

Name : Mrs. ANUPAM PANDEY

Age: 31 Y

UHID: SCHI.0000014841

Address : ALIGARH

Sex: F



OP Number: SCHIOPV20592

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

Bill No : SCHI-OCR-7921

Date : 26.08.2023 09:58

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE (FASTING) ✓	
2	GAMMA GLUTAMYL TRANSFERASE (GGT) ✓	
3	HbA1c, GLYCATED HEMOGLOBIN ✓	
4	2D ECHO ✓ 1-15p~	
5	LIVER FUNCTION TEST (LFT) ✓	
6	X-RAY CHEST PA ✓	
7	GLUCOSE, FASTING ✓	
8	HEMOGRAM + PERIPHERAL SMEAR ✓	
9	ENT CONSULTATION	
10	FITNESS BY GENERAL PHYSICIAN	
11	GYNACOLOGY CONSULTATION ✓	
12	DIET CONSULTATION After Report	
13	COMPLETE URINE EXAMINATION ✓	
14	URINE GLUCOSE (POST PRANDIAL) ✓	
15	PERIPHERAL SMEAR ✓	
16	ECG ✓	
17	BLOOD GROUP ABO AND RH FACTOR ✓	
18	LIPID PROFILE ✓	
19	BODY MASS INDEX (BMI)	
20	LBC PAP TEST - PAPSURE ✓	
21	OPHTHAL BY GENERAL PHYSICIAN ✓	
22	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT) ✓	
23	ULTRASOUND - WHOLE ABDOMEN ✓	
24	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) ✓	
25	DENTAL CONSULTATION ✓	
26	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL). 12:30 ✓	

HbA1c 6.1
Dyslip

Height:	158cm
Weight:	64.6
B.P.:	104/72~
Pulse:	56/mt

SpO2 - 99

From: Wellness, MediWheel, New Delhi, cwellness@mediwheel.in
 Sent: 25 August 2023 11:21
 To: Corporate Apollo Clinic, ccorporat@apolloclinic.com
 Cc: Customer Care, MediWheel, New Delhi, ccustomercare@mediwheel.in; Network, MediWheel, New Delhi, cnetwork@mediwheel.in; Deepak, cdeepak@apolloclinic.com
 Subject: Health checkup booking no. 35 (Annual)

Dear Team

Please find the attached health checkup booking file and confirm the same.

Thanks & Regards
 Lav Gupta

S. No.	Company Name	Booking ID	EMPLOYEE	AGE	GENDER	EMAIL	CONTACT NO	Appointment Date	Appointment Time	CLINIC NAME	CLINIC STATE	CLINIC CITY	CLINIC ADDRESS	Booking Status	Remarks
1	Arcotem/	bs64502	Anupam Pandey	31	Female	chaitanya.pandey@bankofbaroda.com	9918026451	25-08-2023	9:00 AM	Apollo Spe	DELHI	Delhi	R-2, Nehru	Confirmed at 9:00 Am	
2	Arcotem/	bs64502	MR. PANDEY CHAITANYA	32	Male	chaitanya.pandey@bankofbaroda.com	9918026451	25-08-2023	9:00 AM	Apollo Spe	DELHI	Delhi	R-2, Nehru	Confirmed at 9:00 Am	

DIGITAL X-RAY REPORT

NAME: ANUPAM	DATE: 26.08.2023
UHID NO : 14841	AGE: 31YRS/ SEX: F

X-RAY CHEST PA VIEW

Both the lung fields show no active parenchymal pathology.

Both the costophrenic angles are clear.

Heart size is normal.

Both the domes of diaphragm are normal.

Bony thorax appears normal.

IMPRESSION: NO SIGNIFICANT ABNORMALITY

Please correlate clinically and with lab investigations


DR. MONICA CHHABRA
Consultant Radiologist

Dr. MONICA CHHABRA
Consultant Radiologist
DMC No. 18744
Apollo Spectra Hospitals
New Delhi-110019

Dr. Sheetal Agarwal

MBBS, D.N.B., M.N.A.M.S

Sr. Consultant Obst. & Gynae

Specialist: High Risk Pregnancy & Infertility

DMC Regn. No. 14896

For Appointment: +91 11 40465555

Mob.: +91 9910995018

26/08/23

Anupam Bunday, 31/11.

