

Patient Name : Mrs.NANDINI V	Collected : 04/Apr/2023 09:07AM
Age/Gender : 34 Y 1 M 4 D/F	Received : 04/Apr/2023 12:21PM
UHID/MR No : CANN.0000220962	Reported : 04/Apr/2023 02:09PM
Visit ID : CANNOPV349251	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36766	

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 MORPHOLOGY	: Predominantly normocytic normochromic RBC's noted.
WBC MORPHOLOGY	: Normal in number, morphology and distribution. No abnormal cells seen.
PLATELETS	: Adequate in number.
PARASITES	: No haemoparasites seen.
IMPRESSION	: Normocytic Normochromic blood picture.
NOTE/ COMMENT	: Please correlate clinically.



SIN No:BED230085368

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 |
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Phone - 044-26224504 / 05



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

HAEMOGLOBIN	13.5	g/dL	12-15	Spectrophotometer
PCV	40.90	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.7	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	86.9	fL	83-101	Calculated
MCH	28.6	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	14.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,900	cells/cu.mm	4000-10000	Electrical Impedance

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	55.3	%	40-80	Electrical Impedance
LYMPHOCYTES	33.8	%	20-40	Electrical Impedance
EOSINOPHILS	2.5	%	1-6	Electrical Impedance
MONOCYTES	8.2	%	2-10	Electrical Impedance
BASOPHILS	0.2	%	<1-2	Electrical Impedance

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	2709.7	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1656.2	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	122.5	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	401.8	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	9.8	Cells/cu.mm	0-100	Electrical Impedance

PLATELET COUNT	284000	cells/cu.mm	150000-410000	Electrical impedance
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ERYTHROCYTE SEDIMENTATION RATE (ESR)	11	mm at the end of 1 hour	0-20	Modified Westergren
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PERIPHERAL SMEAR

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Test Name	Result	Unit	Bio. Ref. Range	Method
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IMPRESSION : Normocytic Normochromic blood picture.

NOTE/ COMMENT : Please correlate clinically.



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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

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.



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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	90	mg/dL	70-100	HEXOKINASE
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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 , NAF PLASMA	96	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

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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.8	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	120	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:PLF01955396,PLP1319298,EDT230034895

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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	205	mg/dL	<200	CHO-POD
TRIGLYCERIDES	100	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	62	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	143	mg/dL	<130	Calculated
LDL CHOLESTEROL	123	mg/dL	<100	Calculated
VLDL CHOLESTEROL	20	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.31		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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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL	0.82	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.15	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.67	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	18.0	U/L	<35	IFCC
ALKALINE PHOSPHATASE	64.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.00	g/dL	6.6-8.3	Biuret
ALBUMIN	4.20	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.80	g/dL	2.0-3.5	Calculated
A/G RATIO	1.5		0.9-2.0	Calculated



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

CREATININE	0.68	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	19.00	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	8.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.60	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	9.50	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	4.10	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	138	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.7	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	35.00	U/L	<38	IFCC



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Phone - 044-26224504 / 05



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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)

Patient Name : Mrs.NANDINI V	Collected : 04/Apr/2023 09:07AM
Age/Gender : 34 Y 1 M 4 D/F	Received : 04/Apr/2023 01:20PM
UHID/MR No : CANN.0000220962	Reported : 04/Apr/2023 06:24PM
Visit ID : CANNOPV349251	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36766	

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, TOTAL T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	0.92	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	8.34	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	0.420	µIU/mL	0.34-5.60	CLIA

Result is rechecked. Kindly correlate clinically

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



SIN No: SPL23056618

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK

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Patient Name : Mrs.NANDINI V	Collected : 04/Apr/2023 09:07AM
Age/Gender : 34 Y 1 M 4 D/F	Received : 04/Apr/2023 02:48PM
UHID/MR No : CANN.0000220962	Reported : 04/Apr/2023 04:41PM
Visit ID : CANNOPV349251	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36766	

DEPARTMENT OF CLINICAL PATHOLOGY

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

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

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

COLOUR	PALE STRAW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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



SIN No:UR2092350

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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APOLLO CLINICS NETWORK

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Patient Name : Mrs.NANDINI V	Collected : 04/Apr/2023 09:07AM
Age/Gender : 34 Y 1 M 4 D/F	Received : 04/Apr/2023 02:48PM
UHID/MR No : CANN.0000220962	Reported : 04/Apr/2023 04:41PM
Visit ID : CANNOPV349251	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36766	

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:UPP014529,UF008260

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Patient Name : Mrs.NANDINI V	Collected : 04/Apr/2023 09:07AM
Age/Gender : 34 Y 1 M 4 D/F	Received : 05/Apr/2023 11:23AM
UHID/MR No : CANN.0000220962	Reported : 06/Apr/2023 12:03PM
Visit ID : CANNOPV349251	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : bobS36766	


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. 6486/23
I	SPECIMEN
a	SPECIMEN ADEQUACY ADEQUATE
b	SPECIMEN TYPE LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE PRESENT WITH ENDOCERVICAL CELLS
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

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. R.SRIVATSAN
M.D.(Biochemistry)



Dr ANKITA SINGH
M.B.B.S, D.N.B(Pathology)
Consultant Pathologist.



