

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Mrs. Kusum Roy on 11/09/2023

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.....<u>B.S.L - F ↑ HbA1C = 5.7% (Prediabetes)</u></p> <p>2.....<u>Sr. ALP ↑</u></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. Review after _____ recommended 	
<ul style="list-style-type: none"> Unfit 	

Dr. Samruddhi D. Jagdale
Dr. ~~MBBS~~
Medical Officer
Reg. No. 2021097453
Apollo Clinic, Kharadi

This certificate is not meant for medico-legal purposes

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@apollohl.com | www.apollohl.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

Date : 09-09-2023
 MR NO : CKHA.0000068660
 Name : Mrs. Kusum Roy
 Age/ Gender : 52 Y / Female

Department : GENERAL
 Doctor :
 Registration No :
 Qualification :

Consultation Timing: 07:29	Weight : 63	BMI : 23	Waist Circum : 95 ¹⁰³
Height : 161	Pulse : 87	Resp : 22	B.P : 141/79
Temp : 97			

General Examination / Allergies
History

Adv. :-
 - Vit. B12
 - Vit. D3

Clinical Diagnosis & Management Plan

Present complains - No
 Comorbidity - hearing problem for B/L ear
 Allergies - Nil
 Surgical H/O - Lt. ear operated twice
 Family H/O - Father } HTN
 Mother }
 Addiction - Nil
 Mixed diet
 OE
 CVS-
 CNS- } NAD
 P/A-
 Chest-
 H/O covid infection - No
 Vaccinated with - 2 doses

Follow up date:

Doctor Signature

POWER PRESCRIPTION

NAME: *Mrs Kusum Roy*

GENDER: *M/F*

DATE: *9-9-23*

AGE: *52*

UHID: *68660*

RIGHT EYE

LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	<i>+1.00</i>			<i>6/9</i>
NEAR	<i>+2.00</i>			

	SPH	CYL	AXIS	VISION
DISTANCE	<i>+0.75</i>			<i>6/9</i>
NEAR	<i>+2.00</i>			

INSTRUCTIONS:

SIGNATURE 

Apollo Health and Lifestyle Limited

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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Apollo Clinic

CONSENT FORM

Patient Name: Kosum Roy Age: 52 yrs

UHID Number: Company Name: Bank of Baroda

I Mr./Mrs./Ms

Employee of

(Company) Want to inform you that I am **not interested** / **Postpone** in getting

- 1) Pap test
- 2)
- 3)
- 4)
- 5)

Tests done which is a part of my routine health check package.

And I claim the above statement in my full consciousness.

Patient Signature: [Signature]

Date: 9/9/2023

S. No.	Company Name	PACKAGE NAME	Booking	EMP-NAME	AGE	GENDER	EMAIL	CONTACT NO	Appointment Date
1	Arcofemi/Mediwheel/ MALE/FEMALE	Full Body Annual Plus Male Above 50 2D ECHO (Metro)	bobE45425	MR. ROY ASHOK KUMAR	54	Male	ashokroy.bobb@g mail.com	9890271001	09-09-23
2	Arcofemi/Mediwheel/ MALE/FEMALE	Full Body Annual Plus Check Advanced Female 2D ECHO	bobS45423	kusum roy	49	Female	ashokroy.bobb@g mail.com	9890271001	09-09-23



भारत सरकार



आधार

भारतीय विशिष्ट ओळख प्राधिकरण

भारत सरकार
Unique Identification Authority of India
Government of India

नोंदविण्याचा क्रमांक / Enrollment No 1189/60023/33615

To,
कुसुम अशोक रॉय
Kusum Ashok Kumar Roy
Sr. No. 165/1, Gurudwara Colony
Main Road
Near Disha Cloth Store Lohegaon
Pune City
Lohogaon Pune City Pune
Maharashtra 411047
9766656837

Ref: 1406 / 10A / 129830 / 129861 / P



SH760861182FT



आपला आधार क्रमांक / Your Aadhaar No. :

7751 5375 1372

आधार - सामान्य माणसाचा अधिकार



भारत सरकार
Government of India



कुसुम अशोक रॉय
Kusum Ashok Kumar Roy
जन्म तारीख / DOB : 25/12/1973
स्त्री / Female



7751 5375 1372

आधार - सामान्य माणसाचा अधिकार

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: ROY, KUSUM
Patient ID: 68660
Height: 161 cm
Weight: 63 kg

DOB: 05.10.1971
Age: 51 yrs
Gender: Female
Race:

Study Date: 09.09.2023
Test Type: Treadmill Stress Test
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: AMRUTA

Medications:
NO

Medical History:
NO

Reason for Exercise Test:
--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed [km/h]	Grade [%]	HR [bpm]	BP [mmHg]	Comment
PRETEST	SUPINE	00:29	0.00	0.30	72		
	STANDING	00:16	0.00	0.30	73		
	HYPERV.	00:22	0.00	0.30	80		
	WARM-UP	02:35	1.60	0.00	96		
EXERCISE	STAGE 1	03:00	2.70	10.00	109	135/90	
	STAGE 2	03:00	4.00	12.00	133	140/95	
	STAGE 3	00:22	5.40	14.00	141		
RECOVERY		03:04	0.00	0.30	79	140/95	

The patient exercised according to the BRUCE for 6:21 min:s, achieving a work level of Max. METS: 8.20. The resting heart rate of 71 bpm rose to a maximal heart rate of 146 bpm. This value represents 86 % of the maximal, age-predicted heart rate. The resting blood pressure of --/-- mmHg, rose to a maximum blood pressure of 140/95 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

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Conclusions

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Exercise Stress Test is negative for reversible myocardial ischemia.

Cardiologist


DR ARVIND PATIL
MD (Medicine) AFMC
Consultant (Internal Medicine) &
Diabetologist
MMC Regn # 58971

BRUCE: Exercise Time 06:21
 Max HR: 146 bpm 86 % of max predicted 169 bpm HR at rest: 71
 Max BP: 140/95 mmHg Max RPP: 20440 mmHg* bpm
 Maximum Workload: 8.20 METS
 Max. ST: -0.06 mV, 1.13 mV/s in III; EXERCISE STAGE 3 6:22
 Arrhythmia: PSVC:3

ST/HR index: 0.64 μ V/bpm
 HR reserve used: 71 %
 HR recovery: 28 bpm
 VE recovery: 0 VE/min
 ST/HR hysteresis: 0.015 mV (V6)