Routine Gynae check up

Ref - Ref

Ref: ?

O/y - P26, Both WLS

P/S
P/U / AAD

CBC taken



Apollo Spectra Hospitals: Plot No. A-2, Chirag Enclave, Greater Kailash -1, New Delhi -110048

Ph: 011-40465555, 9910995018 | www.apollospectra.com

Apollo Specialty Hospital Pvt. Ltd.

CIN - U85100TG2009PTC099414

Regd. Office: 7-1-617/A, 615 & 616, Imperial Towers, 7th Floor, Ameerpet, Hyderabad, Telangana - 500038

Ph No: 040-4904 7777 | www.apollohl.com

29/08/23

Mr. Anupam Pandey
SIF

17/08/23 →
6/08/23 →
(underlined)

Go - NO writech
Lunch (SE)

No-4/16

4/16 - Thyroid.
d. 17.

12/08/23 mm - L

Color vision (SE) normal

Ref (SE) + No contact - eye
G + No - eye

SIF room - (SE) not eq. (SE)
SIF room

Adv. Complete Eye Day

(SE)



26/08/2023

Mr. Chaitanya Pandey,
35 Yrs / Male,

C/C :- Regular Dental check-up -

M/H :- N.R.

PDH :- N.R.

O/E :- Calculus +

Stains present -

Carious not

8	6	8
		8

TOP + ve	8
	8

Advised :- Sealing & Oral Propylaxis
+ Polishing

→ Restoration

8	6	6
		6

→ X-Ray

8	6	8
8	6	8

Handwritten signature

GE MAC1200 ST PANDEY, ANUPAM 000014841, APOLLO SPECIALITY HOSPITALS
Female, 31 Years (27.07.1992)

HR 59 bpm

Measurement Results

QRS : 80 ms
QT/QTcB : 402 / 402 ms
PR : 128 ms
P : 102 ms
RR/PP : 998 / 1010 ms
P/QRS/T : 40 / 15 / 0 degrees

