





Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

Visit ID

: CVIS.0000117209

Ref Doctor

: CVISOPV111727

: Dr.SELF Emp/Auth/TPA ID : ..58224

Collected : 24/Jun/2023 09:42AM

Received : 24/Jun/2023 12:11PM Reported : 24/Jun/2023 04:19PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC, DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 1 of 12









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DEPARTMENT OF HAEMATOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324 Result Unit Method Bio. Ref. Range

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	34.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.66	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	15.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,100	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (E	LC)			
NEUTROPHILS	54.6	%	40-80	Electrical Impedance
YMPHOCYTES	35.9	%	20-40	Electrical Impedance
EOSINOPHILS	3.1	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3330.6	Cells/cu.mm	2000-7000	Electrical Impedance
YMPHOCYTES	2189.9	Cells/cu.mm	1000-3000	Electrical Impedance
OSINOPHILS	189.1	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	390.4	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	153000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-20	Modified Westergre

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC, DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

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APOLLO CLINICS NETWORK







Age/Gender

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Collected : 24/Jun/2023 09:42AM

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: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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 FAC	TOR , WHOLE BLOOD-EDTA	
BLOOD GROUP TYPE	A	Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE	Forward & Reverse Grouping with Slide/Tube Agglutination

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Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No Visit ID : CVIS.0000117209 : CVISOPV111727

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : ..58224 Collected : 24/Jun/2023 09:43AM

Received : 24/Jun/2023 12:11PM Reported : 24/Jun/2023 01:13PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

GLUCOSE, FASTING , NAF PLASMA	86	mg/dL	70-100	GOD - POD	
-------------------------------	----	-------	--------	-----------	--

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	0

GLUCOSE, POST PRANDIAL (PP), 2	102	mg/dL	70-140	GOD - POD	
HOURS , NAF PLASMA					

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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: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT	OF BIO	CHEMISTRY
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ARCOFEMI - MEDIWHEEL - FULL BODY	Y HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Test Name	Result	Unit	Bio. Ref. Range	Method

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.3	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG),	105	mg/dL	Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

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

Note: Dietary preparation or fasting is not required.

- 1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
- 2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
- 3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control

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APOLLO CLINICS NETWORK







Age/Gender : 36 Y 6 M 0 D/F UHID/MR No : CVIS.0000117209 Visit ID : CVISOPV111727

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Collected : 24/Jun/2023 09:43AM

Received : 24/Jun/2023 12:11PM Reported : 24/Jun/2023 03:02PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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				

LIPID PROFILE , SERUM				
TOTAL CHOLESTEROL	163	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	77	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	33	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	130	mg/dL	<130	Calculated
LDL CHOLESTEROL	114.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.94		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

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: 24/Jun/2023 09:43AM

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

0.80	mg/dL	0.20-1.20	DIAZO METHOD
0.20	mg/dL	0.0-0.3	Calculated
0.60	mg/dL	0.0-1.1	Dual Wavelength
13	U/L	<35	Visible with P-5-P
23.0	U/L	14-36	UV with P-5-P
55.00	U/L	38-126	p-nitrophenyl phosphate
7.50	g/dL	6.3-8.2	Biuret
4.10	g/dL	3.5 - 5	Bromocresol Green
3.40	g/dL	2.0-3.5	Calculated
1.21		0.9-2.0	Calculated
	0.20 0.60 13 23.0 55.00 7.50 4.10 3.40	0.20 mg/dL 0.60 mg/dL 13 U/L 23.0 U/L 55.00 U/L 7.50 g/dL 4.10 g/dL 3.40 g/dL	0.20 mg/dL 0.0-0.3 0.60 mg/dL 0.0-1.1 13 U/L <35

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Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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

RENAL PROFILE/KIDNEY FUNCTION T	EST (RFT/KFT) , SER	JM		
CREATININE	0.70	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	18.10	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	8.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	2.5-6.2	Uricase
CALCIUM	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	105	mmol/L	98 - 107	Direct ISE

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Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