Dr THILAGA
M.B.B.S, M.D(Pathology)
Consultant Pathologist



SIN No:CS062218

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

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Patient Name	: Mrs. NANDINI V	Age/Gender	: 34 Y/F
UHID/MR No.	: CANN.0000220962	OP Visit No	: CANNOPV349251
Sample Collected on	:	Reported on	: 05-04-2023 11:54
LRN#	: RAD1968321	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS36766		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Lung fields are clear.

Cardio thoracic ratio is normal.

Apices, costo and cardiophrenic angles are free.

Cardio vascular shadow and hila show no abnormal feature.

Bony thorax shows no significant abnormality.

Domes of diaphragm are well delineated.

IMPRESSION:

***NO SIGNIFICANT ABNORMALITY DETECTED.**

Dr. M SWAPNA
MBBS ,DNB(RD)
Radiology

Patient Name	: Mrs. NANDINI V	Age/Gender	: 34 Y/F
UHID/MR No.	: CANN.0000220962	OP Visit No	: CANNOPV349251
Sample Collected on	:	Reported on	: 04-04-2023 18:16
LRN#	: RAD1968321	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: bobS36766		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of diffuse pathology.

Small calcific focus (1.0cm) noted in segment VII right lobe of liver

Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus. Wall thickness appear normal.

Pancreas and spleen appear normal.

Spleen measures 7.6cms.

Portal and splenic veins appear normal.

No evidence of ascites or lymphadenopathy.

Diaphragmatic movements are satisfactory.

There is no evidence of sub diaphragmatic pathology or pleural effusion.

Right kidney measures 9.4 x 3.8cms.

Left kidney measures 8.5 x 4.5 cms.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

uterus measures 7.9 x 5.0 x 3.9cms and shows normal endometrial and myometrial echoes.

The endometrial thickness 10mm.

Right ovary measures 3.0 x 1.5cms

Patient Name : Mrs. NANDINI V

Age/Gender : 34 Y/F

Left ovary measures 2.6 x 1.5cms.

Both ovaries are normal in size and echotexture.

No mass lesion seen in the pelvis.

Bladder is normal in contour.

IMPRESSION:

*SMALL CALCIFIC FOCUS (1CM) IN RIGHT LOBE OF LIVER.

*NO SIGNIFICANT ABNORMALITY IN REST OF VISUALISED ORGANS

Dr. M SWAPNA
MBBS ,DNB(RD)
Radiology

CASE RECORD

Name: Mrs. Nandini - V

Date: 4.4.23

Occupation :

UHID No. : 220962

Age: 34 Sex : Male Female

OP / Company : Arcofemi Mediwheel Ane

Address:

Ref. Physician : Dr. Suma. D

Tel No:

Consultant :

card vaccinated

unv - ?

*ohv
HbA1c - 5.8*

• r checked

• TSH 0.4

History :

Chief Complaints : (If pain is present. please describe location, character, score etc.) *• USG - Rt lobe of Liv
2 calcific foci*

adv

Follow up on USG / TSH

• Dr. Chy change for checked

daily walk

History of Present illness :

Physical Examination

H-82
W-75

General :

Build

Height

154

Weight

56.7

Anaemia

•

Icterus

•

Cyanosis

Clubbing

Oedema

•

Glands

•

ENT :

CVS :

Heart Rate & Rhythm

B.P. : Supine

110/60

Sitting

Standing

Chest Shape

Heart Sounds

68

Murmurs

Thrills

RS :

Rate & Type

31.5 = ⊖

Breath Sounds

Abdomen :

Appearance

NV B ⊕

Liver

Spleen

Tenderness

Bowel sounds

N

Fluid

Genitals :

CNS :

Cranial Nerves

Sensors SYstem

Motor System

Reflexes

N

Fundus

Skin :

Extremities :

Name: Mrs. Nandhini
 Occupation: _____
 Age: 34 Sex: Male Female
 Address: _____
 Ph: _____