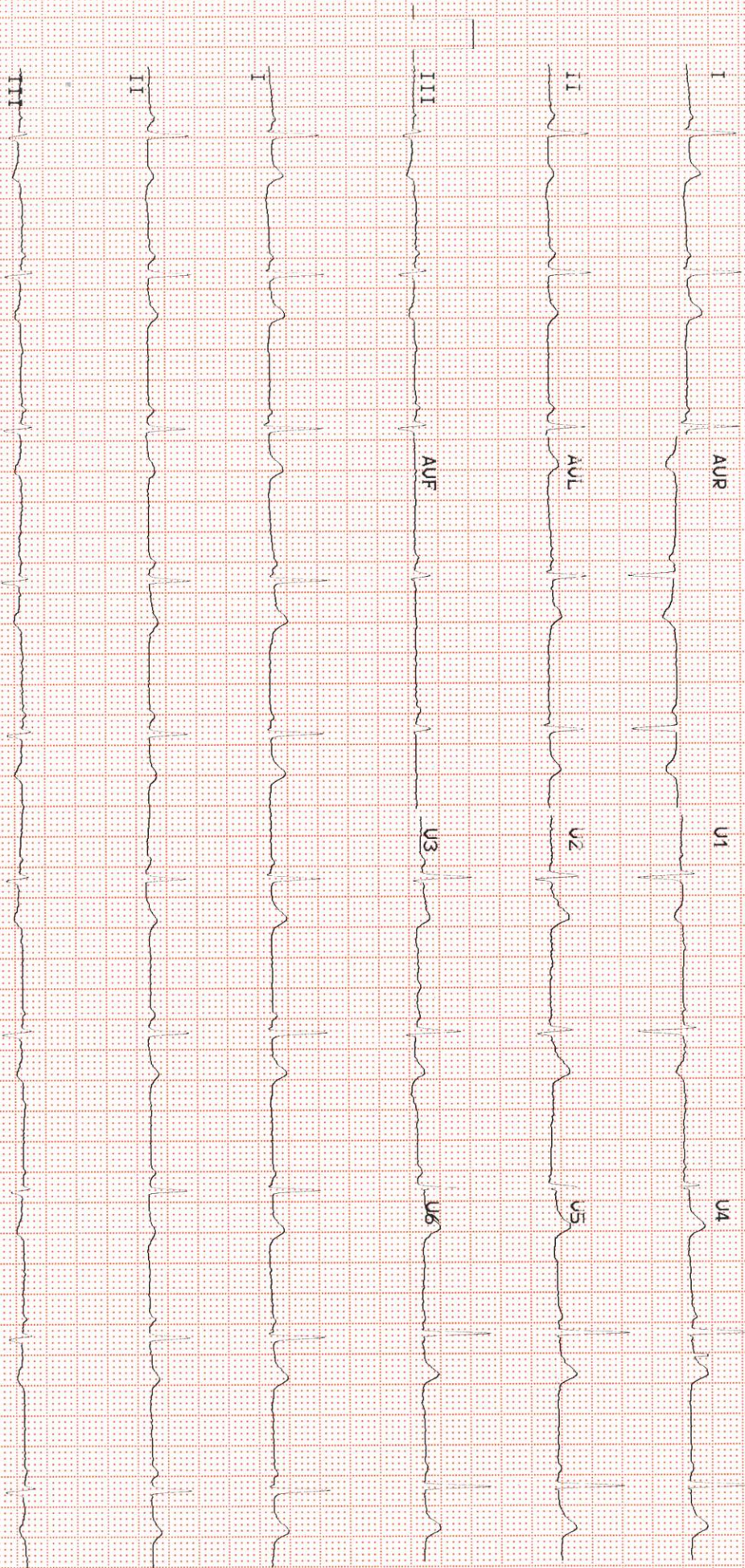
Sokolow : 1.8 mV
NK : 8



Interpretation:
R/S inversion area between U1 and U2
Probably normal ECG

WNL

Unconfirmed report.



NAME :	ANUPAM PANDEY	AGE/SEX:	31	YRS./F
UHID :	14841			
REF BY :	APOLLO SPECTRA	DATE:-	26.08.2023	

ULTRASOUND WHOLE ABDOMEN

Liver: Appears normal in size, and echotexture. Intrahepatic biliary radicles are not dilated. No focal or diffuse lesion is seen. CBD and portal vein are normal in caliber.

Gall Bladder: normally distended with clear lumen and normal wall thickness. No calculus or sludge is seen.

Pancreas and Spleen: Appears normal in size and echotexture.

Both Kidneys: are normal in size, shape, and echopattern. The parenchymal thickness is normal and cortico-medullary differentiation is well maintained. Pelvicalyceal systems are not dilated. No calculus or mass lesion is seen. Ureter is not dilated.

Urinary Bladder: is normally distended and shows no obvious calculus or sediments. Bladder wall thickness is normal.

Prevoid urine volume : 520 cc

Post void residual urine volume: 30 cc

Uterus is retroverted and normal in size. It measures 7 x 3.6 cm. Outline is smooth. Myometrium is normal. Endometrial echoes are normal and measures 5 mm

Both ovaries are normal in size ,shape and echotexture.

Right ovary: 2.9 x 1.7 cm

Left ovary: 3.4 x 1.8 cm

No obvious adenexal mass is seen. No free fluid seen.

IMPRESSION: NO SIGNIFICANT ABNORMALITY.

Please correlate clinically and with lab. Investigations.

Monica Chhabra
DR. MONICA CHHABRA
CONSULTANT RADIOLOGIST

Dr. MONICA CHHABRA
Consultant Radiologist
DMC No. 18744
Apollo Spectra Hospitals
New Delhi-110019

Patient Name : Mrs. ANUPAM PANDEY Age : 31 Y/F
 UHID : SCHI.0000014841 OP Visit No : SCHIOPV20592
 Conducted By: : Dr. MUKESH K GUPTA Conducted Date : 26-08-2023 15:50
 Referred By : SELF

MITRAL VALVE

Morphology AML-**Normal**/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming.
 PML-**Normal**/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.
 Subvalvular deformity Present/**Absent**. Score : _____
 Doppler Normal/Abnormal E>A **E>A**
 Mitral Stenosis Present/**Absent** RR Interval _____msec
 EDG _____mmHg MDG _____mmHg MVA _____cm²
 Mitral Regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