ARCOFEMI - MEDIWHEEL - FULL BODY	HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	PAN INDIA - FY2324
Tost Namo	Posult	Unit	Rio Pef Pange	Method

Test Name	Result	Unit	Bio. Ref. Range	Method
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GAMMA GLUTAMYL TRANSPEPTIDASE	18.00	U/L	12-43	Glyclyclycine
(GGT), SERUM				Nitoranalide

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Age/Gender : 36 Y 6 M 0 D/F

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Collected : 24/Jun/2023 09:43AM

Received : 24/Jun/2023 12:11PM Reported : 24/Jun/2023 02:58PM

Status : Final Report

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

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)	1.39	ng/ml	0.69-2.15	CLIA	
THYROXINE (T4, TOTAL)	119.00	ng/ml	52-127	CLIA	
THYROID STIMULATING HORMONE (TSH)	2.590	μIU/mL	0.3-4.5	CLIA	

Comment:

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

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

Note:

APOLLO CLINICS NETWORK

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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Collected : 24/Jun/2023 09:43AM

Received : 24/Jun/2023 12:56PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

: 24/Jun/2023 01:18PM

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

Reported

COMPLETE URINE EXAMINATION (CUI	E) , URINE			
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	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 MOU	NT AND MICROSCOPY			
PUS CELLS	0-1	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

DEPARTMENT OF CLINICAL	. PATHOLOGY
------------------------	-------------

|--|

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

URINE GLUCOSE(POST PRANDIAL) **NEGATIVE NEGATIVE** Dipstick

URINE GLUCOSE(FASTING) **NEGATIVE NEGATIVE** Dipstick

*** End Of Report ***

Result/s to Follow:

LBC PAP TEST (PAPSURE)

DR. V. SNEHAL M.D (PATH)

Consultant Pathologist



Patient Name : Mrs. SHALINI THONANANGI Age/Gender : 36 Y/F

UHID/MR No.

: CVIS.0000117209

OP Visit No

: CVISOPV111727

Sample Collected on

: RAD2030165

Reported on

: 24-06-2023 15:05

Ref Doctor Emp/Auth/TPA ID

LRN#

: SELF : ..58224 Specimen

:

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. ARUNA PEBBILIDMRD Radiology

Seura febbili

Radiology



Patient Name : Mrs. SHALINI THONANANGI Age/Gender : 36 Y/F

UHID/MR No.

: CVIS.0000117209

Sample Collected on :

LRN#

: RAD2030165

Ref Doctor : SELF **Emp/Auth/TPA ID** : ...58224

Reported on Specimen

OP Visit No

: CVISOPV111727 : 24-06-2023 14:41

pecimen :

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

<u>Liver</u> appears normal in size and echotexture. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal.

No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification.

No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and

CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney: 10 x 4.4 cm Left kidney: 10.6 x 4.8 cm

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

<u>Uterus</u> appears normal in size. It shows normal shape and echo pattern. It measures 7.9 x 3.5 x 4.6 cm. Endometrial echo-complex appears normal and measures 6.8 mm. No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

Right ovary: $3.2 \times 1.7 \text{ cm}$ Left ovary: $3.6 \times 1.6 \text{ cm}$

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-



Age/Gender

: 36 Y/F

No significant abnormality detected.

For clinico-lab correlation / follow - up / further work up. This is only a screening test.

Dr. ARUNA PEBBILIDMRD Radiology

Seura Jebbili

Radiology

Name: Mrs. SHALINI THONANANGI

Age/Gender: 36 Y/F Address: vizag

Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY

Rate Plan: VISHAKAPATNAM_06042023 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. N MUKUNDA RAO

Doctor's Signature

MR No: CVIS.0000117209 Visit ID: CVISOPV111727 Visit Date: 24-06-2023 09:31

Discharge Date:

Referred By: SELF

Name: Mrs. SHALINI THONANANGI

Age/Gender: 36 Y/F Address: vizag

Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY

Rate Plan: VISHAKAPATNAM_06042023 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. SRINIVAS RAO

