

# CERTIFICATE OF MEDICAL FITNESS

Medically Fit	
Fit with restrictions/recommendations	
Though following restrictions have be not impediments to the job.	en revealed, in my opinion, these are
1 Dystipidemia	
2 Grade I eatty d	
3	
However the employee should follow communicated to him/her.	the advice/medication that has been
Review after	

Medical Officer
Approchaic, Rahari 53

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, Begumper, 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 | Wanowie

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT







Date

16-08-2023

Department

: GENERAL

MR NO

: CKHA.0000068134

Doctor

Name

: Mrs. Nitu Kumari

Registration No

Age/ Gender : 42 Y / Female

Temp:

Qualification

Consultation Timing: 08:54

Weight:

Pulse:

BMI: 30

Hip 107 Waist Circum: 10 6

Height:

148 cm

20 min Resp:

B.P: 143/92 mm

General Examination / Allergies History

> Adv. :-- Vit. B12

- Vir. D3

- Sr. Calcium

Clinical Diagnosis & Management Plan

Present complains - No complaints

Comorbidity - Nel

Allergies - Mil

Surgical H/O - CS. in y. 2003 Family H/O - Mother JHTN Addiction - Nutree JHTN

NAD

Mixed duet

CVS-

CNS-

P/A-

Chest-

H/O covid infection - No

Vaccinated with - 2 doses

Follow up date:

**Doctor Signature** 

Apollo Clinic, Kharadi

#102, B Wing, 1st Floor, Kui Scapes, Magarpatta Road, Opp. Reliance Smart, Kharadi, Pune, Pin: 411014 | Phone: (020) 2701 3333/4444

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BOOK YOUR APPOINTMENT TODAY!

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# POWER PRESCRIPTION

NAME: M.S Niede Kumari

GENDER: M/F

DATE: 16-8-23

AGE: 42

UHID: 68134

## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE		1.25	90	%
NEAR	1.25			

# LEFT EYE

SPH	CYL	AXIS	VISION
	1-75	96	%
125			

**INSTRUCTIONS:** 

SIGNATURE F

**Apollo Health and Lifestyle Limited** 

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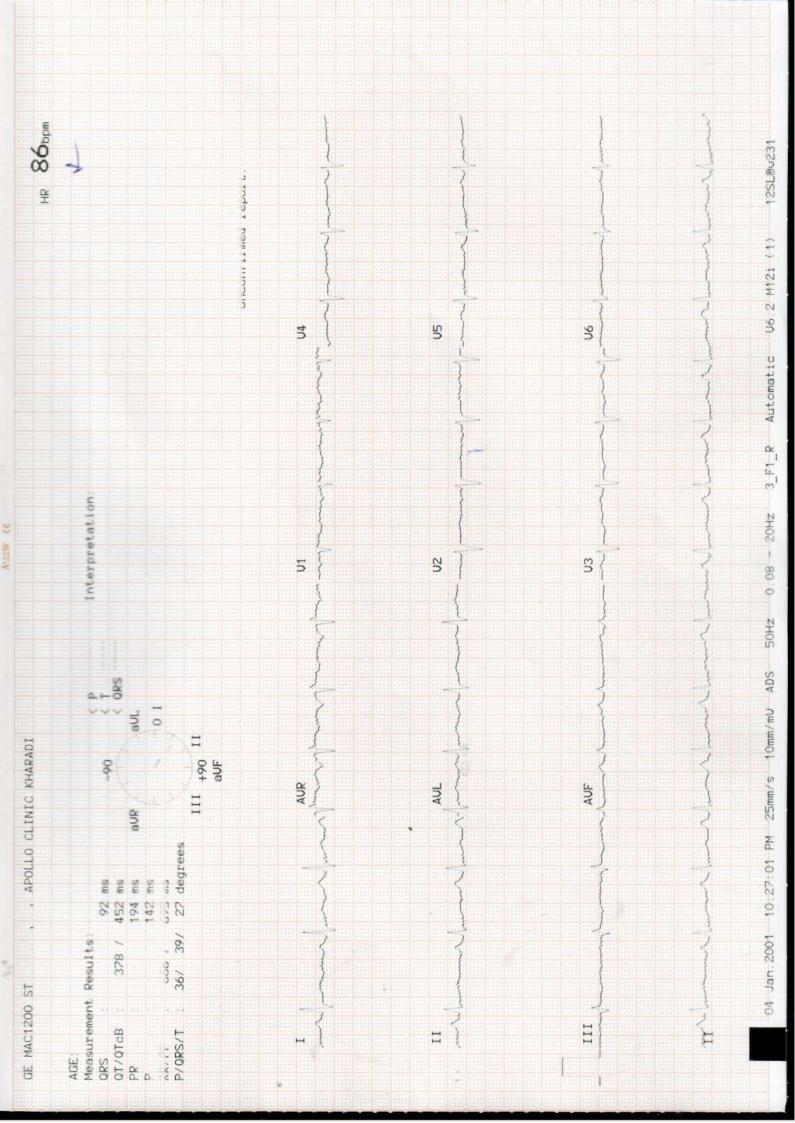
**APOLLO CLINICS NETWORK MAHARASHTRA** 