TRICUSPID VALVE

Morphology **Normal**/Atresia/Thickening/Calcification/Prolapse/Vegetation/Doming.
 Doppler **Normal**/Abnormal
 Tricuspid stenosis Present/**Absent** RR interval _____msec.
 EDG _____mmHg MDG _____mmHg
 Tricuspid regurgitation : **Absent**/Trivial/Mild/Moderate/Severe Fragmented signals
 Velocity _____msec. Pred. RVSP=RAP+ _____mmHg

PULMONARY VALVE

Morphology **Normal**/Atresia/Thickening/Doming/Vegetation.
 Doppler **Normal**/Abnormal.
 Pulmonary stenosis Present/**Absent** Level
 PSG _____mmHg Pulmonary annulus _____mm
 Pulmonary regurgitation **Absent**/Trivial/Mild/Moderate/Severe
 Early diastolic gradient _____mmHg. End diastolic gradient _____mmHg

AORTIC VALVE

Morphology **Normal**/Thickening/Calcification/Restricted opening/Flutter/Vegetation
 No. of cusps 1/2/3/4
 Doppler **Normal**/Abnormal
 Aortic stenosis Present/**Absent** Level
 PSG _____mmHg Aortic annulus _____mm
 Aortic regurgitation **Absent**/Trivial/Mild/Moderate/Severe.

Measurements	Normal Values	Measurements	Normal values
Aorta	2.2 (2.0 – 3.7cm)	LA es	2.7 (1.9 – 4.0cm)
LV es	2.7 (2.2 – 4.0cm)	LV ed	4.4 (3.7 – 5.6cm)
IVS ed	0.8 (0.6 – 1.1cm)	PW (LV)	0.8 (0.6 – 1.1cm)
RV ed	(0.7 – 2.6cm)	RV Anterior wall	(upto 5 mm)
LVVd (ml)		LVVs (ml)	
EF	64% (54%-76%)	IVS motion	Normal /Flat/Paradoxical

CHAMBERS :

LV **Normal**/Enlarged/**Clear**/Thrombus/Hypertrophy
 Contraction **Normal**/Reduced
 Regional wall motion abnormality **Absent**
 LA **Normal**/Enlarged/**Clear**/Thrombus
 RA **Normal**/Enlarged/**Clear**/Thrombus
 RV **Normal**/Enlarged/**Clear**/Thrombus

PERICARDIUM

COMMENTS & SUMMARY

- v Normal LV systolic function
- v No RWMA, LVEF=64%
- v No AR,PR,MR & TR
- v No I/C clot or mass
- v Good RV function
- v Normal pericardium
- v No pericardial effusion



Dr. M K Gupta
M.B.B.S, MD,FIACM
Senior Consultant Cardiologist

Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 11:32AM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 04:15PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF HAEMATOLOGY

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

PERIPHERAL SMEAR , WHOLE BLOOD EDTA



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DEPARTMENT OF HAEMATOLOGY

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

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

HAEMOGLOBIN	12.1	g/dL	12-15	CYANIDE FREE COLOUROMETER
PCV	36.30	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.08	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	89	fL	83-101	Calculated
MCH	29.6	pg	27-32	Calculated
MCHC	33.3	g/dL	31.5-34.5	Calculated
R.D.W	12.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,810	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	50.6	%	40-80	Electrical Impedance
LYMPHOCYTES	37	%	20-40	Electrical Impedance
EOSINOPHILS	3	%	1-6	Electrical Impedance
MONOCYTES	8.3	%	2-10	Electrical Impedance
BASOPHILS	1.1	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3445.86	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	2519.7	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	204.3	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	565.23	Cells/cu.mm	200-1000	Electrical Impedance
BASOPHILS	74.91	Cells/cu.mm	0-100	Electrical Impedance
PLATELET COUNT	200000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05	mm at the end of 1 hour	0-20	Modified Westergren
PERIPHERAL SMEAR				

RBCs ARE NORMOCYTIC NORMOCHROMIC.