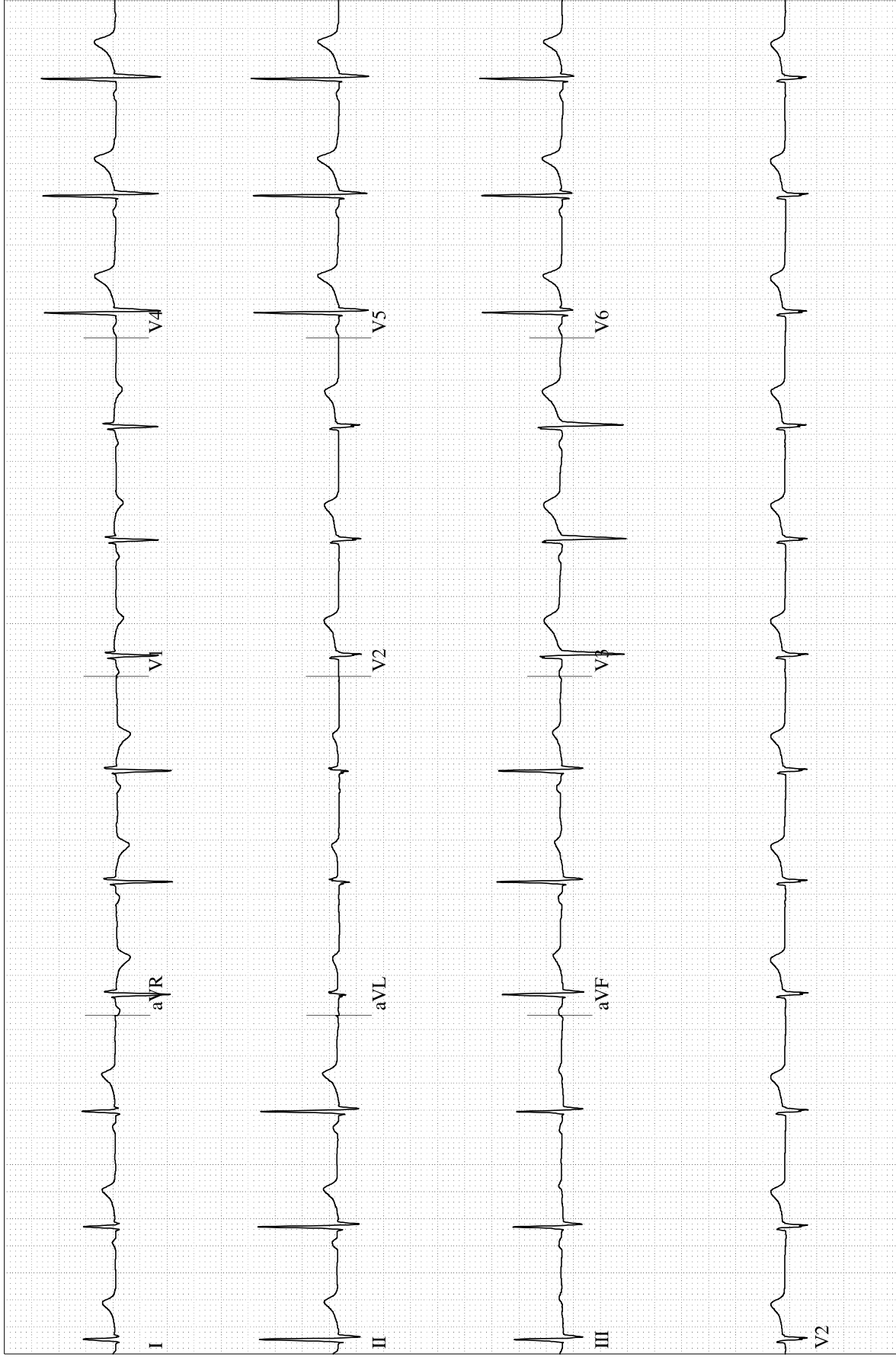
QRS duration: BASELINE: 80 ms, PEAK EX: 84 ms, REC: 84 ms

Reasons for Termination: Target heart rate achieved

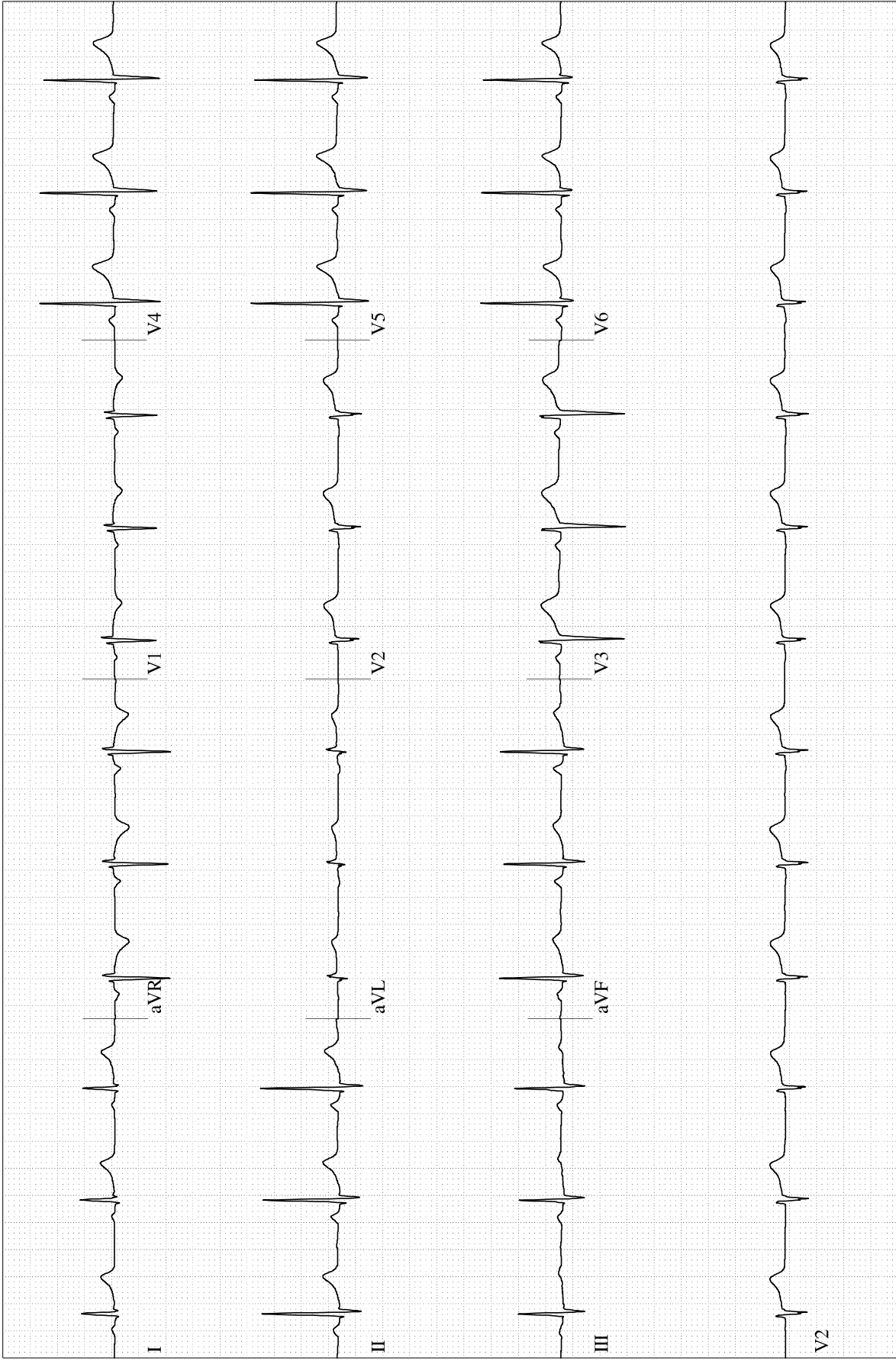
Room:

Location: * 0 *

Phase Name	Stage Name	Time in Stage	Speed [km/h]	Grade [%]	Workload [METS]	HR [bpm]	BP [mmHg]	RPP [mmHg*bpm]	VE [/min]	ST Level III [mV]	Comment
PRETEST	SUPINE	00:29	0.00	0.30	1.0	72			0	-0.01	
	STANDING	00:16	0.00	0.30	1.0	73			0	-0.01	
	HYPERV.	00:22	0.00	0.30	1.0	80			0	-0.02	
	WARM-UP	02:35	1.60	0.00	1.7	96			0	-0.01	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	109	135/90	14715	0	-0.01	
	STAGE 2	03:00	4.00	12.00	7.0	133	140/95	18620	0	-0.02	
	STAGE 3	00:22	5.40	14.00	8.0	141		19740	0	-0.06	
RECOVERY		03:04	0.00	0.30	1.0	79	140/95	11060	0	-0.05	



