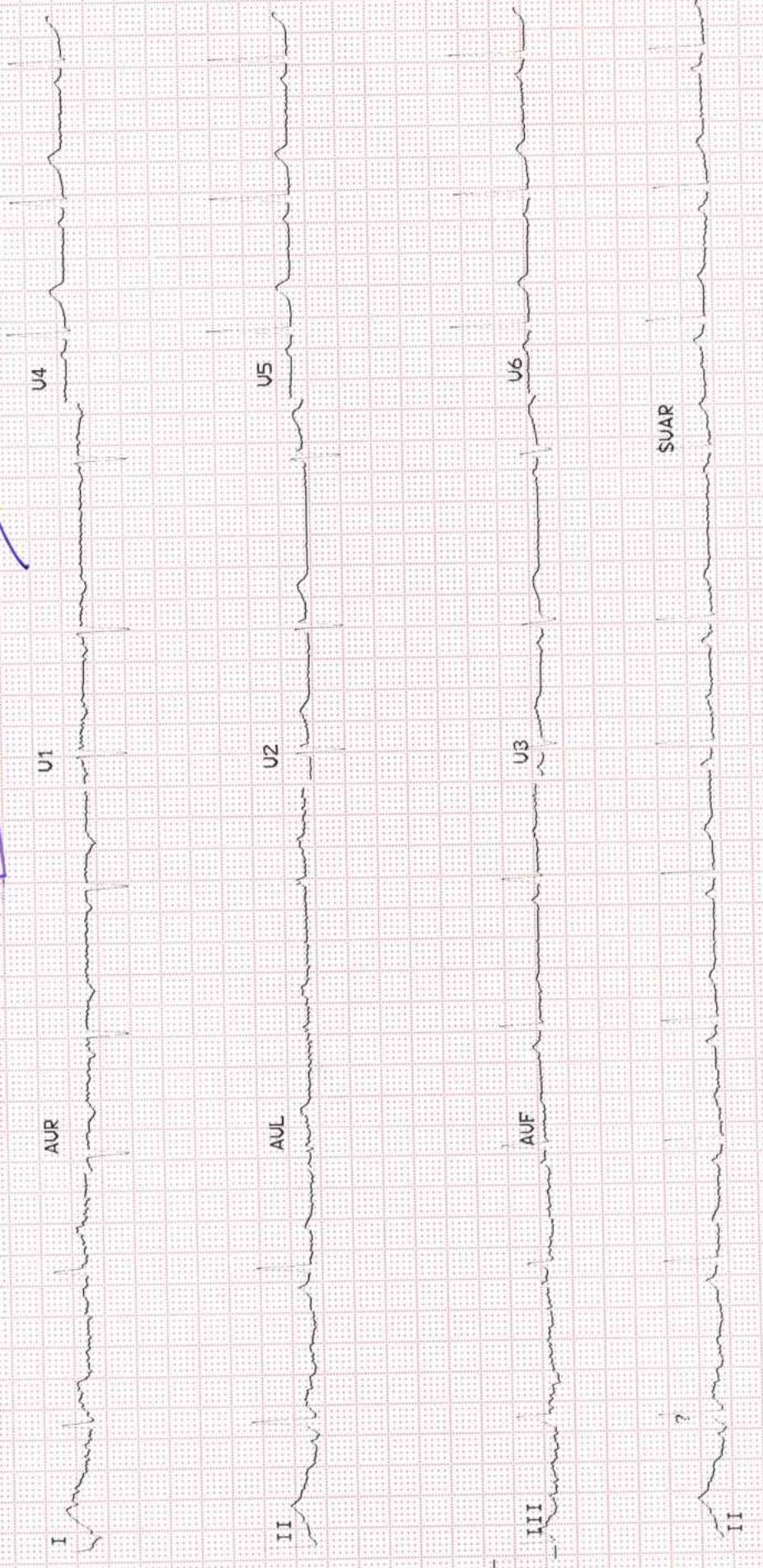


Measurement Results:
 QRS : 82 ms
 QT/QTcB : 406 / 132 ms
 PR : 132 ms
 P : 100 ms
 RR/PP : 882 / 880 ms
 P/QRS/T : 65 / 55 / 10 degrees
 QTd/QTcBd : 52 / 55 ms
 Sokolow : 2.0 mV
 NK : 9

Interpretation:
 RSR' pattern
 probably normal ECG

Freemrite R0008
Dr. (Mrs.) CHHAYA P. VAJA
 M.D. (MUM)
 Physician & Cardiologist
 Reg. No. 55842

Unconfirmed report.