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

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



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DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA

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



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 12:39PM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 01:24PM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 03:29PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	105	mg/dL	70-100	GOD - POD
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Comment:

As per American Diabetes Guidelines

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:

- 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.
- 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)	112	mg/dL	70-140	GOD - POD
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Comment:

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

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 03:27PM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 05:01PM
Visit ID : SCHIOPV20592	Status : Final Report
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Test Name	Result	Unit	Bio. Ref. Range	Method
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , <i>WHOLE BLOOD EDTA</i>	6.1	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , <i>WHOLE BLOOD EDTA</i>	128	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)

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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 11:31AM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF BIOCHEMISTRY

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

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

TOTAL CHOLESTEROL	202	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	105	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	45	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	157	mg/dL	<130	Calculated
LDL CHOLESTEROL	136	mg/dL	<100	Calculated
VLDL CHOLESTEROL	21	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.49		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 HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.80	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	30	U/L	<35	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	32.0	U/L	14-36	UV with P-5-P
ALKALINE PHOSPHATASE	42.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.70	g/dL	6.3-8.2	Biuret
ALBUMIN	4.40	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.33		0.9-2.0	Calculated



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Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.70	mg/dL	0.5-1.04	Creatinine amidohydrolase
UREA	27.70	mg/dL	15-36	Urease
BLOOD UREA NITROGEN	12.9	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.60	mg/dL	2.5-6.2	Uricase
CALCIUM	8.90	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.60	mg/dL	2.5-4.5	PMA Phenol
SODIUM	140	mmol/L	135-145	Direct ISE
POTASSIUM	4.0	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	104	mmol/L	98 - 107	Direct ISE



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 11:31AM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 03:26PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	13.00	U/L	12-43	Glycylglycine Nitoranalide



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 11:29AM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 07:31PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-iodothyronine (T3, TOTAL)	0.99	ng/mL	0.67-1.81	ELFA
THYROXINE (T4, TOTAL)	8.21	µg/dL	4.66-9.32	ELFA
THYROID STIMULATING HORMONE (TSH)	1.920	µIU/mL	0.25-5.0	ELFA

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

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.

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.

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.

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

Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 11:29AM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 07:31PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

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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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.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 12:36PM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 03:39PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick

BIOCHEMICAL EXAMINATION

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

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

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

Comment:

- Biochemical Examination of urine sample was performed by reflectance photometry and confirmed by alternative methods.
- The samples are assessed for integrity and adequacy before processing.



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 10:14AM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 12:36PM
UHID/MR No : SCHI.0000014841	Reported : 26/Aug/2023 03:33PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

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

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

Result/s to Follow:
LBC PAP TEST (PAPSURE)



Dr. SHWETA GUPTA
MBBS,MD (Pathology)
Consultant Pathology



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



Patient Name : Mrs.ANUPAM PANDEY	Collected : 26/Aug/2023 03:07PM
Age/Gender : 31 Y 0 M 30 D/F	Received : 26/Aug/2023 05:19PM
UHID/MR No : SCHI.0000014841	Reported : 28/Aug/2023 12:24PM
Visit ID : SCHIOPV20592	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SZGSDFG	

DEPARTMENT OF CYTOLOGY

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

LBC PAP TEST (PAPSURE) , CERVICAL BRUSH SAMPLE

	CYTOLOGY NO.	L/1264/23
I	SPECIMEN	
a	SPECIMEN ADEQUACY	ADEQUATE
b	SPECIMEN TYPE	LIQUID-BASED PREPARATION (LBC)
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
c	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
d	COMMENTS	SATISFACTORY FOR EVALUATION
II	MICROSCOPY	Smear shows sheets of benign superficial and intermediate squamous cells in a background of mild inflammation
III	RESULT	
a	EPITHEIAL CELL	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
b	ORGANISM	NIL
IV	INTERPRETATION	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