Doctor's Signature

MR No: CVIS.0000117209 Visit ID: CVISOPV111727 Visit Date: 24-06-2023 09:31

Discharge Date:

Referred By: SELF

Mrs. SHALINI THONANANGI

Age/Gender: 36 Y/F Address: vizag

VISAKHAPATNAM, ANDHRA PRADESH Location:

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Sponsor: ARCOFEMI HEA VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor:

Consulting Doctor: Dr. R ABHISHEK

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CVIS.0000117209 CVISOPV111727 Visit ID: Visit Date: 24-06-2023 09:31

Discharge Date:

Referred By: SELF Name: Mrs. SHALINI THONANANGI

Age/Gender: 36 Y/F Address: vizag

Location: VISAKHAPATNAM, ANDHRA PRADESH

Doctor:

Department: LABORATORY

Rate Plan: VISHAKAPATNAM_06042023 Sponsor: ARCOFEMI HEALTHCARE LIMITED

Consulting Doctor: Dr. NAMRATHA ARISETTY

Doctor's Signature

MR No: CVIS.0000117209
Visit ID: CVISOPV111727
Visit Date: 24-06-2023 09:31

Discharge Date:

Referred By: SELF

Mrs. SHALINI THONANANGI

36 Y/F Age/Gender: Address: vizag

VISAKHAPATNAM, ANDHRA PRADESH Location:

Doctor:

Department: LABORATORY
Rate Plan: VISHAKAPATN
Sponsor: ARCOFEMI HE VISHAKAPATNAM_06042023 ARCOFEMI HEALTHCARE LIMITED Sponsor: Consulting Doctor: Dr. GOLI INDIRA PRIYADARSHINI

HT-CHIEF COMPLAINTS AND PRESENT KNOWN ILLNESS

SYSTEMIC REVIEW

HT-HISTORY

PHYSICAL EXAMINATION

SYSTEMIC EXAMINATION

IMPRESSION

RECOMMENDATION

Doctor's Signature

MR No: CVIS.0000117209 CVISOPV111727 Visit ID: Visit Date: 24-06-2023 09:31

Discharge Date:

Referred By: SELF

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
24-06-2023 15:03			-	_	156 cms	56 Kgs	%	%	Years	23.01	cms	cms	cms		AHLL07730

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
24-06-2023 15:03			-	_	156 cms	56 Kgs	%	%	Years	23.01	cms	cms	cms		AHLL07730

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
24-06-2023 15:03			-	_	156 cms	56 Kgs	%	%	Years	23.01	cms	cms	cms		AHLL07730

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
24-06-2023 15:03			-	_	156 cms	56 Kgs	%	%	Years	23.01	cms	cms	cms		AHLL07730

II)afe	Pulse (Beats/min)	_	Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Percentage	Fat Level	Body Age (Years)	BMI	Circum	Hip (cms)	(cms)	Waist & Hip Ratio	User
24-06-2023 15:03			-	_	156 cms	56 Kgs	%	%	Years	23.01	cms	cms	cms		AHLL07730





Physical Medical Examination Format

NAME: To shadini	DATE:- 24623
DESIGNATION:-	AGE:- 36 A
EMP CODE:-	UNIT/DEPARTMENT:-
BLOOD GROUP:-	MARTIAL STATUS:-MARRIED/UNMARRIED
~ MEDICAL EX	KAMINATION
Complaints (if any)	NO!
Personal /family history	161
Past Medical /Occupational History	101
Sensitivity/Allergy (if any)	101
Heart	Nomel
Any other Conditions	NI
	The state of the s
Height:- 156 Weight:- 56	BMI 23 Pulse 80
Temp: 98.6 Pulse	Resp:- 18 B.P 1006
Remarks	
Treatment Recommended (if any):	and the second s
+	Shalini for pre-employment
I Hereby Certify that I have examined Mr/Ms	
/periodical medical examination, I have found / not four	d any disease, Illness, contaglous illness
	* *
or St. St. St. Land to Modifically	T.C.
I Certify That Employee Is Medically	a 1.6.2
	e e e
Unfit Unfit	Temporarily Unfit
Σ π.	
	O PRIYADARSHINI
Signature Of Employee	Signature & Seal Of Medical Examiner With
	Registration Nord No. 63148 Apollo Family Physician Apollo Family Physician
과 그님 있는 그런 경기를 하는 것이 되는 요. 사람 회사에는 본 경기가 되어 요. 사이에 어디에 가는 것도 그렇게 되는 것이 되는 것이다.	