Date: 04/06/23 Reg. No.: 220962
 Ref. Physician: _____
 Copies to: _____

REPORT ON OPHTHALMIC EXAMINATION

History: Wearing eye 8 yrs

Present Complaint: nil

ON EXAMINATION:	RE	LE
Ocular Movements :	<u>full</u> N	<u>full</u> N
Anterior Segment :		
Intra-Ocular-Pressure :		
Visual Acuity: D.V. :		
Without Glass :	<u>6/6</u>	<u>6/6</u>
With Glass : <u>4/2</u>	<u>6/6</u>	<u>6/6</u>
N.V. :	<u>6/6</u>	<u>6/6</u>
Visual Fields :	<u>full</u>	<u>full</u>
Fundus :		
Impression :		
Advice :		
Colour Vision :	<u>ov. normal</u>	

[Signature]
OPHTHALMOLOGY / OPTOMETRIST

ENT check up

Mrs. Nandini

34/F

4/4/23

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

General Examination / Allergies History

No complaints

o/e

ENT - (N)



Follow up date:

Doctor Signature & Stamp

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Apollo Health and Lifestyle Limited

To book an appointment

 **1860 500 7788**

Mrs. Nandini. V
34/F

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

General Examination / Allergies
History

Adu restoration in 36

[A long diagonal line is drawn across the page, possibly indicating a signature or a mark.]

Follow up date:

[Handwritten Signature]
Doctor Signature & Stamp

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भारत सरकार
GOVERNMENT OF INDIA



நந்தினி வே

Nandini V

பிறந்த நாள் / DOB: 28/02/1999

புணர் / FEMALE

Mobile No.: 7506671941

4367 4942 1622

VID : 9110 9910 9035 0964



எனது ஆதார், எனது அடையாளம்

Nandini V

CANN. 210962

OCN 91090

Personal Details

UHID: 01668FGP6JZ0RUR
PatientID: 220962 RMC
Name: MRS NANDINI V
Age: 34
Gender: Female
Mobile: 1234567890