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

*** End Of Report ***



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



Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

Lab Report Summary



Blood

- 14 Parameters
- 1 Parameters



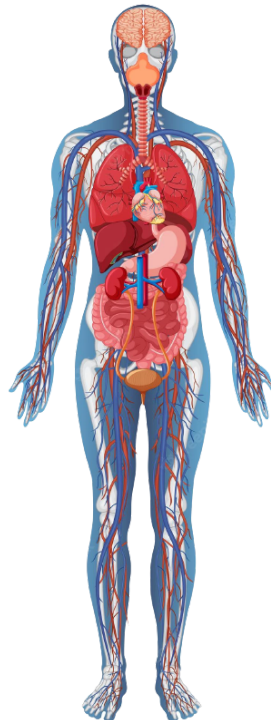
Glands & Endocrine System

- 4 Parameters
- 1 Parameters



Heart/Circulatory System

- 2 Parameters



Stomach & Liver/Digestive System

- 11 Parameters



Kidney/Genito-Urinary System

- 9 Parameters

image

Navneet Kaur

Doctor's Signature

Patient Name : **ANUPAM PANDEY**
 Gender/Age : Female / 31 Y
 Weight/Height : 158 Cms / 64.6 Kgs
 Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
 Qualification : MBBS

Lab Parameters Needing Attention

Test Name	Values	Reference Ranges
Blood 1		
PCV	36.30* %	40 - 50 %
Glands & Endocrine System 1		
GLUCOSE, FASTING	105* Mg/DL	70 - 100 Mg/DL

Purpose Of Visit : Corporate Health Check
 ARCOFEMI MEDIWHEEL
 Current Symptoms : Gastric Reflux
 VAGINAL INFECTION - 15 days - Mild - Gradual

Past Medical History

Medical History : Thyroid Disorder - 3years - On Treatment
 Surgical History : Elective Cesarean Section (Procedure)
 Personal History
 Diet : Vegetarian
 Physical Activity : Walking

Family History

Diabetics : Mother
 Hypertension : Mother

Lab Panel Results



Navneet Kaur
Doctor's Signature

Patient Name : **ANUPAM PANDEY**
 Gender/Age : Female / 31 Y
 Weight/Height : 158 Cms / 64.6 Kgs
 Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
 Qualification : MBBS

GLUCOSE, FASTING

Sample Collected On : **26-08-2023**

GLUCOSE, FASTING	105* Mg/DL	70 - 100 Mg/DL
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COMPLETE URINE EXAMINATION

Sample Collected On : **26-08-2023**

COLOUR YELLOW	TRANSPARENCY CLEAR	URINE PROTEIN NEGATIVE	GLUCOSE NEGATIVE	URINE BILIRUBIN NEGATIVE
URINE KETONES (RANDOM) NEGATIVE	UROBILINOGEN NORMAL	BLOOD NEGATIVE	NITRITE NEGATIVE	LEUCOCYTE ESTERASE NEGATIVE
PUS CELLS 0-2 /Hpf	EPITHELIAL CELLS 0-2 /Hpf	RBC ABSENT /Hpf	CASTS ABSENT	CRYSTALS ABSENT

PH	5.5	5 - 7.5
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SP. GRAVITY	1.020	1.002 - 1.03
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GAMMA GLUTAMYL TRANFERASE (GGT)

Sample Collected On : **26-08-2023**

GAMMA GLUTAMYL TRANSPEPTIDASE (GGT)	13.00 U/L	12 - 43 U/L
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LIPID PROFILE

Sample Collected On : **26-08-2023**

TOTAL CHOLESTEROL	202* Mg/DL	0 - 200 Mg/DL
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TRIGLYCERIDES	105 Mg/DL	50 - 150 Mg/DL
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Navneet Kaur
Doctor's Signature

Patient Name : **ANUPAM PANDEY**
 Gender/Age : Female / 31 Y
 Weight/Height : 158 Cms / 64.6 Kgs
 Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
 Qualification : MBBS

HDL CHOLESTEROL	45* Mg/DL	40 - 0 Mg/DL
NON-HDL CHOLESTEROL	157* Mg/DL	0 - 130 Mg/DL
LDL CHOLESTEROL	136* Mg/DL	0 - 100 Mg/DL
VLDL CHOLESTEROL	21 Mg/DL	5 - 30 Mg/DL
CHOL / HDL RATIO	4.49	0 - 4.97

THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)