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

Online appointments: www.apolloclinic.com









Patient Name : 42 Y/F : Mrs. Nitu Kumari Age/Gender : CKHAOPV101053 : CKHA.0000068134 OP Visit No UHID/MR No. : 16-08-2023 15:48 Sample Collected on Reported on LRN# : RAD2074218 Specimen : SELF Ref Doctor : 456464 Emp/Auth/TPA ID

#### 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



Age/Gender : 42 Y/F Patient Name : Mrs. Nitu Kumari OP Visit No : CKHAOPV101053 : CKHA.0000068134 UHID/MR No. : 16-08-2023 09:48 Reported on Sample Collected on : RAD2074218 Specimen LRN# Ref Doctor : SELF : 456464 Emp/Auth/TPA ID

#### DEPARTMENT OF RADIOLOGY

#### SONO MAMOGRAPHY - SCREENING

Both breast parenchyma shows normal echoanatomy.

No solid / cystic lesion noted.

Visualized vessels appears normal.

No obvious lymphadenopathy noted.

IMPRESSION:

NORMAL STUDY.

Clinical correlation suggested.

#### Consultant Radiologist.

(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



: 42 Y/F Age/Gender Patient Name : Mrs. Nitu Kumari OP Visit No : CKHAOPV101053 : CKHA.0000068134 UHID/MR No. : 16-08-2023 09:43 Reported on Sample Collected on : RAD2074218 Specimen LRN# : SELF Ref Doctor : 456464 Emp/Auth/TPA ID

#### DEPARTMENT OF RADIOLOGY

#### ULTRASOUND - WHOLE ABDOMEN

Liver: It appears normal in size, shape and shows raised 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 well 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 9.8 x 4.2 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 10.6 x 4.0 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 echoreflective calculus or soft tissue mass noted. Both U-V junction appear

**Exerus**: is anteverted, and measures 7.7 x 3.2 x 4.5 cms. No focal lesion seen. Endometrial thickness is 6.2 mm.

Right ovary: measures 2.7 x 2.0 cms. Left ovary: measures 2.6 x 1.6 cms.

Both ovaries: appears normal in size and echotexture.

Visualised bowel loops appear normal.

#### EMPRESSION:

Grade I fatty changes in liver.

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



NAME: Mrs. Nitu Kumari

AGE : 42 Y / F

REF :

DATE: 16 / 08 / 2023

#### **ECHOCARDIOGRAPHY**

NO RWMA
NORMAL LV SYSTOLIC FUNCTION.
NO LV DIASTOLIC DYSFUNCTION.

NORMAL VALVES. NORMAL CHAMBER SIZE. NORMAL PA PRESSURE.

IAS AND IVS INTACT.
NO CLOT / VEGETATION / PERICARDIAL EFFUSION.

AO	LA	IVS	LVIDd	PWD	LVIDS	LVEF
26	31	11	40	10	27	60.00%

#### IMPRESSION:

NORMAL LV SYSTOLIC FUNCTION. NORMAL PA PRESSURE.

DR Khadtare Abhijit

MBBS, MD (MEDICINE), DNB (CARDIOLOGY) CONSULTANT CARDIOLOGIST

Apollo Health and Lifestyle Limited

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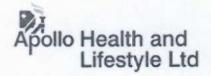
9370520920 Agre- 42

## Kharadi Apollo Clinic

From: noreply@apolloclinics.info
Sent: 09 August 2023 05:28 PM
To: sanju749641@gmail.com

Cc: Kharadi Apollo Clinic; Vinayak Dimble; Syamsunder M

Subject: Your Apollo order has been confirmed



#### Dear Nitu Kumari,

Namaste Team,

Greetings from Apollo Clinics,

With regards to the below request the below appointment is scheduled at KHARADI clinic on 2023-08-16 at 08:20-08:25.

Corporate Name	ARCOFEMI HEALTHCARE LIMITED
Agreement Name	ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324]

"In view of corona virus precautionary measures, you are requested to take a mandatory check for symptoms & self-declaration at centre. Please cooperate. Thank you."

NOTE: We are not providing the breakfast in view of corona virus. And that customers on their own should carry their breakfast.

Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.

## Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.