Specialists in Surgery

Patient Name	: Mrs. Manisha Suhaskumar Meshram	Age	: 25 Y F
UHID	: STAR.0000057932	OP Visit No	: STAROPV62032
Reported on	: 12-08-2023 13:24	Printed on	: 12-08-2023 13:25
Adm/Consult Doctor	:	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 .

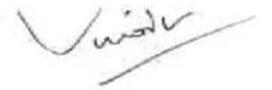
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Printed on:12-08-2023 13:24

---End of the Report---



Dr. VINOD SHETTY
Radiology

Name : Mrs. Manisha Meshram
Age : 25 Year(s)

Date : 12/08/2023
Sex : Female
Visit Type : OPD

ECHO Cardiography

Comments:

Normal cardiac dimensions.
Structurally normal valves.
No evidence of LVH.
Intact IAS/IVS.
No evidence of regional wall motion abnormality.
Normal LV systolic function (LVEF 60%).
No diastolic dysfunction.
Normal RV systolic function.
No intracardiac clots / vegetation/ pericardial effusion.
No evidence of pulmonary hypertension. PASP=30mmHg.
IVC 12 mm collapsing with respiration.

Final Impression:

NORMAL 2DECHOCARDIOGRAPHY REPORT.


DR. CHHAYA P. VAJA. M. D. (MUM)
NONINVASIVE CARDIOLOGIST

Specialists in Surgery

Patient Name : **MRS. MANISHA MESHARAM**
Ref. By : **HEALTH CHECK UP**

Date : **12-08-2023**

Age : **25 years**

SONOGRAPHY OF ABDOMEN AND PELVIS

- LIVER** : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.
- GALL BLADDER** : The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.
- PANCREAS** : The pancreas is normal in size and echotexture. No focal mass lesion is seen.
- SPLEEN** : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.
- KIDNEYS** : The **RIGHT KIDNEY** measures 10.0 x 3.8 cms and the **LEFT KIDNEY** measures 10.1 x 4.0 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.
- The para-aortic & iliac fossa regions appear normal. There is no free fluid or any lymphadenopathy seen in the abdomen.
- URINARY BLADDER** : The urinary bladder distends well and is normal in shape and contour. No intrinsic lesion or calculus is seen in it. The bladder wall is normal in thickness.
- UTERUS** : The uterus is anteverted & it appears normal in size, shape and echotexture. It measures 7.4 x 4.3 x 3.5 cms. Normal myometrial & endometrial echoes are seen. Endometrial thickness is 8.8 mms. No focal mass lesion is noted within the uterus.
- OVARIES** : Both ovaries reveal normal size, shape and echopattern. Right ovary measures 2.7 x 1.6 cms. Left ovary measures 2.6 x 1.7 cms. There is no free fluid seen in cul de sac.

IMPRESSION : Normal Ultrasound examination of the Abdomen and Pelvis.

Report with compliments.


DR. VINOD V. SHETTY
MD, D.M.R.D.
CONSULTANT SONOLOGIST.

APOLLO SPECIALTY HOSPITALS PRIVATE LIMITED

(Formerly known as Nova Specialty Hospitals Private Limited)

CIN: U85100KA2009PTC049961

Registered Office : #7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Opp. Ameerpet Metro Station, Ameerpet, Hyderabad, Telangana, Pin-500038.

BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

EYE REPORT

Name: Mrs Manisha Meshram

Date: 12/08/2023

Age / Sex: 25 yrs / F

Ref No.:

Complaint: No ocular do
No w/o SB / DA

Examination

Spectacle Rx
V_r 6/9
6/9

Near U & N₆

	Right Eye							
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance								
Read								

Remarks: Color U & near

Medications: As of near

Trade Name	Frequency	Duration

Follow up: Further & near

Consultant:



DR. TEJAL SONI
MBBS, MD, DGO, DFP, FCPS,
OBSTETRICIAN & GYNAECOLOGIST
REG. NO. 2005/02/01015

OUT- PATIENT RECORD

Date : 12/8/23.
MRNO :
Name : Manisha Meshram
Age/Gender : 25 yrs
Mobile No :
Passport No :
Aadhar number :

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

General Examination / Allergies
History

Itching in vulvo-
vaginal area
1 week ago.