Name:

Mrs. SHALINI THONANANGI

Age/Gender:

36 Y/F

Address: Location:

vizag

Location: VISAKHAPATNAM, ANDHRA PRADESH Doctor:

Department: Rate Plan: LABORATORY

Sponsor:

VISHAKAPATNAM_06042023

ARCOFEMI HEALTHCARE LIMITED

Discharge Date: Referred By:

MR No:

Visit ID:

Visit Date:

SELF

CVIS.0000117209

CVISOPV111727

24-06-2023 09:31

Date	Pulse (Beats/min)		Resp (Rate/min)	Temp (F)	Height (cms)	(Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	0.5-10.18-1-14	Waist Circum (cms)	100 miles	Waist (cms)	Waist & Hip Ratio	User
24-06-2023 15:03	7.00	100/60 mmHg	18 Rate/min	98.6 F	156 cms	56 Kgs	%	%	Years	23.01	0	cms	cms		AHLL0773

BANK & BARODA

MYS. T. SHALINA

Years:

Gender: Test Done Date: 24/6/29

OPHTALMOLOGY SCREENING REPORT

VISION

DISTANCE

NEAR VISION.

COLOUR VISION

ANT. SEGMENT:

Conjunctiva

Cornea

Pupil

FUNDUS

IMPRESSION:

Signature

Apollo Health and Lifestyle Limited

ICIN: U85110TN2000PLC(046089) Regd. Office: 19 Bishop Gardens, R.A. Puram, Chennai 600 028, Tamilnadu, India / Email Id: info@apollohi.com



Dr.D.CHIRANJEEVI M.S. MCH.
Patient Name: Shallow 44 Age/sex: \$\frac{136\psi}{26\psi} Date: 26\psi/23
ENT CYCLEUP
BOTH EARS
EAT -NAD
TH NAD REALING - WAL
Septies - NL Septies - NL GURBUAGE NL
most
Julosa - Normel
ent execcor-Normal
Jue -





Patient Name Reported By:

Referred By

: Mrs. SHALINI THONANANGI

UHID

: CVIS.0000117209

: Dr. SHASHANKA CHUNDURI : SELF

OP Visit No Conducted Date : 36 Y/F

: CVISOPV111727

: 24-06-2023 13:10

ECG REPORT

Observation:-

- 1. Normal Sinus Rhythm.
- 2. Heart rate is 80 beats per minutes.
- 3. No pathological Q wave or S-T,T changes seen.
- 4. Normal P,Q,R,S,T waves and axis.
- 5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

NORMAL RESTING ECG.

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

Dr. SHASHANKA CHUNDURI







: Mrs. SHALINI THONANANGI

Age

: 36 Y F

UHID

: CVIS.0000117209

OP Visit No

: CVISOPV111727

Reported on

: 24-06-2023 15:04

Printed on

: 24-06-2023 15:05

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:24-06-2023 15:04

---End of the Report---

Jana Cebbili

Dr. ARUNA PEBBILI

DMRD Radiology

Radiology





TO DOOK 111 1000011711717

Patient Name

Mrs. SHALINI THONANANGI

: CVIS.0000117209

Conducted By: : Dr. SHASHANKA CHUNDURI

: SELF

Age

OP Visit No : CVISOPV111727 Conducted Date

: 24-06-2023 14:56

: 36 Y/F

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Referred By

Ao (cd) 2.4 CM LA (es) 2.6 CM LVID (ed) 3.4 CM LVID (es) 2.8 CM IVS (Ed) 0.9 CM LVPW (Ed) 1.0 CM EF 62.00% %FD 33.00%

MITRAL VALVE:

NORMAL AML NORMAL PML NORMAL

AORTIC VALVE TRICUSPID VALVE

NORMAL

NORMAL

RIGHT VENTRICLE

NORMAL

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:

PF:1.0m/sec. MF:E>A AF:0.8m/sec.