Sample Collected On : **26-08-2023**

TRI-IODOTHYRONINE (T3, TOTAL)	0.99 Ng/ML	0.67 - 1.81 Ng/ML
THYROXINE (T4, TOTAL)	8.21 Mg/DL	4.66 - 9.32 Mg/DL
THYROID STIMULATING HORMONE (TSH)	1.920 MIU/ML	0.25 - 5 MIU/ML

LIVER FUNCTION TEST (LFT)

Sample Collected On : **26-08-2023**

BILIRUBIN, TOTAL	0.80 Mg/DL	0.2 - 1.2 Mg/DL
BILIRUBIN CONJUGATED (DIRECT)	0.10 Mg/DL	0 - 0.3 Mg/DL



Navneet Kaur
Doctor's Signature

Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

BILIRUBIN (INDIRECT)	0.70 Mg/DL	0 - 1.1 Mg/DL
ALANINE AMINOTRANSFERASE (ALT/SGPT)	30 U/L	0 - 34.99 U/L
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	32.0 U/L	14 - 36 U/L
ALKALINE PHOSPHATASE	42.00 U/L	38 - 126 U/L
PROTEIN, TOTAL	7.70 G/DL	6.3 - 8.2 G/DL
ALBUMIN	4.40 G/DL	3.5 - 5 G/DL
GLOBULIN	3.30 G/DL	2 - 3.5 G/DL
A/G RATIO	1.33	0.9 - 2

URINE GLUCOSE (FASTING)

URINE GLUCOSE (FASTING)
NEGATIVE

Sample Collected On : 26-08-2023

HBA1C, GLYCATED HEMOGLOBIN

HBA1C, GLYCATED HEMOGLOBIN

6.1* %

0 - 0 %

Sample Collected On : 26-08-2023



Navneet Kaur

Doctor's Signature

Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

ESTIMATED AVERAGE GLUCOSE (EAG)

128* Mg/DL

0 - 0 Mg/DL

HEMOGRAM

Sample Collected On : 26-08-2023

TOTAL LEUCOCYTE COUNT (TLC)

6,810 cells/Cu.mm

HAEMOGLOBIN

12.1 G/DL

12 - 15 G/DL

PCV

36.30* %

40 - 50 %

RBC COUNT

4.08 Million/Cu.mm

3.8 - 4.8 Million/Cu.mm

MCV

89 FL

83 - 101 FL

MCH

29.6 Pg

27 - 32 Pg

MCHC

33.3 G/DL

31.5 - 34.5 G/DL

R.D.W

12.5 %

11.6 - 14 %

NEUTROPHILS

50.6 %

40 - 80 %

LYMPHOCYTES

37 %

20 - 40 %



Navneet Kaur

Doctor's Signature

Patient Name : **ANUPAM PANDEY**
 Gender/Age : Female / 31 Y
 Weight/Height : 158 Cms / 64.6 Kgs
 Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
 Qualification : MBBS

EOSINOPHILS	3 %	1 - 6 %
MONOCYTES	8.3 %	2 - 10 %
BASOPHILS	1.1 %	0 - 2 %
NEUTROPHILS	3445.86 Cells/Cu.mm	2000 - 7000 Cells/Cu.mm
LYMPHOCYTES	2519.7 Cells/Cu.mm	1000 - 3000 Cells/Cu.mm
EOSINOPHILS	204.3 Cells/Cu.mm	20 - 500 Cells/Cu.mm
MONOCYTES	565.23 Cells/Cu.mm	200 - 1000 Cells/Cu.mm
BASOPHILS	74.91 Cells/Cu.mm	0 - 100 Cells/Cu.mm
PLATELET COUNT	200000 Cells/Cu.mm	150000 - 410000 Cells/Cu.mm
ERYTHROCYTE SEDIMENTATION RATE (ESR)	05 Mm At The End Of 1 Hour	0 - 20 Mm At The End Of 1 Hour

RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)

Sample Collected On : **26-08-2023**

CREATININE	0.70 Mg/DL	0.5 - 1.04 Mg/DL
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Navneet Kaur
Doctor's Signature

Patient Name : **ANUPAM PANDEY**
 Gender/Age : Female / 31 Y
 Weight/Height : 158 Cms / 64.6 Kgs
 Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
 Qualification : MBBS