MH - 3-6d Keg
30d - mod
- PLL

OH - Nil

MS - 7 months

PH - Nil

PH - father - Dm.
Grandfather - oral Ca.

Clinical Diagnosis & Management Plan

o/E

Cx
vag

1 (H)

pap smear taken

LMP - 3/8/23

Dr. Tejal Soni

DR. TEJAL SONI
MBBS, MD, DGO, DFP, FCPS,
OBSTETRICIAN & GYNAECOLOGIST
REG. NO. 2005/02/01015

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BENGALURU | CHENNAI | DELHI | JAIPUR | KANPUR | MUMBAI | PUNE

ID 0
Age 25

Manisha

Height 160cm
Gender Female

Date 12. 8. 2023
Time 08:56:40

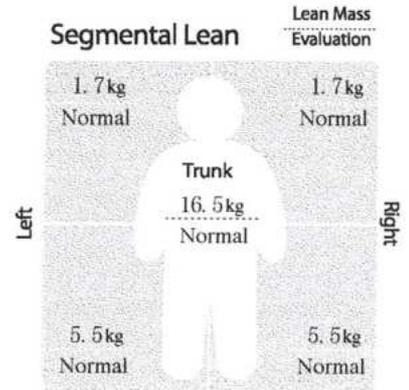
APOLLO SPECTRA HOSPITAL

Body Composition

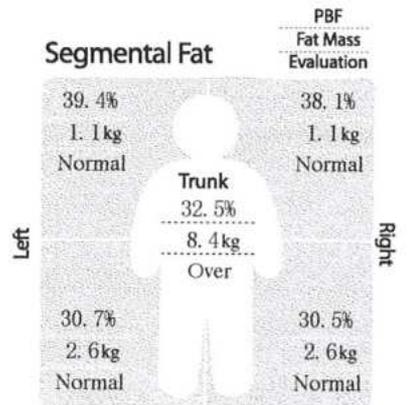
	Under	Normal	Over	UNIT%	Normal Range
Weight	40 55 70 85	100 115 130 145	160 175 190 205		45.7 ~ 61.8
Muscle Mass Skeletal Muscle Mass	60 70 80 90	100 110 120 130	140 150 160 170		20.3 ~ 24.9
Body Fat Mass	20 40 60 80	100 160 220 280	340 400 460 520		10.8 ~ 17.2
TBW Total Body Water	26.3 kg (27.4 ~ 33.5)		FFM Fat Free Mass	35.7 kg (34.9 ~ 44.6)	
Protein	6.9 kg (7.3 ~ 9.0)		Mineral*	2.52 kg (2.53 ~ 3.10)	

*Mineral is estimated.

Segmental Lean



Segmental Fat



*Segmental Fat is estimated.

Obesity Diagnosis

	Value	Normal Range
BMI Body Mass Index (kg/m ²)	20.5	18.5 ~ 25.0
PBF Percent Body Fat (%)	32.1	18.0 ~ 28.0
WHR Waist-Hip Ratio	0.90	0.75 ~ 0.85
BMR Basal Metabolic Rate (kcal)	1142	1157 ~ 1332

Nutritional Evaluation

Protein	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Deficient
Mineral	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Deficient
Fat	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Deficient <input type="checkbox"/> Excessive

Weight Management

Weight	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Over
SMM	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Under	<input type="checkbox"/> Strong
Fat	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Over

Obesity Diagnosis

BMI	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Over
		<input type="checkbox"/> Extremely Over	
PBF	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over
WHR	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over

Muscle-Fat Control

Muscle Control	+ 5.7 kg	Fat Control	- 4.5 kg	Fitness Score	70
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Impedance

Z	RA	LA	TR	RL	LL
20kHz	427.0	439.2	31.6	332.9	337.2
100kHz	388.7	401.3	27.9	303.5	307.2

* Use your results as reference when consulting with your physician or fitness trainer.