IMPRESSION:
NORMAL CARDIAC SIZE.
NO RWMA.
GOOD LV/RV FUNCTION.
TRIVIALMR/NO AR/NO TR/NO PAH. NO CLOT.
NO PERICARDIAL EFFUSION.
LVEF:62%.

Dr. SHASHANKA CHUNDURI





: Mrs. SHALINI THONANANGI

Age

: 36 Y F

UHID

: CVIS.0000117209

OP Visit No

: CVISOPV111727

Reported on

: 24-06-2023 14:39

Printed on

: 24-06-2023 14:41

Adm/Consult Doctor

Ref Doctor

: SELF

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

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

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

Right kidney: 10 x 4.4 cm Left kidney: 10.6 x 4.8 cm

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size. It shows normal shape and echo pattern. It measures 7.9 x 3.5 x 4.6 cm. Endometrial echo-complex appears normal and measures 6.8 mm.No intra/extra uterine gestational sac seen.

Both ovaries appear normal in size, shape and echotexture.

No evidence of any adnexal pathology noted.

Right ovary: 3.2 x 1.7 cm





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Adm/Consult Doctor

Ref Doctor

: SELF

Left ovary: 3.6 x 1.6 cm

There is no evidence of ascites/ pleural effusion seen.

IMPRESSION:-

No significant abnormality detected.

For clinico-lab correlation / follow - up / further work up. This is only a screening test.

Printed on:24-06-2023 14:39

---End of the Report---

Lounalebbili

Dr. ARUNA PEBBILI

DMRD Radiology

Radiology







: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor Emp/Auth/TPA ID : Dr.SELF :..58224

Collected

: 24/Jun/2023 09:42AM

Received

: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 04:19PM

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

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 1 of 12









: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

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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

HAEMOGLOBIN	12	g/dL	12-15	Spectrophotometer
PCV	34.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.66	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	83	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	33.2	g/dL	31.5-34.5	Calculated
R.D.W	15.1	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,100	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)			
NEUTROPHILS	54.6	%	40-80	Electrical Impedance
LYMPHOCYTES	35.9	%	20-40	Electrical Impedance
EOSINOPHILS	3.1	%	1-6	Electrical Impedance
MONOCYTES	6.4	%	2-10	Electrical Impedance
BASOPHILS	0	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3330.6	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2189.9	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	189.1	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	390.4	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	153000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	20	mm at the end of 1 hour	0-20	Modified Westergrer
PERIPHERAL SMEAR			- V	

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC, DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN

Page 2 of 12









Slide/Tube Aggluti Forward & Reverse

Grouping with Slide/Tube Agglutination

Patient Name

: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

Rh TYPE

: CVISOPV111727

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : ..58224

Collected

: 24/Jun/2023 09:42AM

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: 24/Jun/2023 04:46PM

Status

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

OOD-EDTA	4		Forward & Reverse
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POSITIVE

DEPARTMENT OF HAEMATOLOGY

Page 3 of 12









: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor Emp/Auth/TPA ID : Dr.SELF :..58224

Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 01:13PM

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

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

GOD - POD 70-100 86 mg/dL GLUCOSE, FASTING, NAF PLASMA

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

				ODASCHURA REPORTATION
GLUCOSE, POST PRANDIAL (PP), 2	102	mg/dL	70-140	GOD - POD
HOURS , NAF PLASMA				

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

Page 4 of 12







: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID Ref Doctor : CVISOPV111727

Emp/Auth/TPA ID

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL	FULL BODY HEALTH ANNUAL	PLUS CHECK - FEMALE	- 2D ECHO - PAN INDIA - FY2324
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Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.3	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	105	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 5 of 12









: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

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Visit ID Ref Doctor : CVISOPV111727

Emp/Auth/TPA ID

: Dr.SELF : ..58224 Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 03:02PM

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

TOTAL CHOLESTEROL	163	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	77	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	(33)	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	130	mg/dL	<130	Calculated
LDL CHOLESTEROL	114.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	15.4	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.94		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

11	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.