UREA	27.70 Mg/DL	15 - 36 Mg/DL
BLOOD UREA NITROGEN	12.9 Mg/DL	8 - 23 Mg/DL
URIC ACID	4.60 Mg/DL	2.5 - 6.2 Mg/DL
CALCIUM	8.90 Mg/DL	8.4 - 10.2 Mg/DL
PHOSPHORUS, INORGANIC	3.60 Mg/DL	2.5 - 4.5 Mg/DL
SODIUM	140 Mmol/L	135 - 145 Mmol/L
POTASSIUM	4.0 Mmol/L	3.5 - 5.1 Mmol/L
CHLORIDE	104 Mmol/L	98 - 107 Mmol/L

BLOOD GROUP ABO AND RH FACTOR

BLOOD GROUP TYPE	Rh TYPE
B	POSITIVE

Sample Collected On : **26-08-2023**

URINE GLUCOSE(POST PRANDIAL)

URINE GLUCOSE(POST PRANDIAL)
NEGATIVE

Sample Collected On : **26-08-2023**

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)

Sample Collected On : **26-08-2023**



Navneet Kaur
Doctor's Signature

Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

112 Mg/DL

70 - 140 Mg/DL

Radiology Test

Radiology Reports Are Available Separately For Your Reference If Applicable

Physical Examination

Vitals

Weight : 64.6 Kgs
Height : 158 Cms
BMI : 25.88 BMI
Pulse : 56 BPM
SpO2 : 99 %
Temperature : 98.6 F

Physical Exam

Pallor : No
Icterus : No
Cyanosis : No
Clubbing : No
Koilonychia : No
Edema : No

Cardiovascular System

Rhythm : Regular
Systolic(Mm Of Hg) : 104
Diastolic(Mm Of Hg) : 72
Heart Sounds : S1S2+

Respiratory System

Breath Sounds : Normal



Navneet Kaur

Doctor's Signature

Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

Work Life Style

Type Of Work : Low Activity

Happiness Score

Sleeping Well : Good
Stress At Home : No
Stress At Work : No

Wellness Prescription

Advice On Physical Activity : Yoga/Relaxation Exercises
Exercise
Advice On Diet : Low Cholesterol
Diabetes

Follow Up And Review Plan

Follow Up : HBA1c - After 3 Months

Medications

Medication	Dosage	When To Take	Frequency	Start Date	End Date
TAB BRAVIA DSR	1	Before Food	Once Daily	08/27/2023	09/09/2023
Tayo-60K 6000 IU Oral Tablet	1	After Food	Once In The Week	08/27/2023	11/30/2023
CAP ABSOLUTE WOMEN	1	After Food	Once Daily	08/27/2023	11/30/2023
Zocon 150 Mg Oral Tablet	1	After Food	Once In The Week	08/27/2023	09/23/2023

 image

Navneet Kaur

Doctor's Signature

Patient Name : **ANUPAM PANDEY**
Gender/Age : Female / 31 Y
Weight/Height : 158 Cms / 64.6 Kgs
Appointment Id : c6kw00qk3m -

Doctor Name : Navneet Kaur
Qualification : MBBS

Risk Scores

Apollo Hospitals Thank You For Your Consent

Based On Current Parameters, Personal & Family History, AI Enabled Tools Derive Health Risk Scores To Alert Participant On His/Her Likely Predisposition To A Disease To Aid Early Detection & Early Medical Intervention To Mitigate The Risk.

AICVD Risk Score **Low Risk**

Report Name	Risk Score	Acceptable Score
Risk Of Heart Disease	2	2

Info: Your Likelihood To Cardiovascular Disease Is With In Acceptable Range To Other People Of Your Age & Gender In Next 10 Years

Note: The Risk Category Is Determined Through The Ratio Between Patient Score And Acceptable Score At Multiple Decimal Points. The Outputs Are Shown In Whole Numbers

Pre-Diabetes Risk Score **Low Risk**

Report Name	Risk Score
Prediabetes	0.9

Note: The Risk Status Is Computed With The Machine Learning Algorithm And Categorised Based On The Individual's Chances Of Prediabetes / Diabetes. It Also Provides A Score Based On The Probability Of The Risk Status.



Navneet Kaur

Doctor's Signature