Exercise Planner

Plan your weekly exercises from the followings and estimate your weight loss from those activities.

Energy expenditure of each activity (base weight: 52.6 kg / Duration: 30min. / unit: kcal)					
Walking	Jogging	Bicycle	Swim	Mountain Climbing	Aerobic
105	184	158	184	171	184
Table tennis	Tennis	Football	Oriental Fencing	Gate ball	Badminton
119	158	184	263	100	119
Racket ball	Tae-kwon-do	Squash	Basketball	Rope jumping	Golf
263	263	263	158	184	93
Push-ups development of upper body	Sit-ups abdominal muscle training	Weight training backache prevention	Dumbbell exercise muscle strength	Elastic band muscle strength	Squats maintenance of lower body muscle

• How to do

1. Choose practicable and preferable activities from the left.
2. Choose exercises that you are going to do for 7 days.
3. Calculate the total energy expenditure for a week.
4. Estimate expected total weight loss for a month using the formula shown below.

• Recommended calorie intake per day

1500 kcal

*Calculation for expected total weight loss for 4 weeks: **Total energy expenditure (kcal/week) X 4weeks ÷ 7700**



भारत सरकार
Government of India



Download Date: 10/09/2020



मनीषा जयप्रकाश सोनवणे
Manisha Jayprakash Sonwane
जन्म तारीख/DOB: 29/08/1998
पहिला/ FEMALE

Issue Date: 22/07/2019

2071 6225 9666
VID : 9152 2683 1940 8573

माझे आधार, माझी ओळख

Patient Name	: Mrs. Manisha Suhaskumar Meshram	Age/Gender	: 25 Y/F
UHID/MR No.	: STAR.0000057932	OP Visit No	: STAROPV62032
Sample Collected on	:	Reported on	: 12-08-2023 13:25
LRN#	: RAD2071170	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 207162259666		

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. VINOD SHETTY
Radiology

Patient Name	: Mrs. Manisha Suhaskumar Meshram	Age/Gender	: 25 Y/F
UHID/MR No.	: STAR.0000057932	OP Visit No	: STAROPV62032
Sample Collected on	:	Reported on	: 12-08-2023 12:47
LRN#	: RAD2071170	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 207162259666		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER : The liver is normal in size, shape & echotexture. No focal mass lesion is seen. The intrahepatic biliary tree & venous radicles appear normal. The portal vein and CBD appear normal.

GALL BLADDER : The gall bladder is normal in size with a normal wall thickness and there are no calculi seen in it.

PANCREAS : The pancreas is normal in size and echotexture. No focal mass lesion is seen.

SPLEEN : The spleen is normal in size and echotexture. No focal parenchymal mass lesion is seen. The splenic vein is normal.

KIDNEYS : The **RIGHT KIDNEY** measures 10.0 x 3.8 cms and the **LEFT KIDNEY** measures 10.1 x 4.0 cms in size. Both kidneys are normal in shape and echotexture. There is no evidence of hydronephrosis or calculi seen on either side.

The para-aortic & iliac fossa regions appear normal. There is no free fluid or any

lymphadenopathy seen in the abdomen.

URINARY **The urinary bladder distends well and is normal in shape and contour No intrinsic**

BLADDER: lesion or calculus is seen in it. The bladder wall is normal in thickness.

UTERUS : The uterus is anteverted & it appears normal in size, shape and echotexture. It measures 7.4 x 4.3 x 3.5 cms. Normal myometrial & endometrial echoes are seen. Endometrial thickness is 8.8 mms. No focal mass lesion is noted within the uterus.

OVARIES : Both ovaries reveal normal size, shape and echopattern. Right ovary measures 2.7 x 1.6 cms. Left ovary measures 2.6 x 1.7 cms. There is no free fluid seen in cul de.

IMPRESSION : **Normal Ultrasound examination of the Abdomen and Pelvis.**

Patient Name : Mrs. Manisha Suhaskumar Meshram

Age/Gender : 25 Y/F



Dr. VINOD SHETTY
Radiology

Customer Pending Tests

ENT and Diet consultation pending as doctor was on emergency leave, scheduled for 16th August 2023

16/08/2023 - Pending

investigations were
scheduled for today but

customer was unable to

visit.