Page 6 of 12



TOOL O SUBJECT NETWORK TELANGAMA P. AD







: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor Emp/Auth/TPA ID : Dr.SELF : ..58224

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Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL	- FULL BODY HEALTH ANNUA	L PLUS CHECK - FEMALE	- 2D ECHO - PAN INDIA	- FY2324
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Test Name	Result	Unit	Bio. Ref. Range	Method

BILIRUBIN, TOTAL	0.80	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.60	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	13	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	23.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	55.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.50	g/dL	6.3-8.2	Biuret
ALBUMIN	4.10	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.40	g/dL	2.0-3.5	Calculated
A/G RATIO	1.21		0.9-2.0	Calculated







: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

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: 24/Jun/2023 09:43AM

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: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 03:02PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEE	L - FULL BODY HEALTH ANNUAL	. PLUS CHECK - FEMALE - 2D E	CHO - PAN INDIA - FY2324
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Test Name	Result	Unit	Bio. Ref. Range	Method

CREATININE	0.70	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	18.10	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	8.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.80	mg/dL	2.5-6.2	Uricase
CALCIUM	9.10	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	PMA Phenol
SODIUM	142	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	105	mmol/L	98 - 107	Direct ISE





: Mrs.SHALINI THONANANGI

Age/Gender UHID/MR No : 36 Y 6 M 0 D/F : CVIS.0000117209

Visit ID

Ref Doctor

: CVISOPV111727

Emp/Auth/TPA ID

: Dr.SELF :..58224

Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 03:02PM

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

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

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT), SERUM	18.00	U/L	12-43	Glyclyclycine Nitoranalide	
-----------------------------------------------	-------	-----	-------	-------------------------------	--







: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID : ..58224

Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:11PM

Reported

: 24/Jun/2023 02:58PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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
rest warne	Kesuit	Oilit	Dio. Itel. Italige	Mothod

THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM
-------------------------	----------------------

TRI-IODOTHYRONINE (T3, TOTAL)	1.39	ng/ml	0.69-2.15	CLIA
THYROXINE (T4, TOTAL)	119.00	ng/ml	52-127	CLIA
THYROID STIMULATING HORMONE (TSH)	2.590	μIU/mL	0.3-4.5	CLIA

Comment:

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

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

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)			
First trimester	0.1 - 2.5			
Second trimester	0.2 - 3.0			
Third trimester	0.3 - 3.0			

Page 10 of 12









: Mrs.SHALINI THONANANGI

Age/Gender UHID/MR No : 36 Y 6 M 0 D/F

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor Emp/Auth/TPA ID : Dr.SELF :..58224

Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:56PM

Reported

: 24/Jun/2023 01:18PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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

PHYSICAL EXAMINATION		0.60		
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		ja,		
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	1224 0777	NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			The state of the s
PUS CELLS	0-1	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	0.00	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Page 11 of 12









: Mrs.SHALINI THONANANGI

Age/Gender

: 36 Y 6 M 0 D/F

UHID/MR No

: CVIS.0000117209

Visit ID

: CVISOPV111727

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID :..58224 Collected

: 24/Jun/2023 09:43AM

Received

: 24/Jun/2023 12:56PM

Reported

: 24/Jun/2023 01:18PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

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	i .	NEGATIVE	Dipstick
	T T		NEGATIVE	