Pre-Existing Medical Conditions

Symptoms

Vitals

Measurements

HR : 55 BPM
PR: 129 ms
PD: 107 ms
QRS: 91 ms
QRS Axis: 56 deg
QT/QTc: 422/404 ms

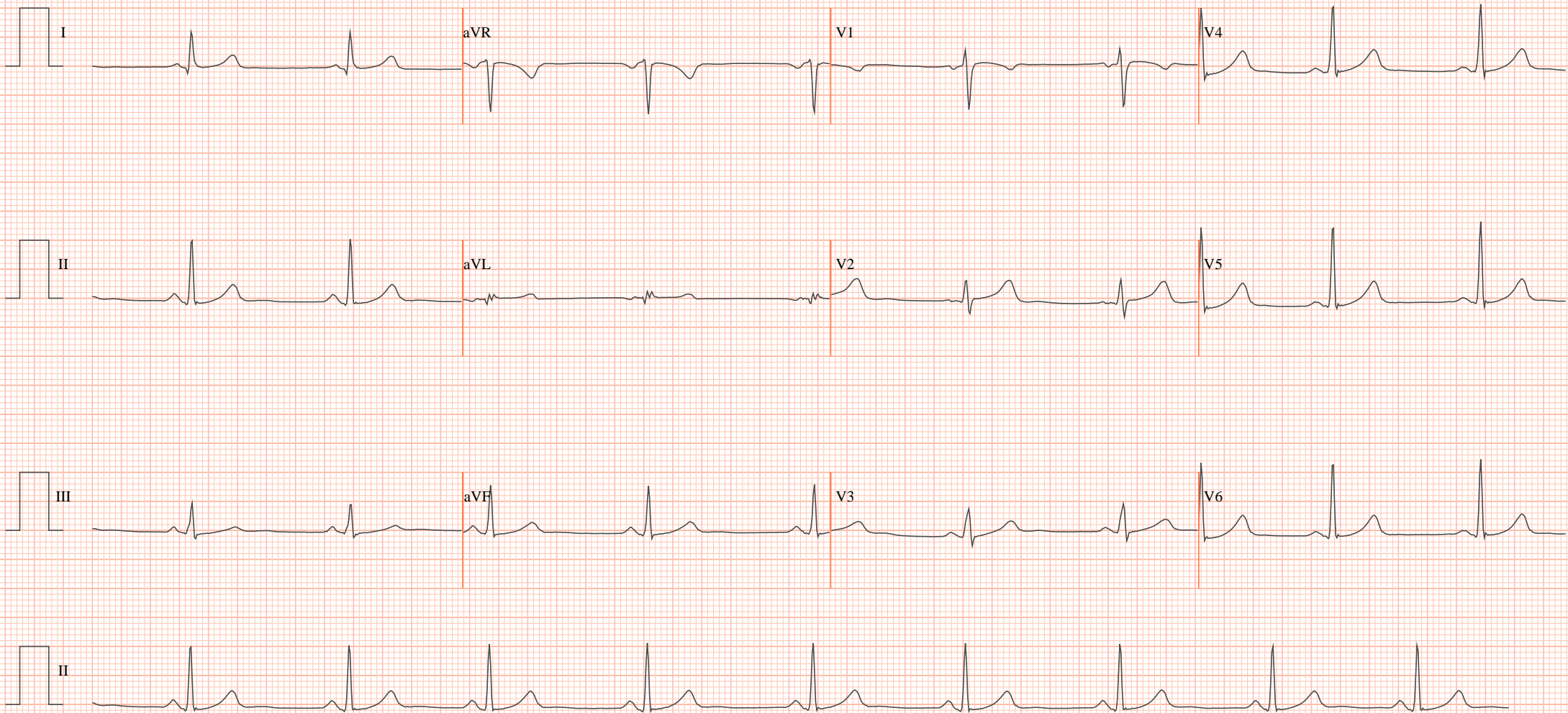
Interpretation

Sinus Bradycardia Regular
Normal Axis
No Significant ST-T changes

Authorized by
Yogesh

Dr. Yogesh Kothari
MD,DNB,FESC,FEP
Reg No- KMC 44065

This trace is generated by **KardioScreen**; Cloud-Connected, Portable, Digital, 6-12 Lead Scalable ECG Platform from **IMEDRIX**



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV

Patient Name : Mrs. NANDINI V Age : 34 Y/F
UHID : CANN.0000220962 OP Visit No : CANNOPV349251
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 04-04-2023 15:53
Referred By : SELF

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	2.6 CM
LA (es)	2.9 CM
RVID(ed)	1.5 CM
LVID (ed)	4.1 CM
LVID (es)	2.2 CM
IVS (Ed)	0.6/0.9 CM
LVPW (Ed)	0.7/1.1 CM
EF	65.00%
%FS	35.00%
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL

Patient Name : Mrs. NANDINI V Age : 34 Y/F
UHID : CANN.0000220962 OP Visit No : CANNOPV349251
Conducted By: : Dr. RAKESH P GOPAL Conducted Date : 04-04-2023 15:53
Referred By : SELF

INTER ATRIAL SEPTUM INTACT

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

NORMAL LEFT VENTRICULAR SYSTOLIC FUNCTION

COLOUR AND DOPPLER STUDIES

E/A-E: 0.8m/sec A: 0.7m/sec

VELOCITY ACROSS THE PULMONIC VALVE 0.9m/sec

VELOCITY ACROSS THE AV 1.4m/sec

TR VELOCITY 0.7m/sec

IMPRESSION

Patient Name	: Mrs. NANDINI V	Age	: 34 Y/F
UHID	: CANN.0000220962	OP Visit No	: CANNOPV349251
Conducted By:	: Dr. RAKESH P GOPAL	Conducted Date	: 04-04-2023 15:53
Referred By	: SELF		

NORMAL CHAMBER DIMENSION
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION (EF 65 %)
STRUCTURALLY VALVES ARE NORMAL
TRIVIAL MITRAL REGURGITATION
TRIVIAL TRICUSPID REGURGITATION
NO PAH/ CLOT / PE

Rakesh Gopal

Dr. RAKESH P
GOPAL

Patient Name	: Mrs. NANDINI V	Age	: 34 Y/F
UHID	: CANN.0000220962	OP Visit No	: CANNOPV349251
Reported By:	: DR ARULNIDHI	Conducted Date	: 04-04-2023 16:25
Referred By	: SELF		

ECG REPORT

Observation :-

Heart rate is 55 beats per minutes.

Impression:

SINUS BRADYCARDIA

----- END OF THE REPORT -----

DR ARULNIDHI

Patient Name : Mrs. NANDINI V
UHID : CANN.0000220962
Conducted By: :
Referred By : SELF

Age : 34 Y/F
OP Visit No : CANNOPV349251
Conducted Date :

Patient Name : Mrs. NANDINI V
UHID : CANN.0000220962
Conducted By :
Referred By : SELF

Age : 34 Y/F
OP Visit No : CANNOPV349251
Conducted Date :

Patient Name : Mrs. NANDINI V
UHID : CANN.0000220962
Conducted By: :
Referred By : SELF

Age : 34 Y/F
OP Visit No : CANNOPV349251
Conducted Date :

Patient Name : Mrs. NANDINI V
UHID : CANN.0000220962
Conducted By :
Referred By : SELF

Age : 34 Y/F
OP Visit No : CANNOPV349251
Conducted Date :