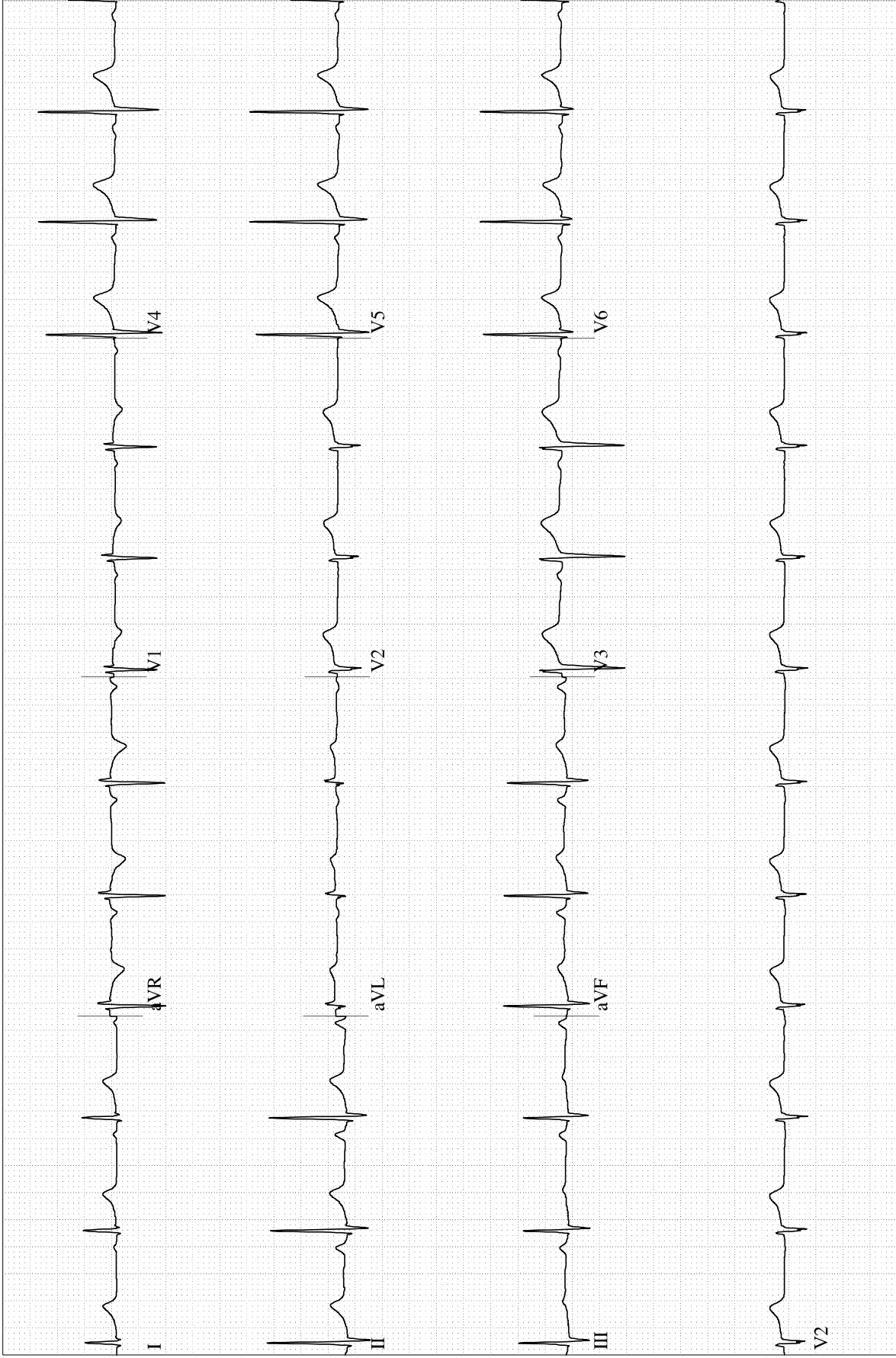
ROY, KUSUM
Patient ID: 68660
09.09.2023
13:07:00
Female 161 cm 63 kg
51 yrs



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Unconfirmed
Attending MD:

ROY, KUSUM
Patient ID: 68660
09.09.2023
13:07:05
Female 161 cm 63 kg
51 yrs

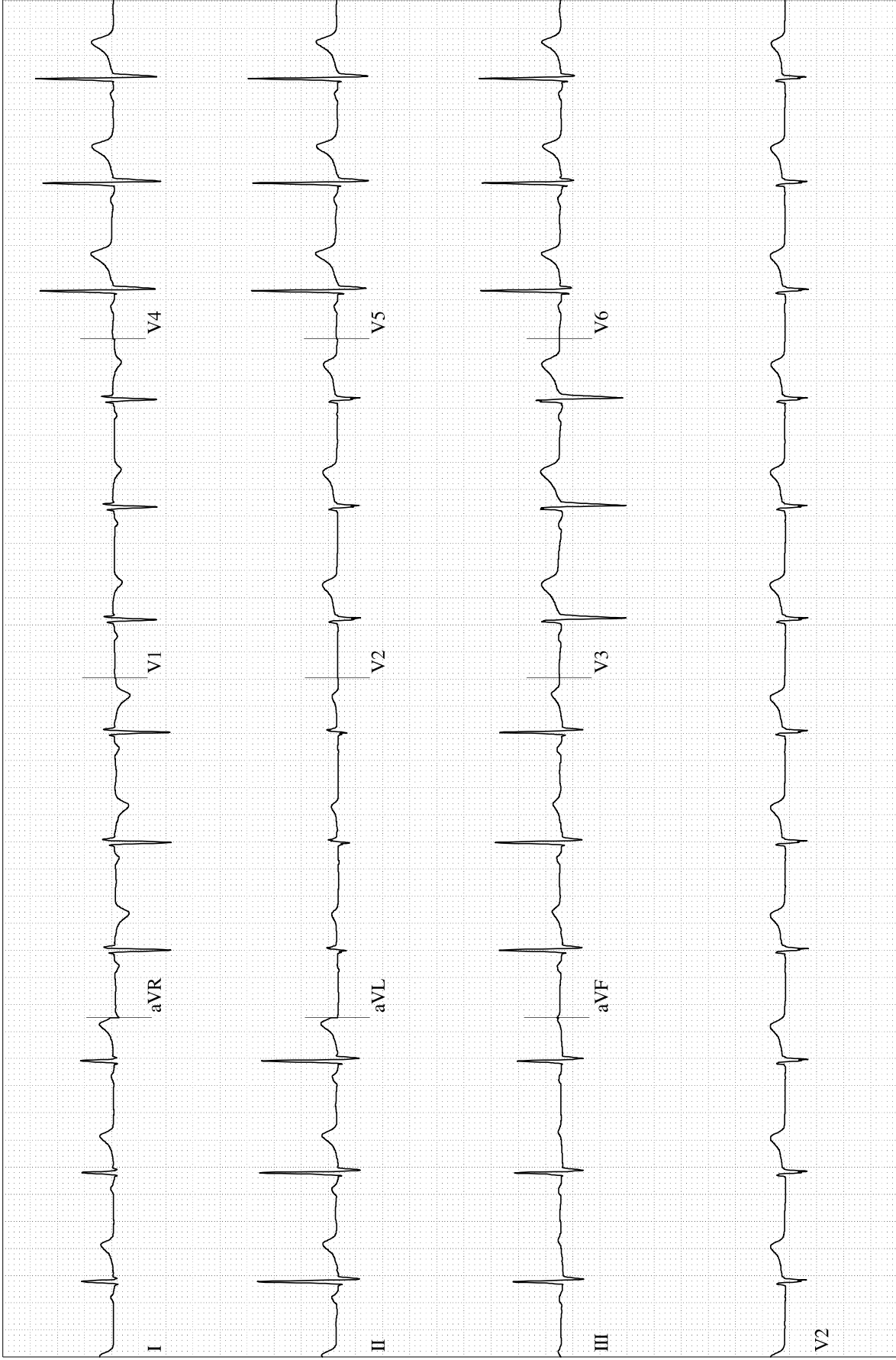


GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Unconfirmed

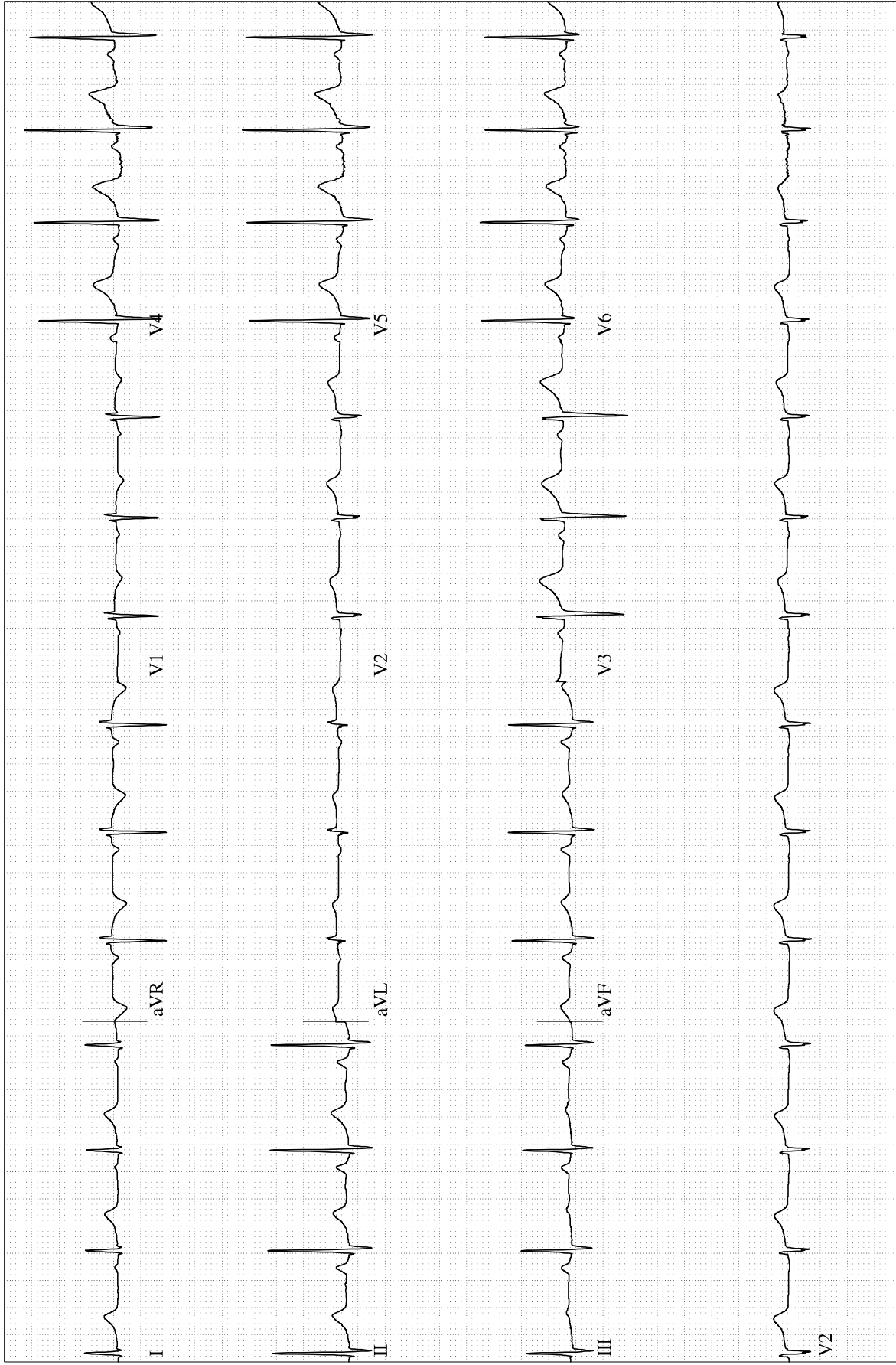
Attending MD:

ROY, KUSUM
Patient ID: 68660
09.09.2023
13:07:16
Female 161 cm 63 kg
51 yrs



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)
Unconfirmed

Attending MD:

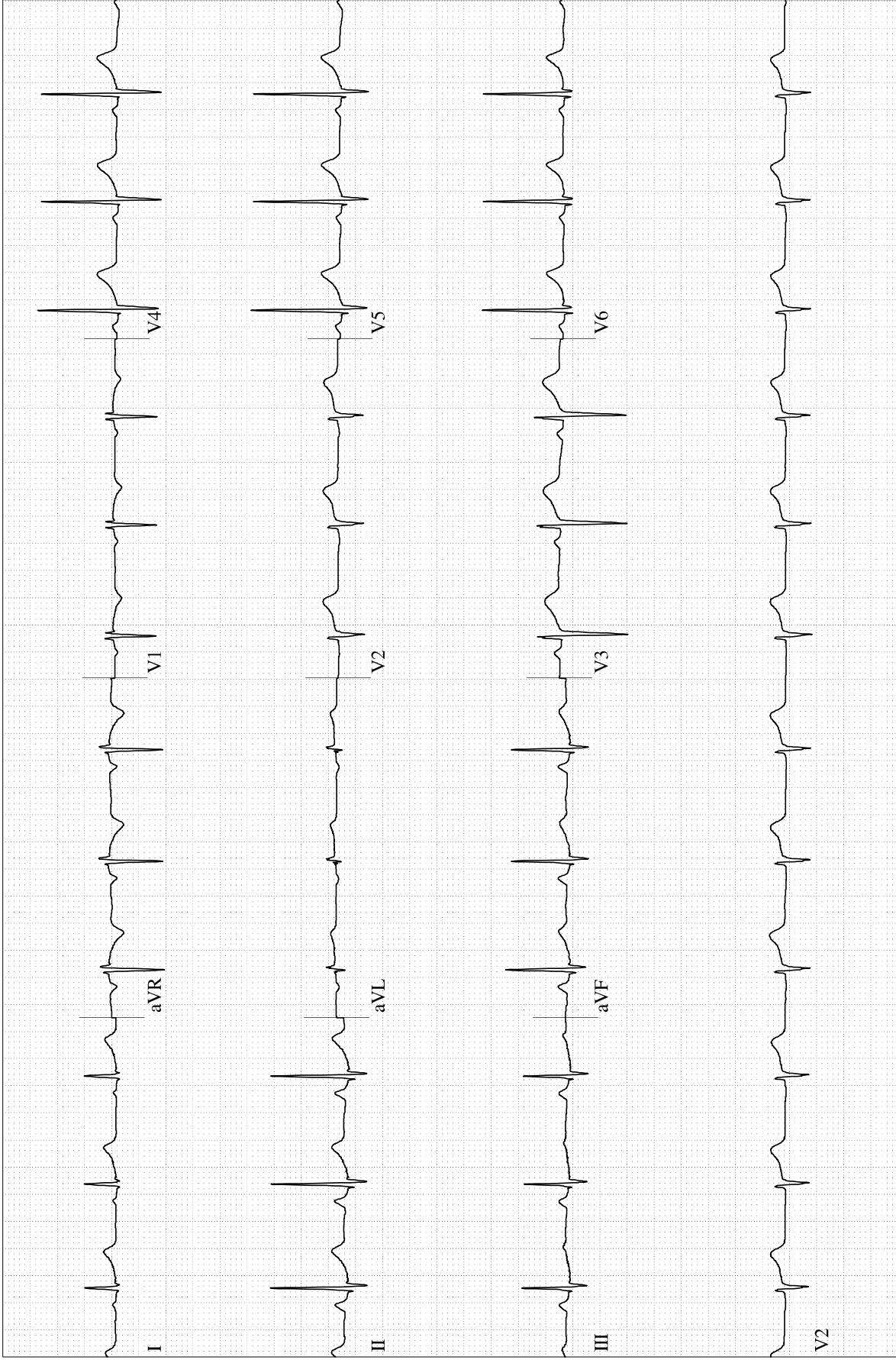


GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Unconfirmed

Attending MD:

ROY, KUSUM
Patient ID: 68660
09.09.2023
13:07:37
Female 161 cm 63 kg
51 yrs



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Unconfirmed

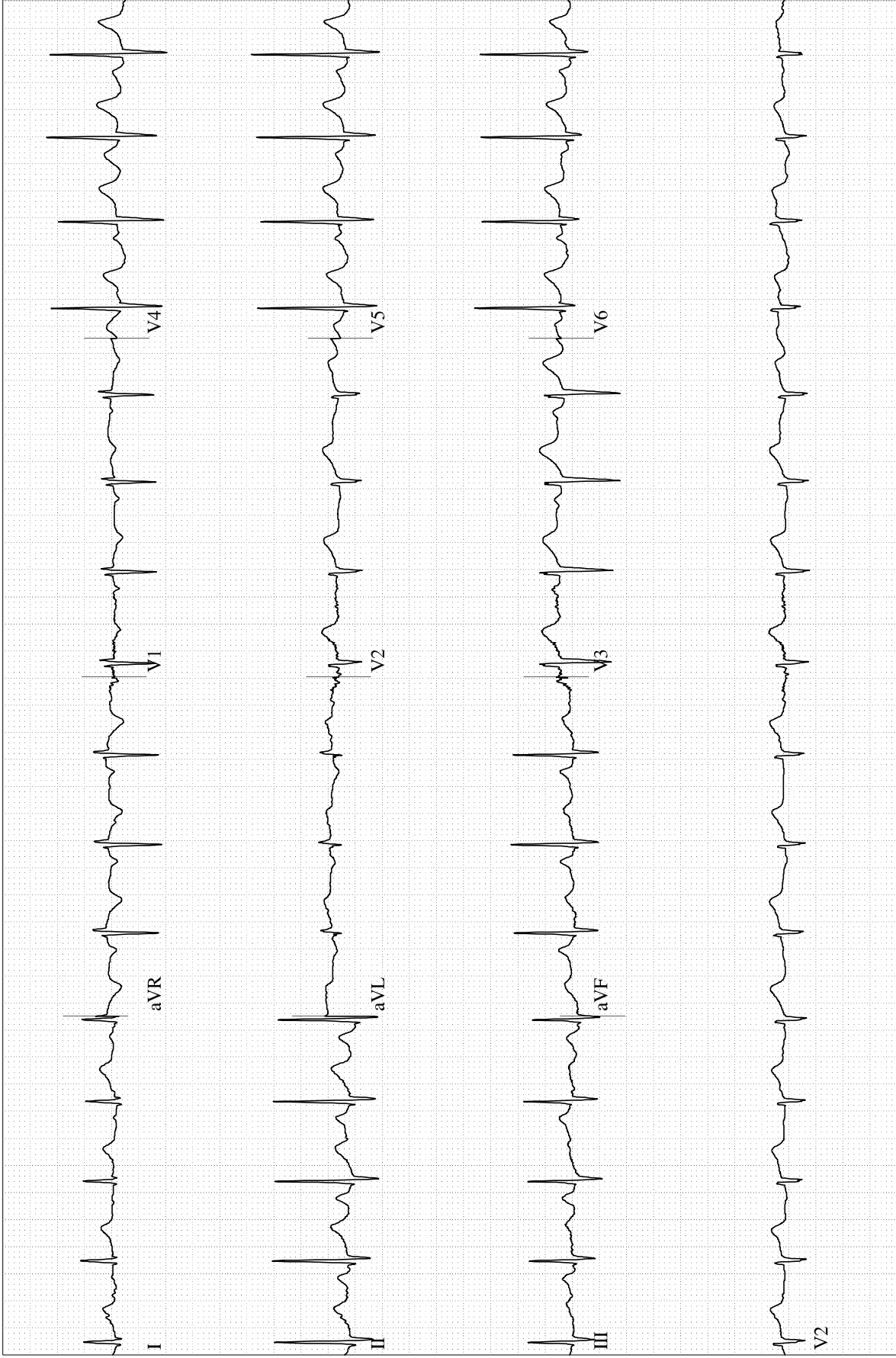
Attending MD:

BRUCE
1.6 km/h
0.0 %

PRETEST
WARM-UP
3:41

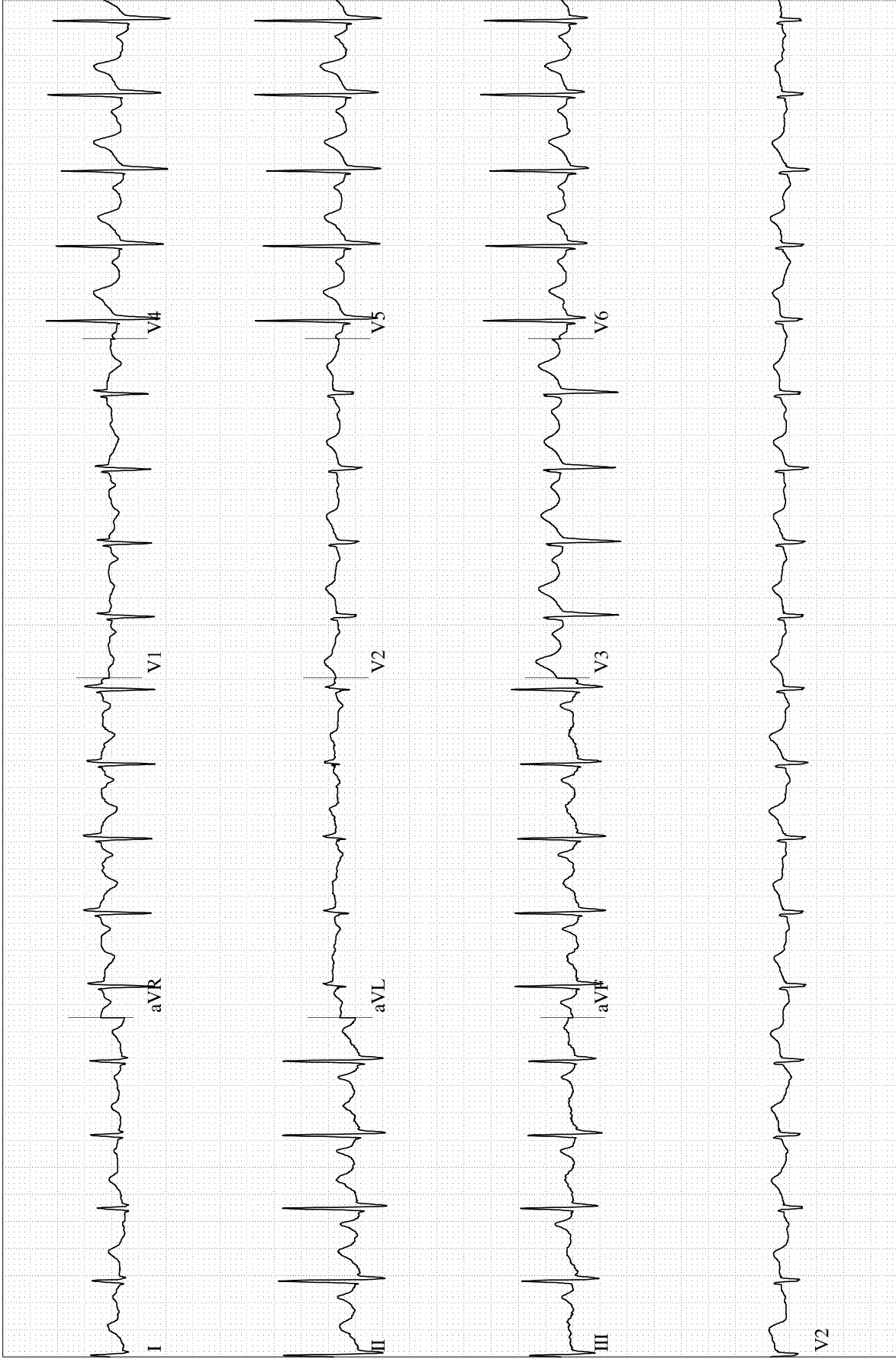
Exercise Test / ECG Strips
96 bpm

ROY, KUSUM
Patient ID: 68660
09.09.2023
13:10:12
Female 161 cm 63 kg
51 yrs



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V5,II)

Attending MD:



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(II,V5)

Unconfirmed

Attending MD:

ROY, KUSUM

Patient ID: 68660

09.09.2023

13:16:01

Female 161 cm 63 kg

51 yrs

Exercise Test / ECG Strips

133 bpm

140/95 mmHg

EXERCISE

STAGE 2

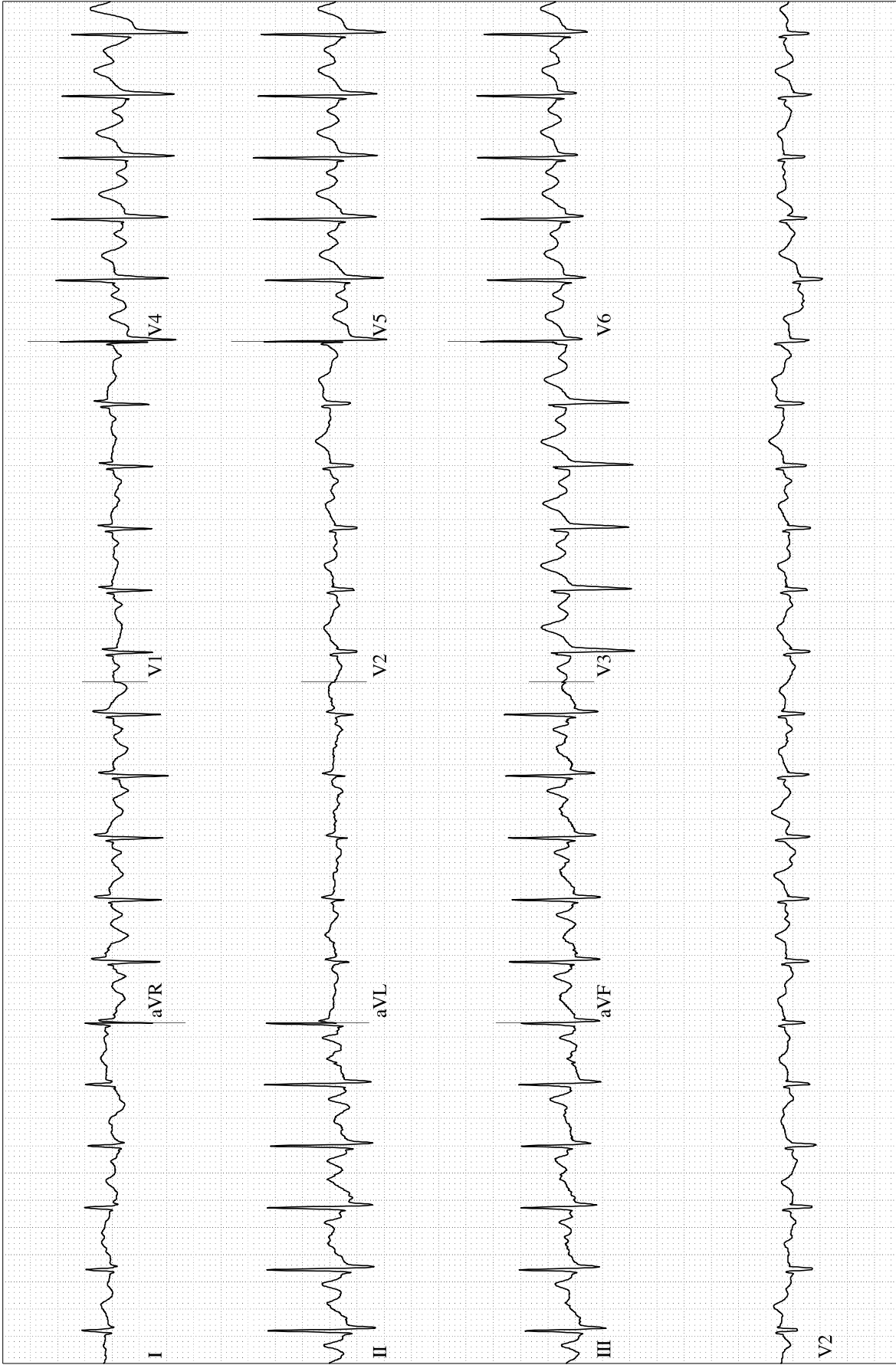
5:50

BRUCE

4.0 km/h

12.0 %

APOLLO CLINIC



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(II,V5)

Unconfirmed

Attending MD:

ROY, KUSUM

Patient ID: 68660

Female 161 cm 63 kg

09.09.2023 51 yrs

Exercise Test / ECG Strips

141 bpm

EXERCISE

STAGE 3

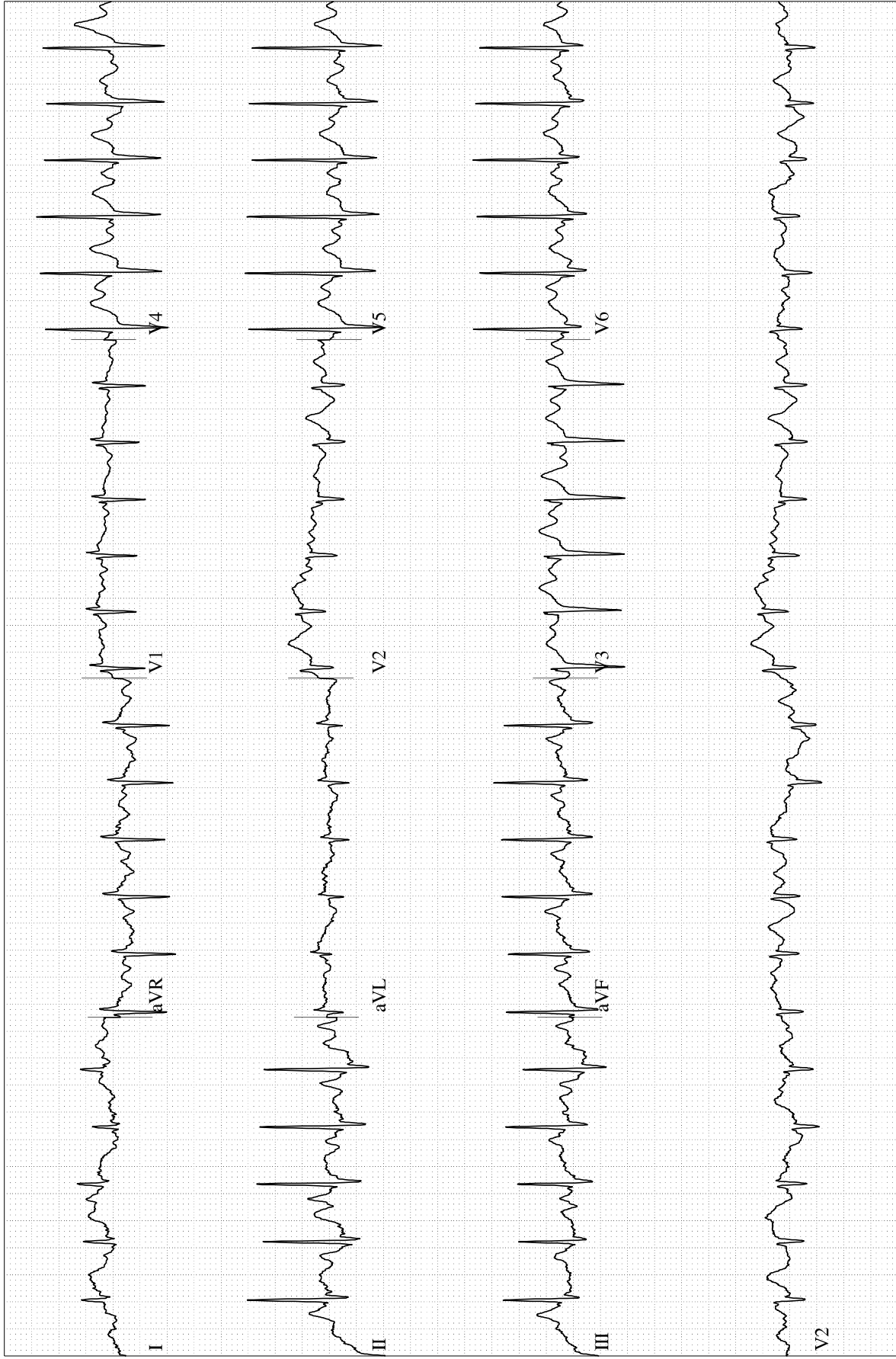
6:22

APOLLO CLINIC

BRUCE

5.4 km/h

14.0 %



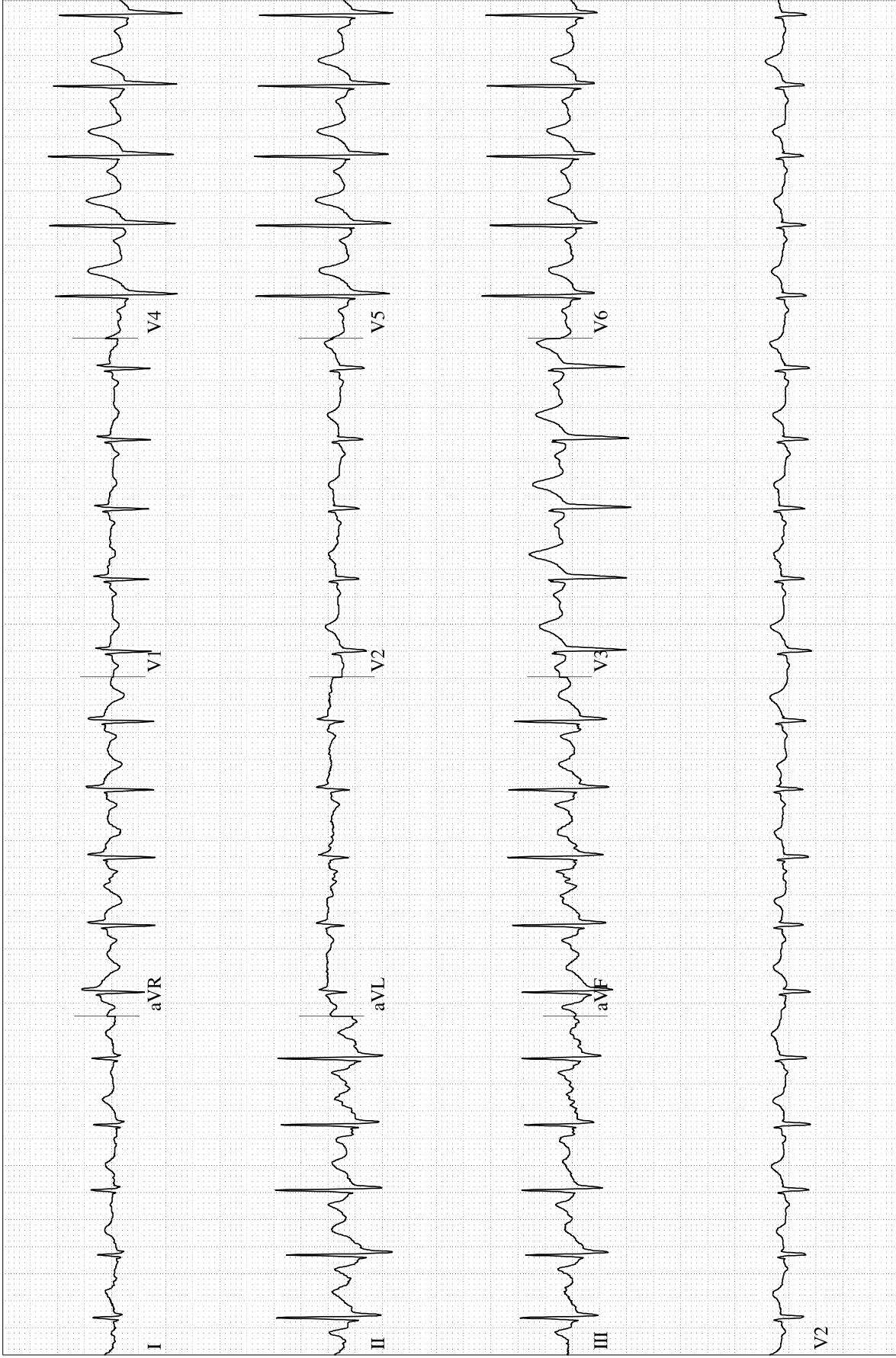
GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(II,V5)

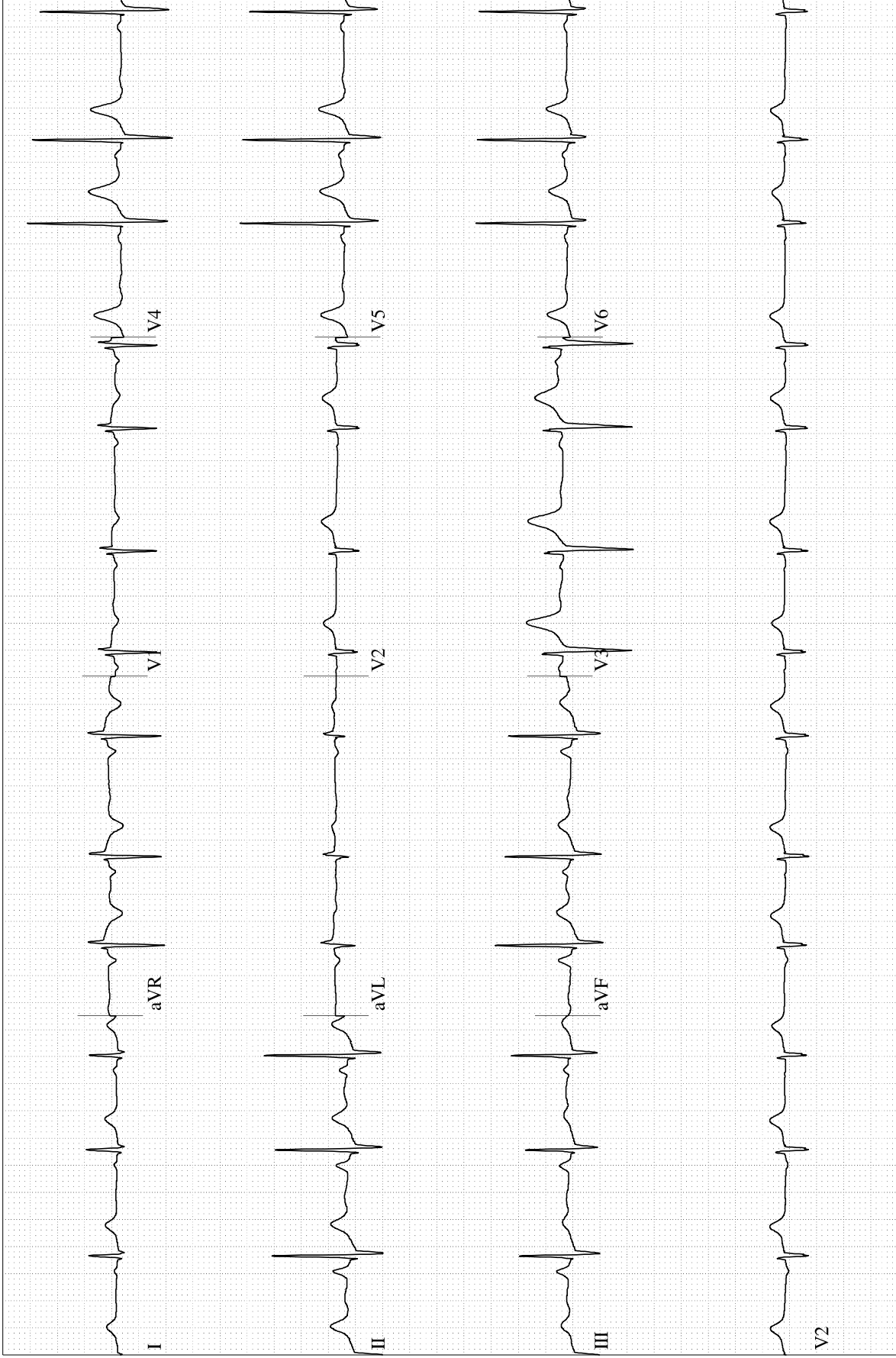
Unconfirmed

Attending MD:

Page 11

ROY, KUSUM
Patient ID: 68660
09.09.2023
13:17:22
Female 161 cm 63 kg
51 yrs





GE CardioSoft V7.0 (10)
 25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V3,V4)

Unconfirmed
 Attending MD:

ROY, KUSUM

Patient ID: 68660

09.09.2023

13:19:22

Female 161 cm 63 kg

51 yrs

Exercise Test / ECG Strips

73 bpm

140/95 mmHg

RECOVERY

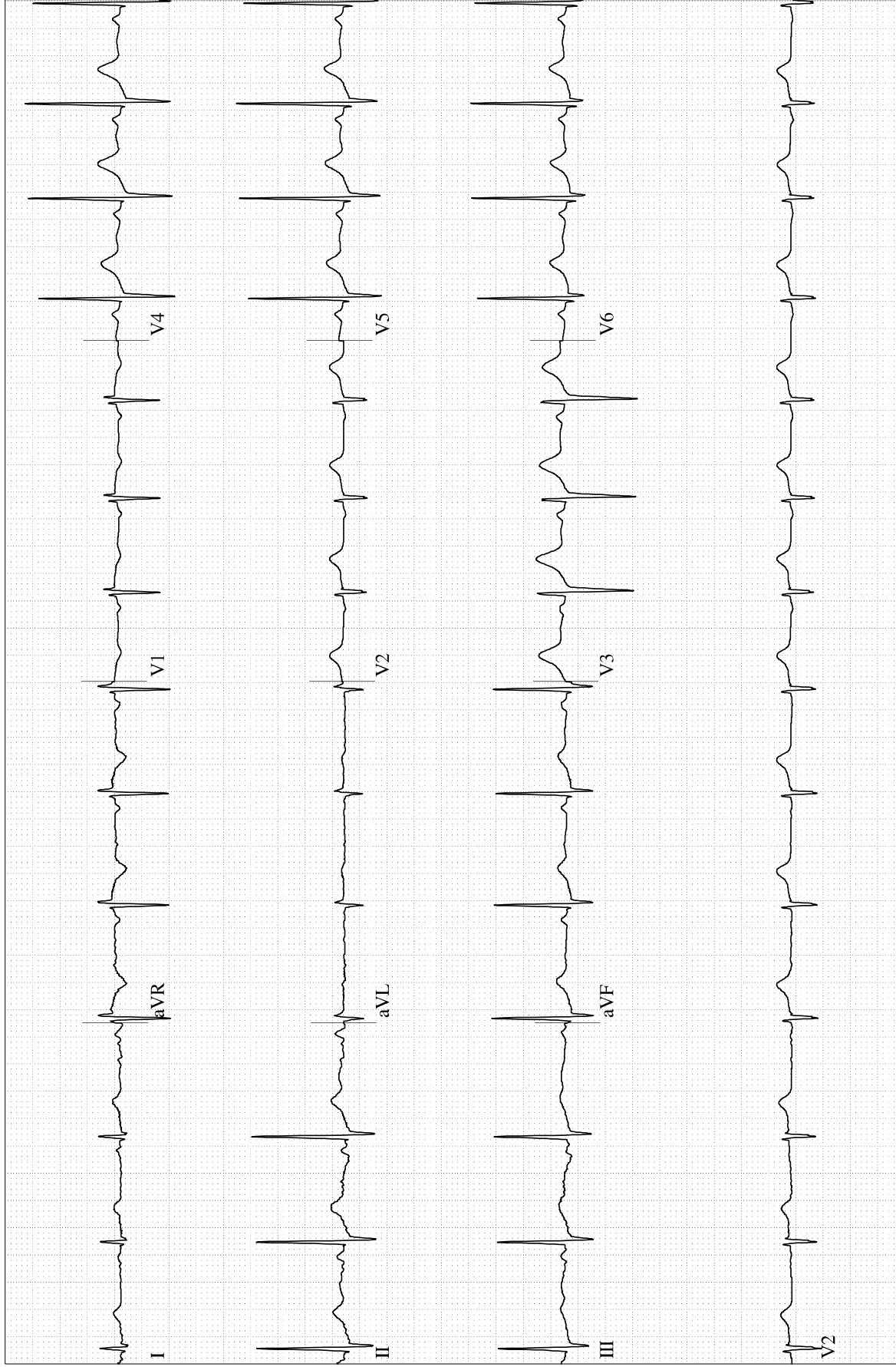
2:50

BRUCE

0.0 km/h

0.5 %

APOLLO CLINIC



GE CardioSoft V7.0 (10)
25 mm/s 10 mm/mV 50 Hz 0.04Hz FRF HEART V5.41.1 HR(V3,V4)
Unconfirmed

Attending MD:

Page 14

Patient Name	: Mrs. Kusum Roy	Age/Gender	: 52 Y/F
UHID/MR No.	: CKHA.0000068660	OP Visit No	: CKHAOPV102121
Sample Collected on	:	Reported on	: 09-09-2023 11:50
LRN#	: RAD2093778	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS45423		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver: It appears normal in size, shape and shows normal echotexture. No focal lesion is noted. No e/o IHBR dilatation is seen. Portal vein and CBD appear normal in dimensions at porta hepatis.

Gall bladder: It is partially distended. No calculus or sludge noted.

Spleen : It appears normal in size, shape and echotexture. No focal lesion is noted.

Pancreas : It appears normal in size, shape and echotexture. No focal lesion / pancreatic ductal dilatation / calcification noted.

Right kidney : Normal in size ms 10.0 x 3.8 cms, shape, location with smooth outlines and normal echotexture. CM differentiation is well maintained. No calculus or hydronephrosis seen.

Left kidney : Normal in size ms 10.0 x 4.7 cms, shape, location with smooth outlines and normal echotexture. CM differentiation is well maintained. No calculus or hydronephrosis seen.

No retroperitoneal lymphadenopathy is seen. Aorta and I.V.C. appear normal.

Urinary bladder: It is well distended and appears normal. No echoreflexive calculus or soft tissue mass noted. Both U-V junction appear normal.

Uterus: post menopausal status.

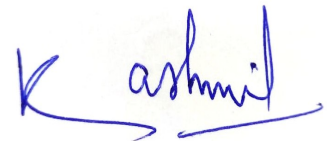
Visualised bowel loops appear normal.

IMPRESSION :

- **NO SIGNIFICANT ABNORMALITY.**

Clinical correlation suggested.....

(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. SANKET KASLIWAL
MBBS DMRE
Radiology

Patient Name	: Mrs. Kusum Roy	Age/Gender	: 52 Y/F
UHID/MR No.	: CKHA.0000068660	OP Visit No	: CKHAOPV102121
Sample Collected on	:	Reported on	: 09-09-2023 16:14
LRN#	: RAD2093778	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS45423		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

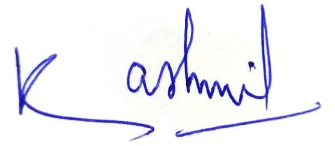
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. SANKET KASLIWAL
MBBS DMRE
Radiology

Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 12:43PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 02:20PM
Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

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

HAEMOGLOBIN	12.1	g/dL	12-15	Spectrophotometer
PCV	37.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.6	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	81	fL	83-101	Calculated
MCH	26.4	pg	27-32	Calculated
MCHC	32.6	g/dL	31.5-34.5	Calculated
R.D.W	15.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,990	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	62.5	%	40-80	Electrical Impedence
LYMPHOCYTES	28.3	%	20-40	Electrical Impedence
EOSINOPHILS	1.6	%	1-6	Electrical Impedence
MONOCYTES	7.1	%	2-10	Electrical Impedence
BASOPHILS	0.5	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	3743.75	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	1695.17	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	95.84	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	425.29	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	29.95	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	157000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	22	mm at the end of 1 hour	0-20	Modified Westergren
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PERIPHERAL SMEAR

RBC ANISOCYTOSIS+.
WBC WITHIN NORMAL LIMITS
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN.



Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 12:43PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 02:48PM
Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 12:43PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 01:55PM
Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	101	mg/dL	70-100	HEXOKINASE
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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.

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	115	mg/dL	70-140	HEXOKINASE
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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.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 12:43PM
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Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

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



Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 01:09PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 05:12PM
Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	163	mg/dL	<200	CHO-POD
TRIGLYCERIDES	160	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	44	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	119	mg/dL	<130	Calculated
LDL CHOLESTEROL	86.97	mg/dL	<100	Calculated
VLDL CHOLESTEROL	32.07	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.73		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 ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.45	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.09	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.36	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	15.45	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	19.6	U/L	<35	IFCC
ALKALINE PHOSPHATASE	138.67	U/L	30-120	IFCC
PROTEIN, TOTAL	7.20	g/dL	6.6-8.3	Biuret
ALBUMIN	4.07	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.13	g/dL	2.0-3.5	Calculated
A/G RATIO	1.3		0.9-2.0	Calculated



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.61	mg/dL	0.55-1.02	Modified Jaffe, Kinetic
UREA	14.93	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	7.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.43	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	8.82	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138.81	mmol/L	136-146	ISE (Indirect)
POTASSIUM	4.8	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	106.43	mmol/L	101-109	ISE (Indirect)



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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	10.32	U/L	<38	IFCC



Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 01:08PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 02:43PM
Visit ID : CKHAOPV102121	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS45423	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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)	1.11	ng/mL	0.64-1.52	CMIA
THYROXINE (T4, TOTAL)	7.26	µg/dL	4.87-11.72	CMIA
THYROID STIMULATING HORMONE (TSH)	3.590	µIU/mL	0.35-4.94	CMIA

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

Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 04:23PM
UHID/MR No : CKHA.0000068660	Reported : 09/Sep/2023 04:52PM
Visit ID : CKHAOPV102121	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - TMT - 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	7.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	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	2 - 3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY



Patient Name : Mrs.KUSUM ROY	Collected : 09/Sep/2023 08:56AM
Age/Gender : 52 Y 6 M 0 D/F	Received : 09/Sep/2023 04:24PM
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Visit ID : CKHAOPV102121	Status : Final Report
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DEPARTMENT OF CLINICAL PATHOLOGY

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

*** End Of Report ***



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