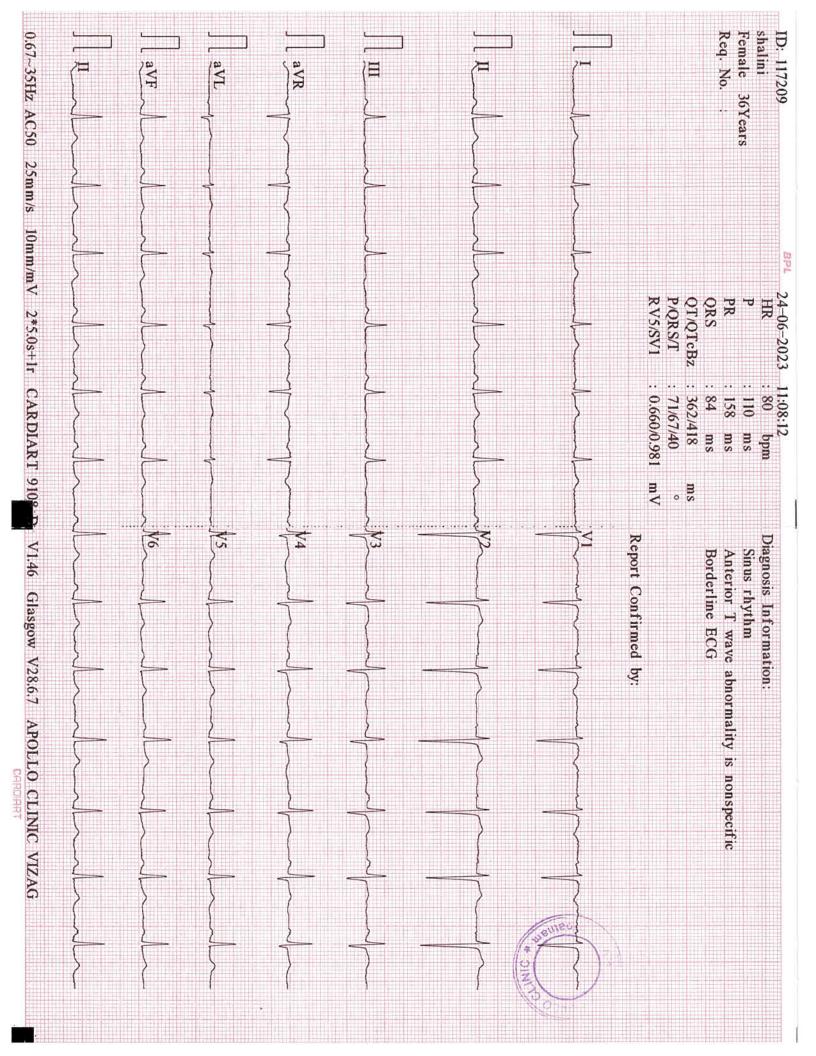
*** End Of Report ***

Result/s to Follow:

LBC PAP TEST (PAPSURE)

DR. V. SNEHAL M.D (PATH)

Consultant Pathologist







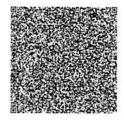
భారత ప్రభుత్వం Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ Unique Identification Authority of India

రిజిస్టేషన్/ Enrolment No.: 0650/90243/00001

To ಟಿ ಕಾಲಿನಿ T Shalini W/O K Lokesh 36-53-27/1 K R K Palem Kancharapalem Visakhapatnam (Urban) Visakhapatnam Andhra Pradesh - 530008 8555950610





మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

4826 4755 3126 VID: 9155 9640 5103 2666

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం Government of India



08/05/201-

ಟಿ ಕಾಲಿನಿ T Shalini పుట్టిన తేదీ/DOB: 16/02/1987 FEMALE

4826 4755 3126

VID: 9155 9640 5103 2666 నా ఆధార్, నా గుర్తింపు







సమాదారము / INFORMATION

- 📕 ఆధార్ అనేది గుర్తింపు రుజువు, పౌరసర్వానికి కాదు.
- 📓 ఆధార్ ప్రత్యేకమైనది మరియు సురకితమైనది.
- 🖩 సురక్షిత QR కోడ్/ఆఫ్లెస్ XML/ఆస్టెస్ ప్రమాణికరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.
- 🖩 ఆధార్ లెటర్, PVC కార్డ్, ఇ ఆధార్, ఎం ఆధార్ ఎంటి అన్ని రకాల ఆధార్ లు సమానంగా చెల్లుబాటు అవుతాయి. 12 అంకెల ఆధార్ నంబర్ స్థానంలో వర్సువల్ ఆధార్ ఐడెంటిటీ (VID)ని కూడా ఉపయోగించవచ్చు.
- 🖩 కనీసం 10 సంవత్సరాలకు ఒకసారి ఆధార్ ను అప్టేట్ చేయిండి
- 📕 వివిధ ప్రభుత్వ మరియు ప్రభుత్వతర ప్రయోజనాలు/సేవలను పొందడంలో ఆధార్ మీకు సహాయపడుతుంది.
- 🖩 మీ మొట్టల్ నెంటర్ మరియు ఈ-మెయిల్ ఐడీనీ ఆధార్ లో అప్డేట్ చేసుకోండి.
- 🖩 ఆధార్ సీవలను పొందేందుకు స్మార్ట్ ఫోనీలలో ఎం ఆధార్ యోపీను డానీలోడ్ చేసుకోండి.
- 🏿 భద్రతను నిర్ధారించడానికి లాక్/అన్లాక్ ఆధార్/బయోమిట్రిక్స్ ఫీచర్స్ ఉపయోగించండి
- 🔳 ఆధార్ ను అభ్యర్ధించే సంస్థలు తెగిన సమ్మతిని పొందవలస్ ఉంటుంది.
- Aadhaar is a proof of identity, not of citizenship.
- Aadhaar is unique and secure.
- Verify identity using secure QR code/offline XML/online Authentication.
- All forms of Aadhaar like Aadhaar letter, PVC Cards, eAadhaar and mAadhaar are equally valid. Virtual Aadhaar Identity (VID) can also be used in place of 12 digit Aadhaar number.
- Update Aadhaar at least once in 10 years.
- Aadhaar helps you avail various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app on smart phones to avail Aadhaar Services.
- Use the feature of lock/unlock Aadhaar/biometrics to ensure security.
- Entities seeking Aadhaar are obligated to seek due

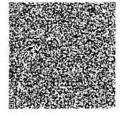


భారత విశేష్ట్ల గుర్తింపు ప్రాధికార సంస్థ Unique Identification Authority of India



వరునామా: W/O కే లోకేష్, 36-53-27/1, కే ఆర్ కే పాలెం, కంచరపాలెం, విశాఖపట్నం ఆర్బన్, విశాఖపట్నం, ఆంధ్ర ప్రదేశ్ - 530008

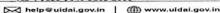
Address: W/O K Lokesh, 36-53-27/1, K R K Palem, Kancharapalem, Visakhapatnam (Urban), Visakhapatnam, Andhra Pradesh - 530008



4826 4755 3126

VID: 9155 9640 5103 2666







Fw: Health Check up Booking Confirmed Request(bobS41015), Package Code-PKG10000319, Beneficiary Code-58224

LOKESH <lokesh_b.com@rediffmail.com>

Sat 6/24/2023 9:23 AM

To:Vizag Apolloclinic <vizag@apolloclinic.com>

From: wellness@mediwheel.in Sent: Thu, 22 Jun 2023 18:00:41 To: lokesh_b.com@rediffmail.com Cc: customercare@mediwheel.in

Subject: Health Check up Booking Confirmed Request(bobS41015), Package Code-PKG10000319,

Beneficiary Code-58224

MedSave

We couldn't verify the sender of this email.

011-41195959 Email:wellness@mediwheel.in

Dear SHALINI THONANANGI.

Please find the confirmation for following request.

Booking Date : 20-06-2023

Arcofemi MediWheel Full Body Health Annual Plus Check Package Name

Female 2D ECHO

Name of

Diagnostic/Hospital: Apollo Clinic - Visakhapatnam

50, Plot 5, Sheethammapeta, Beside BVK college, Dwaraka Address of

Diagnostic/Hospital Nagar, Vishakapatnam,

: (0891) 258 5511 - 12 Contact Details

: Visakhapatnam City

: Andhra Pradesh State

Pincode : 530016

Appointment Date: 24-06-2023

Confirmation

: Confirmed Status

: 8:00am-8:30am Preferred Time