# **Apollo Clinic**

# **CONSENT FORM**

Patient Name: MYS: Nitu Kumari Age: 42
UHID Number: 68134 Company Name:
IMr./Mrs./Ms Nity kumayi
Employee of
(Company) Want to inform you that I am not interested / Postpone in getting
1) LBC 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: from Date: 16/8/23

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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

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SPOLIO CLINICS NETWORK

Address: D No.30, F - Block 2nd Avenue, Anna Nagar East, Chennal 600 102, Phone 044-26224504 / 05









: Mrs.NITU KUMARI

Age/Gender

: 42 Y 3 M 4 D/F

UHID/MR No Visit ID

: CKHA.0000068134

Ref Doctor

: CKHAOPV101053

Emp/Auth/TPA ID

: Dr.SELF

: 456464

Collected

: 16/Aug/2023 09:04AM

Received

: 16/Aug/2023 01:04PM

Reported

: 16/Aug/2023 02:16PM

Status Sponsor Name : Final Report

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

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

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

RBC NORMOCYTIC NORMOCHROMIC WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN







Patient Name : Mrs.NITU KUMARI

Age/Gender : 42 Y 3 M 4 D/F

UHID/MR No : CKHA.0000068134

Visit ID : CKHAOPV101053

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 456464 Collected : 16/Aug/2023 09:04AM

Received : 16/Aug/2023 01:04PM

Reported : 16/Aug/2023 02:16PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF HAEMATOLOGY**

	ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO	- PAN INDIA - FY2324
г					

Test Name Res	ult Unit	Bio. Ref. Range	Method
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HEMOGRAM, WHOLE BLOOD EDTA				
HAEMOGLOBIN	12.7	g/dL	12-15	Spectrophotometer
PCV	38.00	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.33	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	87.7	fL	83-101	Calculated
MCH	29.3	pg	27-32	Calculated
MCHC	33.4	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,260	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	56.7	%	40-80	Electrical Impedance
LYMPHOCYTES	31.5	%	20-40	Electrical Impedance
EOSINOPHILS	3.1	%	1-6	Electrical Impedance
MONOCYTES	8.1	%	2-10	Electrical Impedance
BASOPHILS	0.6	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				·
NEUTROPHILS	2415.42	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1341.9	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	132.06	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	345.06	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	25.56	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	150000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	16	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBC NORMOCYTIC NORMOCHROMIC

WBC WITHIN NORMAL LIMITS

PLATELETS ARE ADEQUATE ON SMEAR

NO HEMOPARASITES SEEN







: Mrs.NITU KUMARI

Age/Gender

: 42 Y 3 M 4 D/F

UHID/MR No

: CKHA.0000068134

Visit ID Ref Doctor : CKHAOPV101053

Emp/Auth/TPA ID

: Dr.SELF : 456464

Collected Received : 16/Aug/2023 09:04AM

: 16/Aug/2023 01:04PM

Reported

: 16/Aug/2023 02:52PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF HAEMATOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - 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	В		Microplate Hemagglutinatio	n	
Rh TYPE	Positive		Microplate Hemagglutinatio	n	





: Mrs.NITU KUMARI

Age/Gender

: 42 Y 3 M 4 D/F

UHID/MR No Visit ID

: CKHA.0000068134

Ref Doctor

: CKHAOPV101053

: Dr.SELF Emp/Auth/TPA ID : 456464

Collected

: 16/Aug/2023 09:04AM

Received

: 16/Aug/2023 12:58PM

Reported

: 16/Aug/2023 01:40PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	94	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







: Mrs.NITU KUMARI

Age/Gender

: 42 Y 3 M 4 D/F

UHID/MR No Visit ID

: CKHA.0000068134

Ref Doctor

: CKHAOPV101053

: Dr.SELF Emp/Auth/TPA ID : 456464

Collected

: 16/Aug/2023 09:04AM

Received

: 16/Aug/2023 01:04PM

Reported Status

: 16/Aug/2023 03:30PM : Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	- PAN INDIA - FY2324

rest name	Result	Unit	Bio. Ref. Range	wethod

GLUCOSE, POST PRANDIAL (PP), 2	122	mg/dL	70-140	HEXOKINASE
HOURS, SODIUM FLUORIDE PLASMA (2				
HR)				

#### **Comment:**

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each

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.NITU KUMARI

Age/Gender : 42 Y 3 M 4 D/F

UHID/MR No : CKHA.0000068134

Visit ID : CKHAOPV101053

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 456464 Collected : 16/Aug/2023 09:04AM

Received : 16/Aug/2023 01:04PM Reported : 16/Aug/2023 03:30PM

Status : Final Report

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#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO	- PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	4.6	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG), WHOLE BLOOD EDTA	85	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

Page 6 of 13









Patient Name : Mrs.NITU KUMARI

Age/Gender : 42 Y 3 M 4 D/F

UHID/MR No : CKHA.0000068134

Visit ID : CKHAOPV101053

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 456464 Collected : 16/Aug/2023 09:04AM

Received : 16/Aug/2023 01:08PM Reported : 16/Aug/2023 02:00PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY	ANNUAL PLUS CHE	CK ADVANCED	- FEMALE - 2D ECHO -	PAN INDIA - FY2324
Test Name	Result	Unit	Bio Ref Range	Method

LIPID PROFILE, SERUM				
TOTAL CHOLESTEROL	213	mg/dL	<200	CHO-POD
TRIGLYCERIDES	103	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	57	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	156	mg/dL	<130	Calculated
LDL CHOLESTEROL	135.63	mg/dL	<100	Calculated
VLDL CHOLESTEROL	20.61	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.75		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
III I )I	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.







: Mrs.NITU KUMARI

Age/Gender

: 42 Y 3 M 4 D/F

UHID/MR No Visit ID

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY232	ARCOFEMI - MEDIWHEEL	- FULL BODY ANNUAL PLUS	S CHECK ADVANCED - FEMALE	- 2D ECHO - PAN INDIA - FY23
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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	1.13	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.21	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.92	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	17.06	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	16.4	U/L	<35	IFCC
ALKALINE PHOSPHATASE	87.81	U/L	30-120	IFCC
PROTEIN, TOTAL	7.59	g/dL	6.6-8.3	Biuret
ALBUMIN	4.40	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	3.19	g/dL	2.0-3.5	Calculated
A/G RATIO	1.38	2	0.9-2.0	Calculated







: Mrs.NITU KUMARI

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: 42 Y 3 M 4 D/F

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Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

# DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT), SERUM						
CREATININE	0.62	mg/dL	0.55-1.02	Modified Jaffe, Kinetic		
UREA	18.27	mg/dL	17-43	GLDH, Kinetic Assay		
BLOOD UREA NITROGEN	8.5	mg/dL	8.0 - 23.0	Calculated		
URIC ACID	4.34	mg/dL	2.6-6.0	Uricase PAP		
CALCIUM	8.87	mg/dL	8.8-10.6	Arsenazo III		
PHOSPHORUS, INORGANIC	2.45	mg/dL	2.5-4.5	Phosphomolybdate Complex		
SODIUM	139.61	mmol/L	136–146	ISE (Indirect)		
POTASSIUM	4.3	mmol/L	3.5–5.1	ISE (Indirect)		
CHLORIDE	104.82	mmol/L	101–109	ISE (Indirect)		







: Mrs.NITU KUMARI

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: 42 Y 3 M 4 D/F

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Reported Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

#### **DEPARTMENT OF BIOCHEMISTRY**

ARCOFEMI - MEDIWHEEL	- FULL BODY ANN	<b>UAL PLUS CHECK A</b>	ADVANCED - FEMALE	- 2D ECHO - PAN INDIA	- FY2324

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

GAMMA GLUTAMYL TRANSPEPTIDASE	13.32	U/L	<38	IFCC
(GGT), SERUM				







Patient Name : Mrs.NITU KUMARI

Age/Gender : 42 Y 3 M 4 D/F

UHID/MR No : CKHA.0000068134

Visit ID : CKHAOPV101053

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 456464

Collected : 16/Aug/2023 09:04AM

Received : 16/Aug/2023 01:08PM Reported : 16/Aug/2023 02:07PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF IMMUNOLOGY**

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA					
	Test Name	Result	Unit	Bio. Ref. Range	Method

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	0.98	ng/mL	0.64-1.52	CMIA	
THYROXINE (T4, TOTAL)	7.97	μg/dL	4.87-11.72	CMIA	
THYROID STIMULATING HORMONE (TSH)	3.270	μIU/mL	0.35-4.94	CMIA	

#### **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.NITU KUMARI

Age/Gender : 42 Y 3 M 4 D/F

UHID/MR No : CKHA.0000068134

Visit ID : CKHAOPV101053

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 456464

Collected : 16/Aug/2023 09:04AM

Received : 16/Aug/2023 01:24PM Reported : 16/Aug/2023 02:07PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

#### **DEPARTMENT OF CLINICAL PATHOLOGY**

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

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

COMPLETE URINE EXAMINATION (C	<b>UE)</b> , <i>URINE</i>			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	HAZY		CLEAR	Visual
рН	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	2	NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFED EHRLICH REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	POSITIVE +		NEGATIVE	LEUCOCYTE ESTERASE
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY	•		
PUS CELLS	6 - 7	/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







: Mrs.NITU KUMARI

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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<b>ARCOFEMI - MEDIWHEEL</b>	- FULL BODY ANN	JAL PLUS CHECK ADVANC	CED - FEMALE - 2D ECHO	- PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method

		×		
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE	NEGATIVE	Dipstick	
LIRINE GLUCOSE(EASTING)	NEGATIVE	NEGATIVE	Dinstick	

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

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